



**ADAMH Board of Franklin County  
Board of Trustees  
Board Meeting  
September 24, 2019, 5:30 pm - 7:30 pm  
ADAMH Board Room**

**AGENDA and DOCUMENTS**

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# **AGENDA**

**ADAMH Board of Franklin County  
Board of Trustees  
Board Meeting  
Tuesday, September 24, 2019, 5:30 pm - 7:30 pm  
ADAMH Board Room**

## **I. Approve Agenda & Minutes**

- A. August Board Minutes
- B. September Coordinating Committee Minutes
- C. July 10 Audit Committee Minutes
- D. September 10 Audit Committee Minutes
- E. September Search Committee Minutes
- F. September CFAC Summary Minutes

## **II. Reports & Presentations**

- A. Community Participation
- B. Mental Health America of Franklin County - Kenton Beachy
- C. Financial / Audit Committee Report
- D. Board Chair Report

## **III. Consent Agenda**

- A. The Village Network Reception Center Security
- B. Franklin County Jail Enhancement Project
- C. Community for New Direction Mental Health Services
- D. Near East Side Partnership

## **IV. New Business**

## **V. Old Business**

## **VI. Media Report**

## **VII. Adjournment**



ALCOHOL, DRUG AND MENTAL HEALTH BOARD  
OF FRANKLIN COUNTY  
MEETING MINUTES  
August 27, 2019

**MEMBERS PRESENT:** Carole Anderson, Peggy Anderson, Trudy Bartley, Scott Doran, Karri Dosmann, Bipender Jindal, Mitzi Kirkbride, Jennifer Richardson, Sharon McCloy-Reichard, Holly Dabelko-Schoeny, Ron Walters, Nathan Wymer

**MEMBERS ABSENT:** Ann Seren, Terree Stevenson

Peggy Anderson called the meeting to order at 5:34 p.m.

Peggy Anderson welcomed Holly Dabelko-Schoeny, the newest ADAMH Board of Trustee member. Dr. Dabelko-Schoeny is an Associate Professor in Social Work at The Ohio State University. Previously, she worked at the Central Ohio Area Agency on Aging and the Franklin County Office on Aging.

Peggy Anderson also mentioned three of ADAMH Board of Trustee members agreed to serve another term. Karri Dosmann, Bipender Jindal and Ann Seren have been reappointed.

Peggy Anderson asked the Board of Trustee members to refer to a handout of the Audit Committee Minutes. They were recently updated from the original board packet to reflect a change from the meeting held on July 10, 2019.

**Sharon McCloy-Reichard moved to approve the minutes of the following meetings:**

- May Board Meeting.....May 28, 2019
- August Coordinating Committee Meeting.....August 12, 2019
- August Audit Committee Meeting.....July 10, 2019
- May Search Committee Meeting.....May 31, 2019
- June 14 Search Committee Meeting.....June 14, 2019
- June 28 Search Committee Meeting.....June 28, 2019
- August CFAC Summary Meeting.....August 5, 2019

**Carol Anderson seconded approval of minutes; MOTION CARRIED**

**Sharon McCloy-Reichard abstained due to her absence at the Coordinating Community meeting on August 12, 2019.**

**REPORTS &  
PRESENTATIONS:**

A. Community Participation

None.

## B. Presentation:

Samantha Schuler, CEO of Community Housing Network gave a presentation on the history of CHN and she gave an overview on the Creekside Housing Project.

Scott Doran asked what happens to the people after they occupy CHN housing units.

Samantha Schuler replied some of the people make progress with less services while others will need higher level of services with a more restrictive setting. Some of the people will also end up being evicted after all options have been exhausted as a last resort.

Citizen asked how tenants are selected if they have a criminal background.

Samantha Schuler replied they are selected based on the requirements of the subsidy and their restrictions. Some disqualifying factors are determined by the type of felony.

## C. Financial / Audit Committee Report:

### - Audit Committee Report

Nathan Wymer gave an update on the Audit Committee Report. The audit committee met on July 10, 2019. Nathan recognized the ADAMH Staff for their hard work. The report revealed a clean audit with no deficiencies.

There were two items in the management letter that were discussed. These items are not considered material findings and they are not included in the official audit. A corrective action plan has been put in place.

The committee reviewed the Annual Audit with recommendations. They will be examining provider profiles, fiscal concerns. Internal audit will be conducted to review IT, Finance, Business Operations and Payroll. The next meeting will be held on September 10, 2019 from 9:30 – 10:30 AM.

### - Financial Report

Mark Lambert explained that the financial report begins on page 30 of BoardPaq. This report illustrates the *Levy* and *Special Revenue* for month ending July 31, 2019. For the month of July there was not a lot of activity to report.

As of today ADAMH is at 58%. Revenues are reported less than what is expected due to the second installment not being reported. This figure will be reflected in our Levy Revenues for August. The projection was as expected and this will be the final installment for CY 2019. Last year ADAMH reported \$93 million in proceeds as opposed to \$57.4 million this year. The

reason for the variance is a timing issue in receiving the deposit in August as opposed to July.

Mark explained the *CY 2019 Board Administrative Spending Authority Analysis*. He explained the negative number reporting out in July as a result of Columbus Area Integrated Healthcare Services, Inc. due to expenses being moved from Administrative Budget to a Block Grant to support the transition. An action submitted to the Board of Trustees for approval will support this change.

Mark explained handouts pertaining to Calendar Year 2019 YTD Projection vs. Actual Revenue, Expenses & Cash report as of July 31, 2019 and ADAMH Cash Position Risk Corridor graph. As of 7/31/2019 projected ending cash balance is 55.4 million, which is more than the initial model. We are right where we expect to be with our ending cash balance of 2019.

Mark Lambert explained CY 2019 *Expenditure Analysis* and *Current Expenditures* are negative due to the Columbus Area Integrated Health Services Inc.

Mitzi Kirkbride asked will ADAMH be in the cash position previously projected at the end of the levy cycle.

Mark Lambert replied we have a *Budget Stabilization Reserve and Operating Reserve*. At the end of the levy cycle, the goal is to have 90 days cash in operating reserve. He explained ADAMH will meet with the Levy Revue Commission next month to evaluate ADAMH position concerning the levy ballot.

David Royer replied ADAMH is in the third year of the Levy cycle. He explained the timeline and process involved with the Levy Revenue Commission. ADAMH should be on the ballot by November 20, 2020.

- ADAMH will meet with the Levy Revue Commission next month with an update.
- ADAMH will engage in an educational presentation to the Board of Trustees.
- The Board of Trustees will need to adopt a resolution pertaining to the Levy February, 2020.
- The resolution is presented to Franklin County Board of Commissioners February, 2020.
- Franklin County Board of Commissioners forward Resolution to Human Services Levy Review Commission.
- ADAMH Presentation to the Human Services Levy Review Commission.
- Franklin County Board of Commissioners Resolution.
- Submit Ballot Issue to Board of Elections. The ballot has to be filed with the Board of election no later than 90 days prior to the election.

- Local Board of Elections accepts the verbiage; then it must be approved by the Secretary of State.
- Once approved it's placed on the ballot and then ADAMH will go into campaign mode.

David Royer explained there is a political action committee already in place - Friends of ADAMH. They currently have approximately \$150,000.00 in campaign committee funds which is separate from the Board. Funding is raised for the campaign through partnerships with business, corporate and provider community.

**Sharon McCloy-Reichard moved to approve the Financial & Audit Report; Karri Dosmann seconded; MOTION CARRIED.**

D. Board Chair Report:

Peggy Anderson announced the Annual meeting will be held at the Grange Insurance Audubon Center on October 15. The Board meeting will begin at 4:30 PM and the Annual Meeting reception will begin at 5:30 PM. Lori Criss, Director of OhioMHAS will be the keynote speaker. ADAMH will recognize award winners who have helped others find their path to recovery. Award nominations will be accepted through August 30.

*CONSENT AGENDA:*

E. Consent Agenda:

Peggy Anderson announced that the items on the *Consent Agenda* were previously reviewed by the Coordinating Committee. She asked if there were any questions or requests to remove the following items from the Consent Agenda: *Concord Pathway Expansion, Community Housing Network, Creekside Place Capital, CAIHS 340.037 Transition, KY 2020 Provider Allocations, CY 2020 Board Administrative Budget.*

**Mitzi Kirkbride moved to approve the items on the Consent Agenda; Bipender Jindal seconded; MOTION CARRIED.**

Administrative memos were mentioned to keep you informed.

*NEW BUSINESS:*

F. New Business:

Peggy Anderson explained that the Ohio Department of Mental Health and Addiction Services (OhioMHAS) has to submit a Community Plan for State Fiscal Years 2020. OhioMHAS requested an overview of how the ADAMH's programs and services address priorities set for RecoveryOhio. ADAMH received this request from OhioMHAS about the community plan on May 29 after the May Board meeting. The due date was August 1 so ADAMH moved forward with the submission.

Peggy Anderson explained this resolution is asking the Board of Trustees to retroactively concur with ADAMH submission. Board of Trustee members received ADAMH submission by email on Friday, August 23.

A. Resolution: 20190827-01 Approving the submission of the Community Plan update for State Fiscal Year 2020 to the Ohio Department of Mental Health and Addiction Services (OhioMHAS).

**WHEREAS**, the ADAMH Board of Franklin County has the duty to annually submit to OhioMHAS a community addiction and mental health services plan pursuant to section 340.03(A)(1)(c) of the Ohio Revised Code; and

**WHEREAS**, OhioMHAS provided specific guidelines for the Community Plan Update on May 29, 2019 and the plan was due to the department on August 1, 2019; and

**WHEREAS**, ADAMH submitted the community plan to OhioMHAS by the identified due date.

**NOW, THEREFORE, BE IT RESOLVED**, that the ADAMH Board of Franklin County concurs with the submission of the Community Plan for SFY 2020 to OhioMHAS by ADAMH CEO David A. Royer on July 31, 2019.

**WITNESS THEREFORE**, I have hereunto subscribe my name on this twenty-seventh day of August, Two Thousand and Nineteen.

**Carole Anderson moved to adopt the resolution 20190827-01 Approving the submission of the Community Plan update for State Fiscal Year 2020 to the Ohio Department of Mental Health and Addiction Services (OhioMHAS) Karri Dosmann seconded; MOTION CARRIED.**

*EXECUTIVE  
SESSION:*

G. Executive Session:

Peggy Anderson announced the Board would commence an Executive Session for the purpose of Personnel matters discussing compensation of public employee, official, licensee or regulated individual; Roll was called; 14 members were present; the executive session commenced at 6:37 p.m. and terminated at 7:09 p.m.

Meeting adjourned at 7:15 p.m.

Recorder: Tikara Robinson



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Peggy Anderson, Chair

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Trudy Bartley, Secretary

**COORDINATING COMMITTEE MEETING**  
**Meeting Minutes – September 09, 2019**

**PRESENT:** Carole Anderson, Peggy Anderson, Holly Dabelko-Schoeny, Scott Doran, Karri Dosmann, Bipender Jindal, Mitzi Kirkbride, Sharon McCloy-Reichard, Jennifer Richardson, Ann Seren, Nathan Wymer

**ABSENT:** Trudy Bartley, Terree Stevenson, Ron Walters

**I. Call to Order**

Peggy Anderson called the meeting to order at 12:03 p.m.

Peggy Anderson asked the Board of Trustees to refer to a new Agenda at their seats which includes a new Board action Near East Side Partnership presented by Kythryn Carr Harris.

**II. September Committee & Board Agenda**

***Board Actions:***

**A. The Village Network Reception Center Security** – Kythryn Carr Harris explained that this action recommends ADAMH Board of Franklin County increase The Village Network's allocation by \$49,104 dollars in FY2019 to increase operations (including security) at the Reception Center. This is a collaboratively funded project between ADAMH (\$256,503) and Franklin County Court of Common Pleas, Juvenile Division (\$455,064), which was originally approved by this board in March 2013 (B13034), and represents an increase in Juvenile Court funding.

Franklin County Juvenile Court and ADAMH have partnered since 2013 to reduce the number of youth who commit low level offenses who are placed in the juvenile detention center. Over the last five years, this has equated to approximately 850 youth per year. These youth are brought to the Reception Center by the police, assessed by a mental health professional and linked with community based treatment services as needed.

Juvenile justice involved youth and their families will benefit from reduced involvement with the juvenile justice system and increased involvement with the mental health system.

Scott Doran asked if ADAMH will have on-going funding.

Kythryn Carr Harris replied yes, this will continue to be an on-going partnership between ADAMH and Juvenile Division. ADAMH funding is related to assessments and treatment services.

Holly Dabelko-Schoeny asked for clarification as it relates to Shelter Care.

Kythryn Carr Harris replied Shelter Care is certified foster homes through the Village Care Network.

**The Coordinating Committee approved this action to go on the Consent Agenda.**

**B. Franklin County Jail Enhancement Project** – Kythryn Carr Harris explained that this action recommends that the ADAMH Board of Franklin County is to provide \$250,000 to the Franklin County Office of Justice Policy and Programs to provide training to first responders and corrections staff, specialized treatment training to ADAMH behavioral health providers, increase the use of Peer Recovery Support and provide financial literacy classes. The program will serve justice involved individuals with a behavioral health diagnosis and the first responders they encounter in the community and in the county jail.

This program serves adults in the community struggling with a behavioral health issue who come in contact with a Columbus Police Officer or are brought to the Franklin County Jail due to a criminal offense. Some individuals will be diverted from the Jail into services and supports by Officers who have been trained in a trauma informed approach to community policing. The program also includes those individuals who are brought to the Jail and are identified as having a behavioral health issue.

Peggy Anderson asked how ADAMH will determine if the program has made an impact.

Kythryn Carr Harris replied ADAMH will continue to watch the data from the Stepping Up Initiative.

Sharon McCloy-Reichard asked if ADAMH will receive reports to review their progress.

Kythryn Carr Harris replied ADAMH will receive information on the number of people trained through literacy classes. One important aspect the individuals receive is professional development.

Sharon McCloy-Reichard asked for a report at the end of year.

**The Coordinating Committee approved this action to go on the Consent Agenda.**

**C. Community for New Direction Mental Health Services** – Kythryn Carr Harris explained that this action recommends that the ADAMH Board of Franklin County allocate \$198,963 for the remainder of 2019 and \$441,627 for 2020 to Community for New Direction (CND) to implement mental health services at their Atcheson St. location on the East side of Columbus. This includes one-time funding in the amount of \$106,685 in 2019.

The closure of Columbus Area Integrated Health Services (CAIHS) has left a service void in the community. These funds will be used to start a new line of business with CND allowing them to provide comprehensive mental health services to our community.

This program will serve adult residents of Franklin County who have been diagnosed with a severe and persistent mental illness. This will include referrals from hospitals and referrals from other community stakeholders.

**The Coordinating Committee approved this action to go on the Consent Agenda.**

**E. Near East Side Partnership** – Kythryn Carr Harris explained that this action recommends that the ADAMH Board of Franklin County allocate funding in the amount of \$591,234 in Contract Year (KY) 2019 and \$1,210,631 in KY 2020 for PrimaryOne Health and Southeast Inc. to provide comprehensive physical and behavioral health services to the Near East Side neighborhood.

The recent closure of Columbus Area Integrated Health Services (CAIHS) has left the Near East Side community without a behavioral health provider in the neighborhood. This partnership will ensure that the needs of this community continue to be met, that services are accessible and delivered in a culturally and linguistically appropriate manner.

These services will be available to adult residents of Franklin County who are seeking physical and behavioral health care services, with an emphasis on serving the Near East Side community.

The partner organizations will provide a comprehensive set of both physical and behavioral health care services, including short and long term specialized counseling services, medication assisted treatment, case management, and IDDT / ACT services.

Collectively these two organizations will serve at least 450 individuals in the first full year of operations.

Karri Dosmann asked for the expected target date to begin services.

Dewitt Harrell from PrimaryOne replied middle of October.

**The Coordinating Committee approved this action to go on the Consent Agenda.**

### **III. Other Business**

Peggy Anderson mentioned the Audit Committee Meeting will be held at ADAMH Board room on September 10 at 9:30 – 10:30 a.m. at ADAMH. The Board meeting is scheduled for September 24. Kenton Beachy from Mental Health America of Franklin County will be at the Board Meeting to share an update.

The October 15 Board Meeting will be held at 4:30 p.m. at the Grange Insurance Audubon Center with Annual Meeting following at 5:30 p.m.

### **IV. Executive Session**

Peggy Anderson announced the Board would commence an Executive Session for the purpose of personnel matters discussing employment of public employee, official, licensee or regulated individual; Roll was called; 11 were present; the executive session commenced at 12:50 p.m. and terminated at 1:21 p.m.

**V. Adjournment:** 1: 23 p.m.

Recorder: Tikara Robinson

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Peggy Anderson, Chair

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Trudy Bartley, Secretary



**ALCOHOL, DRUG AND MENTAL HEALTH BOARD  
OF FRANKLIN COUNTY  
Audit Committee – Meeting Minutes  
July 10, 2019**

MEMBERS PRESENT: Peggy Anderson, Trudy Bartley, Scott Doran, Nathan Wymer

STAFF: Heber Howard, Mark Lambert, Willie Pinkins, David Royer, Aimee Shadwick

GUEST: Ryan Fortney (Ohio State Auditor's Office)

Wymer called the meeting to order at 10:30am

Fortney reviewed the Board's 2018 Audit report highlighting the following:

- Management Letter - two comments
- Independent Auditor's report - Unmodified opinion
- Independent Auditor's Report on Internal Control over Financial Reporting and on Compliance and other Matter - no material weaknesses in internal control and no material noncompliance
- Independent Auditor's Report on Compliance with Requirements Applicable to Each Major Federal Program and on Internal Control over Compliance - no material weaknesses in internal control and no material noncompliance

Internal Auditor will prepare a corrective action plan to address the Management Letter comments

Staff recognized Heber Howard for his excellent work in preparing the ADAMH Board's annual financial statements

Royer led the committee in a discussion about the options associated with discontinuing ADMAH independent financial reporting and auditing versus being audited as part of Franklin County CAFR. Fortney responded that the State Auditor's Office would request adequate notice of any audit changes, preferably by spring of 2019 for a change in 2020.

Wymer led the Committee in a discussion about further audit committee functions. Royer recommended that the committee meet two times per year.



**ALCOHOL, DRUG AND MENTAL HEALTH BOARD  
OF FRANKLIN COUNTY  
Audit Committee – Meeting Minutes  
July 10, 2019**

Royer also suggested the follow projects for the Audit Committee, in addition to its current work with the Board annual audit:

- Annual review of Provider's profiles – highlighting Provider with special fiscal concerns
- Annual review of internal audit reports

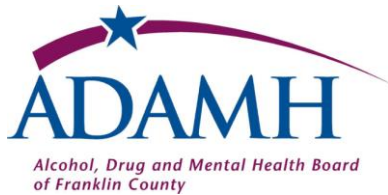
Anderson agreed the Board, through the audit committee would be in a position to review troubling provider audits going forward.

Anderson stated she has heard that providers continue to struggle with SHARES resulting in delayed payment. Lambert responded this is inaccurate. Providers are being paid twice per month per the production schedule. Royer commented that providers should be able to bill prior to 100 days and ADAMH continues to evaluate SHARES and potential replacements. Wymer suggested we form a stakeholder group of SHARES users to ease community concerns about any change or replacement of SHARES. Doran suggested considering whether to periodically convene Provider network meetings to get their feedback on issues.

Audit Committee will meet in September to review Provider's profiles and audit reports.

Wymer adjourned the meeting at 11:45am.

Recorder: Kathy Podlasiak



**ALCOHOL, DRUG AND MENTAL HEALTH BOARD  
OF FRANKLIN COUNTY  
Audit Committee – Meeting Minutes  
September 10, 2019**

**MEMBERS PRESENT:** Peggy Anderson, Trudy Bartley, Scott Doran, Nathan Wymer

**STAFF:** Heber Howard, Mark Lambert, Willie Pinkins, David Royer,  
Mackenzie Betts, Kathy Podlasiak

Wymer called the meeting to order at 9:30am

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Wymer led the meeting with a discussion about the Audit Committee meeting minutes from the 7/10/19 meeting. There were some corrections made by Doran and the group voted to approve with the corrections. These corrected minutes will be given to the board at the next meeting for their approval in two weeks.

The committee reviewed the 2018 Corrective Action Plan that addressed management comments issued by the State Auditor's Office. Lambert reported that as corrective actions, a series of reports are being reviewed on a monthly basis to compare annual awards to revenues received. An additional report is reviewed monthly to compare revenue receipts to expenditures for all funding sources.

Doran asked what the "warehouse" is. Lambert explained it is our data warehouse where we get monthly extracts from the county.

Lambert discussed 040 Reporting (state reporting) which is completed on an annual basis. The Finance Team has a meeting scheduled in mid-November to review SFY 2019 OhioMHAS revenues and expenses. Lambert stated we sent a letter to the state at the end of July 2019. Lambert had a phone conversation with OhioMHAS's CFO to further clarify ADAMH's request. The state responded they will send us a written response soon in response to ADAMH's request.

Wymer asked if we discussed what we will do if we do not get a response to our letter. Lambert replied that plans are in place to complete and submit a draft report in January and submit a final report in March.

Royer stated the other affected county boards are in full support of ADAMH's request.





**ALCOHOL, DRUG AND MENTAL HEALTH BOARD  
OF FRANKLIN COUNTY  
Audit Committee – Meeting Minutes  
September 10, 2019**

Pinkins led the committee in a discussion about the Provider's audit report reviews process. Pinkins reviewed the Provider profile document that was provided to the committee and explained how Key Performance Indicators (KPI's) are used in monitoring Providers' fiscal status.. Pinkins stated when a Provider's KPIs are outside of expected limits, additional monitoring is required. This includes meeting with Providers' leadership staff.

Wymer asked Pinkins about ADAMH's audit protocol and what that means. Pinkins explained we can do the audit ourselves or contract with independent auditors. We use independent auditors. Pinkins writes audit protocol in a document called "Audit Memorandum of Understanding" (MOU). Then audit firm, Provider, and ADAMH's CEO signs MOUs as agreement to comply with audit protocols.

Doran asked if the providers are providing us with this information. Pinkins explained that the provider's financial information is generally prepared by a professional CPA firm.

Bartley asked Pinkins for an explanation of a healthy organization versus others. The group reviewed the information tracked on the provider profiles and how the various ratios are determined including their liabilities and assets.

Lambert made a suggestion to hold provider STAT sessions to have more focused conversations with Providers perceived to be financially distressed.

Pinkins and Lambert will bring a recommendation for provider STAT meetings to the next committee meeting.

Wymer started a discussion about a potential SHARES replacement system. Lambert added that we will have SHARES for at least another year, but we are looking at a potential replacement product. We may switch to a new system in early 2021. He stated we are having one on one Technical Assistance sessions with multiple providers to assist them with various issues/problems. These meetings have been going well to date. The biggest issues are billing terms and enrollments..



**ALCOHOL, DRUG AND MENTAL HEALTH BOARD  
OF FRANKLIN COUNTY  
Audit Committee – Meeting Minutes  
September 10, 2019**

Wymer asked Lambert to give an overview at of the Provider Technical Assistance overview meeting at the next Audit Committee meeting.

Wymer suggested that the audit committee convene for in early October, November and December. The October meeting should include a recap from Lambert on the provider meeting to be held on Friday, September 13, 2019.

Wymer adjourned the meeting at 10:45am.

Recorder: Kathy Podlasiak

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Nathan Wymer, Chair

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Trudy Bartley, Secretary



ADAMH Board of Franklin County

Meeting Location - BeecherHill

250 SOUTH CIVIC DRIVE,

BOARD ROOM

*Monday, September 16, 2019 – 9:00 a.m. – 10:00 a.m.*

**CEO SEARCH COMMITTEE MEETING MINUTES**

PRESENT: Peggy Anderson – Chair, CEO Search Committee, Karri Dosmann – Board Member, Mitzi Kirkbride – Board Member, Ken Wilson – County Administrator (ex-officio member), Nathan Wymer – Board Member

ABSENT: Trudy Bartley – Board Member, Sharon McCloy-Reichard – Board Member, Irma Phillip-Carmichael – Former Board Member (ex-officio member)

STAFF: Tikara Robinson - Executive Assistant

PRESENT: Cindy Hilshimer – Senior Managing Director (BeecherHill), Mark Ryan – Senior Managing Director (BeecherHill)

I. Call to Order:

Peggy Anderson called the CEO Search Committee meeting of the ADAMH Board of Franklin to order at 9:16 a.m.

II. Welcome and Opening Remarks:

Peggy Anderson provided a brief update on CEO Search Committee.

Mark Ryan provided a summary of the search activity to date for ADAMH CEO to the Search Committee members. He explained the process commenced on March 4, 2019 which involved stakeholder engagement and concluded in April.

The stakeholders involved in the process were Board of Trustees (current and past), Provider Network, Community Partners, Health and Human Services, Local Leaders, Private Sector and Public Sector.

Beecher Hill has been searching both locally and across the country that work within the behavioral health, mental health and addiction treatment and prevention fields.

Cindy Hilshimer asked the search committee to calibrate a timeline based on organizational upcoming milestones as well as what ADAMH Search Committee anticipates as a result of the outcome of the CEO search.

Peggy Anderson mentioned she would be meeting with ADAMH staff next week to discuss the interim CEO.

### III. Executive Session

Peggy Anderson announced the Search Committee would commence the Executive Session for the purpose of Personnel matters discussing employment of public employee, official, licensee or regulated individual; Roll was called; four Board of Trustee members were present; in addition to Ken Wilson, County Administrator, the executive session commenced at 10:32 a.m. and terminated at 10:32 a.m.

### V. Adjournment

Meeting Adjourned 10:32 a.m.

By: Tikara Robinson

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Peggy Anderson, Board Chair

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Trudy Bartley, Secretary

Consumer & Family  
Advocacy Council  
447 East Broad St.  
Columbus, OH 43215  
614.222.3753



Rotating Facilitator



Scribe (Recorder)  
Christy M



Phil Hedden  
ADAMH Consumer  
And Family Advocate

# The Consumer & Family Advocacy Council

## Meeting Summary September 9, 2019

**Total Attendance on sign in Sheet: 45**

### **News, Announcements, and Sharing**

- Jason Suleiman, Psychiatric/Mental Health Certified Nurse Practitioner and Jennifer Schehl – Director of Marketing and Development will be discussing Heart of Ohio Family Health services including our behavioral health program
- October Meeting Community Speaker will include Ray Foeller from the Ohio Consumers Council to discuss Utility Assistance Programs and provide updates on any changes that have occurred since last year.

**No Committee Reports or Involvement Committee due to set up for Community Event which was initiated at 3pm prior to the Art of Wellness Talent/Resource fair occurring between 4-7.**

**I am going to insert the program of performers below that shared their talents.**

GK-Founder of the WellJamExperience Band—Played guitar and sang inspirational music along with some old school jams.

TP-basic guided meditation body scan and an art activity

LC-D – Mindfulness and Movement exercise requesting audience participation

KF/DR—Assisted Members in making their own unique Hope Boxes

KE-Shared some Spoken Word Poetry she created

KC-Inspirational Recovery Oriented Spoken Word shared that he created to music

WM and DD-Played Guitars and Sang for the group during break.

### **Resource Tables Available include:**

Tim Lockard: BioOne—hoarding clean up resources

Regina Hillman, NAMI Resources and literature

LeeAnn Mattes, MHAFC—Get Connected

Sheronda Palmore, MHAFC—ProBono Counseling

Some members who agreed to share their talents were not able to this evening and agreed to share to begin CFAC holiday gathering in December's meeting. The following members will kick off December's Holiday gathering with the following talent in this order:

JS-Meditation

DD-Tai Chi

CP-Spoken Word

A good time was had by all members and Networking and Socialization occurred until 7:05.

**NEXT INVOLVEMENT COMMITTEE MEETING OCTOBER 7 @ 3:00  
FULL COUNCIL MEETING MONDAY, OCTOBER 7 FROM 4:30-6:00PM**



ALCOHOL, DRUG AND MENTAL HEALTH BOARD OF FRANKLIN COUNTY  
SCHEDULE OF REVENUES, EXPENDITURES AND CHANGES IN CASH BALANCE  
LEVY AND SPECIAL REVENUE  
FOR THE MONTH ENDED  
August 31, 2019

Revenue	Original Budget	Budget Revisions	Current Budget	Actual	Variance	Percent of Budget Used To Date
Taxes	\$54,464,211	\$298,971	\$54,763,182	\$54,301,812	(\$461,370)	99.2%
Intergovernmental- Reimbursement	\$5,668,821	\$4,016	\$5,672,837	\$2,823,212	(\$2,849,625)	49.8%
Intergovernmental - Special Revenue	\$16,803,543	\$0	\$16,803,543	\$12,772,886	(\$4,030,657)	76.0%
Other	\$2,500,500	\$1,232,829	\$3,733,329	\$4,798,368	\$1,065,039	128.5%
Total Revenue	\$79,437,075	\$1,535,816	\$80,972,891	\$74,696,278	(\$6,276,613)	92.2%
<b>Expenditures</b>						
Personal Services	\$6,024,210	\$167,183	\$6,191,393	\$3,873,760	\$2,317,633	62.6%
Materials & Services	\$2,534,865	\$0	\$2,534,865	\$1,654,892	\$879,973	65.3%
Service Providers	\$93,462,066	(\$500,000)	\$92,962,066	\$54,839,038	\$38,123,028	59.0%
Capital	\$20,000	\$500,000	\$520,000	\$462,460	\$57,540	88.9%
Transfers	\$0	\$1,232,829	\$1,232,829	\$1,232,829	\$0	100.0%
Council of Governments (COG)	\$750,000	\$0	\$750,000	\$406,927	\$343,073	54.3%
Total Expenditures	\$102,791,141	\$1,400,012	\$104,191,153	\$62,469,907	\$41,721,246	60.0%
Excess of Revenues Over (Under) Expenditures				\$12,226,370		
Beginning Cash Balance at January 1, 2019				\$65,120,824		
Ending Cash Balance at August 31, 2019				\$77,347,194		
<b>Cash Balance Summary</b>						
90 Day Operating Reserve				\$25,690,969		
Budget Stabilization Reserve as of August 31, 2019				\$24,782,755		
Cash Balance Designated to be Spent in 2019				\$26,873,470		
(Memorandum: Ending Cash Balance at August 31, 2018)				\$89,168,826		
(Memorandum: Undesignated Cash Balance at December 31, 2018)				\$7,258,040		



**ALCOHOL, DRUG AND MENTAL HEALTH BOARD  
OF FRANKLIN COUNTY  
COMPARATIVE BALANCE STATEMENT**

	Levy 8/31/2019	Levy 7/31/2019	\$ Variance Incr/(Decr)	% Incr/(Dec)
<b>ASSETS</b>				
Cash	\$69,674,997	\$50,468,489	\$19,206,508	38.1%
Provider Receivables	\$5,524,567	\$1,825,536	\$3,699,031	202.6%
Due from Other Funds	\$620,181	\$620,181	\$0	0.0%
Due from Other Governments	\$242,963	\$290,409	(\$47,446)	-16.3%
<b>Total Assets</b>	<b>\$76,062,709</b>	<b>\$53,204,616</b>	<b>\$22,858,093</b>	<b>43.0%</b>
<b>LIABILITIES</b>				
Accrued Wages Payable	\$133,296	\$200,405	(\$67,109)	-33.5%
PERS and Medicare Payable	\$27,024	\$29,152	(\$2,128)	-7.3%
Claims Payable - Current Year	\$1,128,877	\$1,315,184	(\$186,308)	-14.2%
Block Grants Payable - Current Year	\$1,904,849	\$2,955,529	(\$1,050,680)	-35.5%
Claims Payable - Prior Years	\$1,559	\$0	\$1,559	NA
Block Grants Payable - Prior Years	\$576,107	\$0	\$576,107	NA
Due to Other Funds	\$0	\$0	\$0	NA
Funds held for Others	\$0	\$0	\$0	NA
Deferred Revenue	\$0	\$0	\$0	NA
<b>Total Liabilities</b>	<b>\$3,771,711</b>	<b>\$4,500,270</b>	<b>(\$728,559)</b>	<b>-16.2%</b>
<b>FUND EQUITY</b>				
Undesignated				
<b>Total Fund Equity</b>	<b>\$72,290,997</b>	<b>\$48,704,346</b>	<b>\$23,586,651</b>	<b>48.4%</b>
<b>Total Liabilities and Fund Equity</b>	<b>\$76,062,709</b>	<b>\$53,204,616</b>	<b>\$22,858,093</b>	<b>43.0%</b>



ALCOHOL, DRUG AND MENTAL HEALTH BOARD  
OF FRANKLIN COUNTY  
COMPARATIVE BALANCE STATEMENT

	Special Revenue 8/31/2019	Special Revenue 7/31/2019	\$ Variance Incr/(Decr)	% Incr/(Dec)
<b>ASSETS</b>				
Cash	\$7,459,173	\$6,802,132	\$657,041	9.7%
Provider Receivables	\$0	\$0	\$0	NA
Due from Other Funds	\$0	\$0	\$0	NA
Due from Other Governments	\$20,000	\$20,000	\$0	0.0%
<b>Total Assets</b>	<b>\$7,479,173</b>	<b>\$6,822,132</b>	<b>\$657,041</b>	<b>9.6%</b>
<b>LIABILITIES</b>				
Accrued Wages Payable	\$0	\$0	\$0	NA
PERS and Medicare Payable	\$0	\$0	\$0	NA
Claims Payable - Current Year	\$204,731	\$233,685	(\$28,954)	-12.4%
Block Grants Payable - Current Year	\$2,094,071	\$2,841,820	(\$747,750)	-26.3%
Claims Payable - Prior Years	\$0	\$0	\$0	NA
Block Grants Payable - Prior Years	\$0	\$118,588	(\$118,588)	-100.0%
Due to Other Funds	\$620,181	\$620,181	\$0	0.0%
Funds held for Others	\$0	\$0	\$0	NA
Deferred Revenue	\$4,560,190	\$3,007,857	\$1,552,333	51.6%
<b>Total Liabilities</b>	<b>\$7,479,173</b>	<b>\$6,822,132</b>	<b>\$657,041</b>	<b>9.6%</b>
<b>FUND EQUITY</b>				
Undesignated				
<b>Total Fund Equity</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>NA</b>
<b>Total Liabilities and Fund Equity</b>	<b>\$7,479,173</b>	<b>\$6,822,132</b>	<b>\$657,041</b>	<b>9.6%</b>





**ALCOHOL, DRUG AND MENTAL HEALTH BOARD  
OF FRANKLIN COUNTY  
COMPARATIVE BALANCE STATEMENT**

	<b>Totals 8/31/2019</b>	<b>Totals 7/31/2019</b>	<b>\$ Variance Incr/(Decr)</b>	<b>% Incr/(Dec)</b>
<b>ASSETS</b>				
Cash	\$77,134,170	\$57,270,621	\$19,863,549	34.7%
Provider Receivables	\$5,524,567	\$1,825,536	\$3,699,031	202.6%
Due from Other Funds	\$620,181	\$620,181	\$0	0.0%
Due from Other Governments	\$262,963	\$310,409	(\$47,446)	-15.3%
<b>Total Assets</b>	<b>\$83,541,881</b>	<b>\$60,026,748</b>	<b>\$23,515,134</b>	<b>39.2%</b>
<b>LIABILITIES</b>				
Accrued Wages Payable	\$133,296	\$200,405	(\$67,109)	-33.5%
PERS and Medicare Payable	\$27,024	\$29,152	(\$2,128)	-7.3%
Claims Payable - Current Year	\$1,333,607	\$1,548,869	(\$215,262)	-13.9%
Block Grants Payable - Current Year	\$3,998,919	\$5,797,349	(\$1,798,429)	-31.0%
Claims Payable - Prior Years	\$1,559	\$0	\$1,559	NA
Block Grants Payable - Prior Years	\$576,107	\$118,588	\$457,518	385.8%
Due to Other Funds	\$620,181	\$620,181	\$0	0.0%
Funds held for Others	\$0	\$0	\$0	NA
Deferred Revenue	\$4,560,190	\$3,007,857	\$1,552,333	51.6%
<b>Total Liabilities</b>	<b>\$11,250,884</b>	<b>\$11,322,402</b>	<b>(\$71,518)</b>	<b>-0.6%</b>
<b>FUND EQUITY</b>				
Undesignated				
<b>Total Fund Equity</b>	<b>\$72,290,997</b>	<b>\$48,704,346</b>	<b>\$23,586,651</b>	<b>48.4%</b>
<b>Total Liabilities and Fund Equity</b>	<b>\$83,541,881</b>	<b>\$60,026,748</b>	<b>\$23,515,134</b>	<b>39.2%</b>



**ALCOHOL, DRUG AND MENTAL HEALTH BOARD  
OF FRANKLIN COUNTY  
COMPARATIVE BALANCE STATEMENT**

	<b>Council of Governments 8/31/2019</b>	<b>Council of Governments 7/31/2019</b>	<b>\$ Variance Incr/(Decr)</b>	<b>% Incr/(Dec)</b>
<b>ASSETS</b>				
Cash	\$213,025	\$183,384	\$29,640	16.2%
Provider Receivables	\$0	\$0	\$0	NA
Due from Other Funds	\$0	\$0	\$0	NA
Due from Other Governments	\$35,633	\$64,961	(\$29,328)	-45.1%
<b>Total Assets</b>	<b>\$248,657</b>	<b>\$248,345</b>	<b>\$312</b>	<b>0.1%</b>
<b>LIABILITIES</b>				
Accrued Wages Payable	\$4,470	\$4,470	\$0	0.0%
PERS and Medicare Payable	\$912	\$912	\$0	0.0%
Claims Payable - Current Year	\$0	\$0	\$0	NA
Block Grants Payable - Current Year	\$0	\$0	\$0	NA
Claims Payable - Prior Years	\$0	\$0	\$0	NA
Block Grants Payable - Prior Years	\$0	\$0	\$0	NA
Due to Other Funds	\$242,963	\$242,963	\$0	0.0%
Funds held for Others	\$0	\$0	\$0	NA
Deferred Revenue	\$312	\$0	\$312	NA
<b>Total Liabilities</b>	<b>\$248,657</b>	<b>\$248,345</b>	<b>\$312</b>	<b>0.1%</b>
<b>FUND EQUITY</b>				
Undesignated				
<b>Total Fund Equity</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>NA</b>
<b>Total Liabilities and Fund Equity</b>	<b>\$248,657</b>	<b>\$248,345</b>	<b>\$312</b>	<b>0.1%</b>



**Alcohol Drug and Mental Health Board of Franklin County  
CY 2019 Board Administration Spending Authority Analysis  
August 2019**

Type of Expense	CY19 Initial Budget	Budget Revisions	CY19 Current Budget	Month-To-Date Expenditures	Year-To-Date Expenditures	Encumbrances	Total Commitments	Available Budget
Salaries	\$3,938,093	\$135,455	\$4,073,548	\$479,254	\$2,614,689	n/a	\$2,614,689	\$1,458,859
Fringe Benefits	\$1,731,627	\$22,154	\$1,753,781	\$158,580	\$1,115,562	n/a	\$1,115,562	\$638,219
Services & Materials	\$1,545,835	\$0	\$1,545,835	\$100,807	\$819,184	\$590,850	\$1,410,034	\$135,800
County Fees	\$957,410	\$0	\$957,410	\$342,425	\$834,393	\$0	\$834,393	\$123,017
Capital	\$20,000	\$500,000	\$520,000	\$0	\$462,460	\$20,405	\$482,865	\$37,135
Council of Government	\$750,000	\$0	\$750,000	\$0	\$406,927	\$343,073	\$750,000	\$0
<b>GRAND TOTALS</b>	<b>\$8,942,965</b>	<b>\$657,609</b>	<b>\$9,600,574</b>	<b>\$1,081,066</b>	<b>\$6,253,215</b>	<b>\$954,328</b>	<b>\$7,207,543</b>	<b>\$2,393,030</b>

Type of Expense	Actual % of Budget Used	Expected % of Budget Used YTD	% Variance	Driver for Expected % of Budget Used
Salaries	64.19%	61.54%	4.13%	Year-To-Date Pay Periods
Fringe Benefits	63.61%	66.67%	-4.81%	Percentage Of Year Expired
Services & Materials	52.99%	66.67%	-25.80%	% Of Year Expired
County Fees	87.15%	90.75%	-4.13%	1.6% Of Levy Revenues Received to date
Capital	88.93%	66.67%	25.04%	% Of Year Expired
Council of Government	54.26%	66.67%	-22.87%	% of Shares Project Completed

**Note: Analysis excludes Fund 2144 - Council of Government (COG)**

**Franklin County ADAMH Board  
CY 2019 Board Administration Spending Authority Analysis  
August 31, 2019**

**ADAMH Board CY 2019**

- 1) **Salaries & Fringe Benefits** – Actual % of budget expended aligns closely with expected expenditures.
- 2) **Services & Materials** – Actual % of budget expended is less than expected expenditures. Major projects budgeted in this category include building maintenance. Beginning in 2019 the Public Awareness Campaign is appropriated as Social Services outside of the Board Administration budget.
- 3) **Capital** – Capital expenditures budgeted for 2019 included server upgrades. In March the budgeted capital expenditures were increased by \$500,000 to purchase the Harmon Avenue property for the future Franklin County Crisis Center; the land was purchased in March.
- 4) **County Fees** – Levy fees are assessed by the County Auditor's office for collection and advertising expenses and average 1.6% of gross revenues.
- 5) **Council of Government** – The COG is a collaboration between Hamilton, Cuyahoga and Franklin Counties for the purchase and management of the healthcare information management system (SHARES Project). Note that Cuyahoga County removed themselves from the COG effective April 2019.

**ADAMH BOARD OF FRANKLIN COUNTY  
BOARD ACTION**

**SEPTEMBER 24, 2019**

**Action Title:** The Village Network Reception Center Security

**Recommended Action:** It is recommended that the ADAMH board of Franklin County increase The Village Network's allocation by \$49,104 dollars in FY2019 to increase operations (including security) at the Reception Center. This is a collaboratively funded project between ADAMH (\$256,503) and Franklin County Court of Common Pleas, Juvenile Division (\$455,064), which was originally approved by this board in March 2013 (B13034), and represents an increase in Juvenile Court funding.

**Strategic Result Alignment:** Access to Quality Care Services

**Rationale:**

**Identify Unmet Need in Franklin County?**

Franklin County Juvenile Court and ADAMH have partnered since 2013 to reduce the number of youth who commit low level offenses who are placed in the juvenile detention center. Over the last 5 years, this has equated to approximately 850 youth per year. These youth are brought to the Reception Center by the police, assessed by a mental health professional and linked with community based treatment services as needed.

**Who will benefit? What population will be served?**

Juvenile justice involved youth and their families will benefit from reduced involvement with the juvenile justice system and increased involvement with the mental health system.

**What services will be provided to address this unmet need?**

The Reception Center is comprised of three components. The first is an assessment center that provides diagnostic assessment and linkage to treatment to families. The second component is the shelter care program that provides a short term alternative care setting for youth who cannot safely return home. The third component is the evening reporting program, which provides structured activities, mental health/substance use groups, mentoring, and other prosocial activities to increase supervision during key times of the day when delinquency is likely to occur. This increased funding from the court will allow for security at the Reception Center.

**What are the best practices identified to meet this need?**

The Juvenile Detention Alternative Initiative (JDAI) is a nationwide initiative started by the Annie E. Casey Foundation in the early 1990s. This initiative provides national technical assistance to states and counties on ways to reduce the number of youth

involved in the juvenile justice system. This initiative has been very successful, in part due to the collaboration of the juvenile justice system and community organizations, such as mental health. Through its technical assistance, the Foundation assists counties with implementing strategies, such as Reception Centers, that have been proven over time in other jurisdictions.

**Time Period:** KY 2019: October 1 2019 – December 31 2019;

**Output:** 850 youth/year will participate in the Reception Center programming

**Output Efficiency:** \$837/youth

**Result Statement:** 80% of the juveniles involved will not commit a new offense prior to the adjudication of the original charge(s) leading to the arrest.

**Contractor/Provider Name:** The Village Network

**Action Number:** [Action Number]

**Type of Action:** Pass Thru Request

**Funding Source:** Franklin County Court of Common Pleas, Juvenile Detention Division

**Funding Mechanism:** Exempt Block Grant.

**Financial Specification:**

Amount	Fiscal Year	Description	Org#	Object#	Project#
\$49,104	2019	Reception Center Security	12580200	599581	H8019

**Financial Impact:** This action will increase The Village Network's KY 2019 allocations by \$49,104.

This action is budget neutral to ADAMH (pass-through funds). KY 2020 funding for security was approved by ADAMH's Trustees in August 2019 (Action #20002).

**Business Associate Agreement Required per HIPAA:** No – the contractor or provider is a covered entity that must comply with HIPAA requirements to protect the privacy and security of health information

**ADAMH Staff Responsible For This Action:** Mitzi Moody

**ADAMH BOARD OF FRANKLIN COUNTY  
BOARD ACTION  
SEPTEMBER 24, 2019**

**Action Title:** Franklin County Jail Enhancement Project

**Recommended Action:**

The purpose of this action is to provide \$250,000 to the Franklin County Office of Justice Policy and Programs to provide training to first responders and corrections staff, specialized treatment training to ADAMH behavioral health providers, increase the use of Peer Recovery Support and provide financial literacy classes. The program will serve justice involved individuals with a behavioral health diagnosis and the first responders they encounter in the community and in the county jail.

**Strategic Result Alignment:** Safety, Security, and Stability

**Rationale:**

**Identify Unmet Need in Franklin County?**

Individuals with mental health and substance use disorders are 3-6 times more likely to enter the criminal justice system.<sup>1</sup> The majority of those were not for a violent crime but resulted from their behavioral health disorder and poverty. The Stepping Up Initiative was adopted by Franklin County in order to reduce the average daily jail population by 30% by 2020 and reduce the average length of stay disparity that exists between those inmates with and without mental health issues.<sup>2</sup>

Unfortunately, the latest Stepping Up report posted on the website, shows the average daily population of the jail was up in 2016 over the baseline established in 2014 and more than 500 inmates over the goal set for 2020. Programs that offer diversion planning for community policing and services that reduce recidivism continue to be necessary if we are to meet this goal.

**Who will benefit? What population will be served?**

This program serves adults in the community struggling with a behavioral health issue who come in contact with a Columbus Police Officer or are brought to the Franklin County Jail due to a criminal offense. Some individuals will be diverted from the Jail into services and supports by Officers who have been trained in a trauma informed approach to community policing. The program also includes those individuals who are brought to the Jail and are identified as having a behavioral health issue.

**What services will be provided to address this unmet need?**

Justice involved individuals will have access to Peer Recovery Supports throughout the criminal justice process to assist with linkage to treatment, access to resources and recovery planning. Individuals will also have access to the Onionomics Financial

Literacy curriculum to explore their emotional beliefs related to money and develop skills to achieve a better financial outlook for the future. Participants will enroll in Cognitive Behavioral Therapy designed for those who have justice involvement addressing the thinking errors that led to the criminal activity along with substance use treatment. Finally, individuals will receive a Pre-Trial assessment to inform the judge, attorneys and court support services of identified behavioral health needs and resources to be taken into consideration.

Justice professionals will be given training as a part of this program. The Franklin County Sheriff's Office is planning to have 80% of the workforce in the Corrections Division trained in suicide prevention. The training schedule will include 14 sessions offered at various times to ensure all three shifts are included. The Columbus Division of Police plans to train officers on trauma informed law enforcement using a model entitled "Building Better Lives."

### **What are the best practices identified to meet this need?**

The University of Cincinnati Corrections Institute has developed a set of curricula based on the well-established Risk Needs Responsivity model. Using a social learning approach with motivational enhancement, participants learn to identify their own risk factors and apply the tools and techniques they have learned to manage that risk. The Cognitive-Behavioral Interventions for Offenders – Core Curriculum teaches skills targeting motivation, cognitive restructuring, emotional regulation, social skills, problem solving and success planning. Cognitive-Behavioral Interventions – Substance Abuse curriculum also focuses on skill building in the areas of cognitive, social, emotional and coping.<sup>3</sup>

Peer Recovery Support is provided by people with a lived experience in mental health or substance use disorder who promote recovery, self-determination, self-advocacy, well-being and independence.<sup>4</sup> The benefits of Peer Recovery Support include reduced need for treatment services, improved self-efficacy and increased hope.<sup>5</sup> Peer staff in this project will be certified through the Ohio Department of Mental Health and Addiction Services.

Trauma impacts an individual's functioning including mental health and substance use which can lead to contact with the criminal justice system. Trauma informed policing gives officers the knowledge and skills to act in ways that demonstrate awareness of a victim's needs, reduce the potential recurrence of criminal behavior through early intervention, provide a trusting relationship, and connect traumatized individuals to appropriate services and supports.<sup>6</sup> The Building Better Lives Initiative launched by Franklin County Family and Children First Council in 2012 has reached over 10,000 community professionals to apply trauma-informed principles to their work with children and families. Officers will learn the complex developmental impact trauma has on a child's brain, learning and behavior, the long lasting effects, and resources that support healthy development and family support.



**Time Period:** Contract Year 2019: 10/1/2019-12/31/2019. Unused funds may be carried forward into Contract Year 2020. Funds must be expensed by 9/30/2020.

**Outcome:** 500 Franklin County Sheriff's officers trained; support training of Columbus Division of Police in trauma informed law enforcement; 36 staff from ADAMH behavioral health providers trained as group facilitators; 512 hours of Peer Recovery Support; 75 justice involved individuals provided financial literacy course; and Pre-Trial Assessment in Municipal Court.

**Contractor/Provider Name:** Franklin County Office of Justice Policy and Programs

**Action Number:** 19062

**Type of Action:** The funds from the Bureau of Justice Administration are being sub-awarded to the Franklin County Office of Justice Policy and Programs as part of the Franklin County Criminal Justice Collaborative to coordinate training and service needs within the jail and corrections community.

**Funding Source:** US Department of Justice; Bureau of Justice Administration

**Funding Mechanism:** Exempt Block Grant

**Financial Specification:**

Amount	Fiscal Year	Description	Org#	Object#	Project#
\$250,000	2019-2020	Franklin County Office of Justice Policy and Programs	14580100	599580	H4590

**Financial Impact:** This action will establish a block grant with the Franklin County Office of Justice Policy and Programs in the amount of \$250,000 for Contract Year 2019.

The action is budget neutral to ADAMH (pass-through funds).

**Business Associate Agreement Required per HIPAA:** Yes – the contractor or provider is a business associate that will help the board carry out its health care activities and functions and use or disclose protected health information on ADAMH's behalf

**ADAMH Staff Responsible For This Action:** Meg Griffing

<sup>1</sup> Steadman, Henry, et al., "Prevalence of Serious Mental Illness among Jail Inmates." *Psychiatric Services* 60, no. 6 (2009): 761-765.

<sup>2</sup> Franklin County Board of Commissioners. The Stepping Up Initiative. Retrieved August 30, 2019, from <https://commissioners.franklincountyohio.gov/stepping-up>.

<sup>3</sup> University of Cincinnati. Changing Offender Behavior. Retrieved August 30, 2019, from [https://cech.uc.edu/centers/ucci/services/trainings/changing\\_offender\\_behavior.html](https://cech.uc.edu/centers/ucci/services/trainings/changing_offender_behavior.html).<sup>4</sup> Ohio Department of Mental Health and Addiction Services. Peer Recovery Services. Retrieved August 30, 2019, from <https://mha.ohio.gov/Health-Professionals/About-Mental-Health-and-Addiction-Treatment/Peer-Support>.<sup>5</sup> Lawton-Smith, S., (2013). "Peer support in mental health: where are we today?", The Journal of Mental Health Training, Education and Practice, Vol. 8 Issue: 3, pp.152-158.

<sup>6</sup> Love-Craighead, Altovise. "Building trust through trauma-informed policing." Vera Institute of Justice. March 20, 2015. Retrieved August 30, 2019, from <https://www.vera.org/blog/police-perspectives/building-trust-through-trauma-informed-policing>.

**ADAMH BOARD OF FRANKLIN COUNTY  
BOARD ACTION  
SEPTEMBER 24, 2019**

**Action Title:** Community for New Direction Mental Health Services

**Recommended Action:** It is recommended that the ADAMH Board of Franklin County allocate \$198,963 for the remainder of 2019 and \$441,627 for 2020 to Community for New Direction (CND) to implement mental health services at their Atcheson St. location on the East side of Columbus. This includes one-time funding in the amount of \$106,685 in 2019.

**Strategic Result Alignment:** Access to Quality Care Services

**Rationale:**

**Identify Unmet Need in Franklin County?**

The closure of Columbus Area Integrated Health Services (CAIHS) has left a service void in the community. These funds will be used to start a new line of business with CND allowing them to provide comprehensive mental health services to our community.

**Who will benefit? What population will be served?**

Adult residents of Franklin County who have been diagnosed with a severe and persistent mental illness. This will include referrals from hospitals and referrals from other community stakeholders.

**What services will be provided to address this unmet need?**

Community for New Direction will provide a full array of mental health services including psychiatry services, case management, outreach and engagement, and acute support services. In 2020 CND will start an IDDT / ACT team to serve 60 individuals who meet the criteria for that level of care.

**What are the best practices identified to meet this need?**

Best practices that will be utilized include, Integrated Dual Diagnosis Treatment, Assertive Community Treatment, Motivational Interviewing, and Stage Wise Treatment.

**Time Period:** 10/1/2019 – 12/31/2020

**Output:** CND will serve at least 150 people in 2020 with 60 of them being served at an ACT level of care.

**Output Efficiency:** 2944.18 average per consumer served

**Result Statement:** CND will track the following outcomes:

- Decrease in inpatient psychiatric stays
- Decrease in crisis episodes
- Decrease in use of substances
- Increase in housing stability
- Increase in employment

**Contractor/Provider Name:** Community for New Direction

**Action Number:** [Action Number]

**Type of Action:** This action represents a new program with a preferred provider.

**Funding Source:** ADAMH Levy

**Funding Mechanism:** ADAMH Claims, Block Grants and Central Pharmacy

**Financial Specification:**

Amount	Fiscal Year	Description	Org#	Object#	Project#
\$500	2019	Central Pharmacy	11580100	599350	H1014
\$2,000	2019	Flex (Claims)	11580100	599526	H1014
\$158,963	2019	Acute Support Services (Exempt Block Grant)	11580100	599587	H1014
\$37,500	2019	General Claims	11580100	599526	H1014
\$2,000	2020	Central Pharmacy	11580100	599350	H1014
\$10,000	2020	Flex (Claims)	11580100	599526	H1014
\$150,000	2020	IDDT/ACT (Claims)	11580100	599526	H1014
\$129,627	2020	Acute Support Services (Claims)	11580100	599526	H1014
\$150,000	2020	General Claims	11580100	599526	H1014

**Financial Impact:** This action will increase CND's allocations by \$198,963 in KY 2019 \$441,627 in KY 2020.

ADAMH will shift resources previously associated with CAIHS to fund these programs.

**Business Associate Agreement Required per HIPAA:** No – the contractor or provider is a covered entity that must comply with HIPAA requirements to protect the privacy and security of health information

**ADAMH Staff Responsible For This Action:** Jennifer Martinez

**ADAMH BOARD OF FRANKLIN COUNTY  
BOARD ACTION  
SEPTEMBER 24, 2019**

**Action Title:** Near East Side Partnership

**Recommended Action:** It is recommended that the ADAMH Board of Franklin County allocate funding in the amount of \$591,234 in Contract Year (KY) 2019 and \$1,210,631 in KY 2020 for PrimaryOne Health and Southeast Inc. to provide comprehensive physical and behavioral health services to the Near East Side neighborhood.

**Strategic Result Alignment:** Access to Quality Care Services

**Rationale:**

**Identify Unmet Need in Franklin County?**

The recent closure of Columbus Area Integrated Health Services (CAIHS) has left the Near East Side community without a behavioral health provider in the neighborhood. This partnership will ensure that the needs of this community continue to be met, that services are accessible and delivered in a culturally and linguistically appropriate manner.

**Who will benefit? What population will be served?**

These services will be available to adult residents of Franklin County who are seeking physical and behavioral health care services, with an emphasis on serving the Near East Side community.

**What services will be provided to address this unmet need?**

The partner organizations will provide a comprehensive set of both physical and behavioral health care services, including short and long term specialized counseling services, medication assisted treatment, case management, and IDDT / ACT services.

**What are the best practices identified to meet this need?**

Best practices that will be utilized include: Trauma informed care, Motivational Interviewing, Assertive Community Treatment, and Integrated Dual Diagnosis Treatment.

**Time Period:** Contract Year 2019: 10/1/2019 – 12/31/2019 & Contract Year 2020: 01/01/2020 – 12/31/2020

**Output:** Collectively these two organizations will serve at least 450 individuals in the first full year of operations.

**Output Efficiency:** Southeast (KY 2020) \$3,375 per (300) client (excludes shared expenses); PrimaryOne Health (KY 2020) \$591 per (150) client (excludes shared expense)

**Contractor/Provider Name:** PrimaryOne Health & Southeast Inc.

**Action Number:** 19299

**Type of Action:** This action represents development of a new program with two preferred providers.

**Funding Source:** ADAMH Levy

**Funding Mechanism:** ADAMH Claims and Block Grants

**Financial Specification:**

Amount	Fiscal Year	Description	Org#	Object#	Project#
\$176,960	2019	Southeast (exempt block grant)	11580100	599599	H1014
\$347,557	2020	Southeast (exempt block grant)	11580100	599599	H1014
\$350,892	2020	Southeast (General Claims)	11580100	599526	H1014
\$51,916	2019	PrimaryOne Health-Operations (exempt block grant)	11580100	599580	H1014
\$362,358	2019	PrimaryOne Health – Shared Expense (exempt block grant)	11580100	599581	H1014
\$88,687	2020	PrimaryOne Health - Operations (exempt block grant)	11580100	599580	H1014
\$423,495	2020	PrimaryOne Health – Shared Expense (exempt block grant)	11580100	599581	H1014

**Financial Impact:** This action will increase Southeast's allocations by \$176,960 in KY 2019 and \$698,449 in KY 2020.

This action will establish PrimaryOne Health as an ADAMH contract Provider. KY 2019 allocations will be \$414,274 and KY 2020 allocations will be \$512,182.

Note that \$362,358 (KY 2019) and \$423,495 (KY 2020) of PrimaryOne Health allocations are shared costs associated with both Providers, including an estimate of \$318,585 in one-time startup costs.

ADAMH will shift resources previously associated with CAIHS to fund these programs.

**Business Associate Agreement Required per HIPAA:** No – the contractor or provider is a covered entity that must comply with HIPAA requirements to protect the privacy and security of health information

**ADAMH Staff Responsible For This Action:** Jennifer Martinez



## September 2019 Media and Participation Report

### ADAMH News

**Sept. 3** – Columbus CEO Magazine gave an overview of the Ohio Opioid Education Alliance and the Denial, Ohio advertising campaign. The article highlighted efforts by the Nationwide Foundation and the ADAMH Board of Franklin County. (*Columbus CEO Magazine*, Denial, Ohio: Opioid Education Alliance on the frontlines of fighting addiction)

**Aug. 30** – The ADAMH Board of Franklin County is mentioned as part of the Columbus and Franklin County Addiction Plan to combat the opioid epidemic. While overdose deaths declined in other parts of the state, the number continued to increase in Franklin County (*Columbus Dispatch*, Ohio drug deaths plunge 22% in 2018, but rise in Franklin County)

### Provider and Community News

**Sept. 9** – NBC4 interviewed Dr. Paige Stewart, Head of Heartland High School, to talk about the area's first recovery high school and the Grand Opening scheduled for Sept. 20. (NBC4, Ohio's only high school dedicated to helping students overcome addiction opens)

**Sept. 5** – WOSU highlighted Maryhaven's efforts to reach out to the Asian community to help with gambling addiction. (WOSU, To Curb Gambling Addiction, Columbus Groups Reach Out To Asian Americans)

**Sept. 3** – Franklin County Public Health will receive nearly \$3.9 million a year from the federal Centers for Disease Control and Prevention to gather data on opiate overdoses. The grant will include partner organizations, including the Columbus Division of Fire, Columbus Public Health, Equitas Health, Mount Carmel Health System, OhioHealth, Ohio University and Ohio State University's College of Public Health and Wexner Medical Center. (*Columbus Dispatch*, \$3.9 million grant to boost Franklin County's opiate prevention, response efforts)

**Aug. 29** – Daytime Columbus highlighted Maryhaven's 65 years of service. (NBC4, Treatment and Hope for Addiction & Mental Illness at Maryhaven)

**Aug. 23** – Smart Business Columbus interviewed Africentric Personal Development Shop CEO Jerry Saunders, Sr. and highlighted APDS services in the community (*SmartBusiness Columbus*, ADPS hones its services to meet community needs)

### Community Participation

**Sept. 14** – ADAMH Vice President of Planning & Evaluation Jonathan Thomas welcomed participants at Youth Mental Health First Aid at Dublin Coffman High School.

**Sept. 14** – ADAMH Volunteer and Events Coordinator Diane Peterson and ADAMH PIO Mackenzie Betts staffed the ADAMH resource table at the HopeFest Community Festival at Watkins Elementary School coordinated by the South Side Hope CDC.

**Sept. 7** – ADAMH sponsored Scarlet and Gray Tailgate, a family-friendly, sober celebration, through a Mini-Grant awarded to Ohio State Collegiate Recovery.

## September 2019 Media and Participation Report

**Sept. 5** – ADAMH Volunteer and Events Coordinator Diane Peterson staffed the ADAMH resource table at Confronting the Addiction Crisis event at Hilliard Church of Christ. This event was supported with an ADAMH Mini-grant.

**Sept. 5** – ADAMH Youth Services Manager Mitzi Moody staffed the ADAMH resource table at the Indian Trail Elementary School Student Success Night.

**Sept. 3** – ADAMH Medical Director Dr. Delaney Smith presented at the OSU College of Medicine's Opioid Conference for students.

**Aug. 31** – ADAMH sponsored the Scarlet and Gray Tailgates that take place before home OSU football games through an ADAMH Mini-Grant given to the Ohio Collegiate Recovery Community to provide a sober and family friendly tailgate event.

**Aug. 30** – ADAMH Volunteer and Events Coordinator Diane Peterson and ADAMH Prevention Manager Nettie Ferguson staffed the ADAMH resource table at the Child Development Council of Franklin County Wellness Fair for staff who work at local Head Start centers.

**Aug. 29** – ADAMH coordinated the final Near East Side Community Meeting at East High School to gather feedback from the community on health services needed on the Near East side.

**Aug. 28** – Multiple ADAMH staff members took place The Columbus Foundation's The Big Table conversations at various locations in the community.

**Aug. 28** - ADAMH Youth Services Manager Mitzi Moody welcomed participants at Youth Mental Health First Aid coordinated by Mental Health America of Franklin County.

**Aug. 23** – ADAMH sponsored the Africans 400 Years in America event with an ADAMH Mini-grant at the Ohio History Connection.

## Denial, Ohio: Opioid Education Alliance on the frontlines of fighting addiction

By Shannon Shelton Miller

Posted at 7:40 AM

Here's what's behind that marketing campaign you might have seen all year on billboards, in television commercials and more.

*Editor's Note: This is an extended version of the story that ran in the September 2019 issue of Columbus CEO.*

It's a safe and secure place, one where photogenic families watch their children play rec league baseball and enjoy a meal at the local café. The communities are pristine, and perfect parents with their even-more-perfect children bask in the comforts of their well-manicured homes and neighborhoods.

It seems impossible for addiction to happen in Denial, Ohio.

This Pleasantville-style on-screen depiction of Denial—a fictional Ohio city, town or suburb that could double for hundreds of real locales—is exactly the point, say representatives of the Ohio Opioid Education Alliance, a coalition of businesses, trade associations, nonprofits, health care organizations and educational institutions formed in 2018 to educate communities about the nature of opioid addiction and provide steps toward prevention.

The message is clear: No place is immune, and individuals battle addiction in similar places every day. It's time for everyone to stop living in Denial.

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The Nationwide Foundation provided initial funding of \$2 million for the Ogilvy-produced marketing campaign, which features the now-ubiquitous ads that target parents and caregivers, and the alliance has established a donor-advised fund managed by the Columbus Foundation. As of August, \$6.4 million had been contributed to the fund.

“We haven’t spoken to any organization that hasn’t said, ‘We want to be part of this positive work,’ ” says Nationwide Foundation President Chad Jester. “This conversation about the campaign and the alliance started with ADAMH (Alcohol, Drug and Mental Health Board) of Franklin County and (CEO) David Royer’s great leadership, and with Nationwide. Now we have more than 70 organizations from throughout the state of Ohio involved, and many of those partners are also investors in the work.”

While opioid addiction has become a national concern during the latter part of the decade, Ohio long has been considered the epicenter of the crisis due to its high number of overdose deaths. Information provided to the Ohio Department of Health for 2017, the most recent year statewide data was available, showed a record 4,854 unintentional fatal drug overdoses. While that number was the highest in eight years, heroin deaths dropped by 46 percent in 2017 to 987—the fewest in four years—and prescription opioid deaths also dropped to 523, the lowest in eight years and down from a peak of 724 deaths in 2011.

The high number of deaths can be blamed on rising use of a dangerous synthetic opioid called fentanyl, according to state data.

The alliance emerged as part of the **Franklin County Opiate Action Plan**, developed by ADAMH in 2017 after the city of Columbus and Franklin County officials worked to adapt a large-scale plan to address the opioid crisis. For those suffering from addiction, the plan takes a comprehensive approach by working with hospitals and the health care community to ensure timely on-demand treatment, the presence of stabilization centers, expanded availability of naloxone to reverse overdose and collaboration with first responders and police.

Jester notes that engaging organizations through the Denial, Ohio, campaign has led to a common response among those who initially thought they had no personal connection to the opioid crisis.

“We’re hearing from people saying, ‘Thanks for raising the awareness about disposing properly of prescription meds because I went home and found an opioid in our medicine cabinet that was 20 years old,’ ” Jester says. “It’s an indication that people don’t always dispose of their opioid medication or any medication when they should.”

Maybe the original owners have no plans ever to take that pill, he notes, but one day, their teenage children could. “We know most heroin users will tell you that their first experience with opioids was going through a medicine cabinet,” Royer says.

Nationwide has been working internally around the issue with its employees for the last five years, bringing in speakers from the health care sector, law enforcement and others to provide education about the crisis and how to address it within their own homes.

“We all employ people who might be suffering through addiction, but at the very least, we want employers to be aware of the risks through opioid prescription pills, how to address that risk and then how to talk to children in their life,” Jester says. “We really viewed it as an employer-first mindset that engaged everyone from every sector, including the private sector.”

For Bexley dentist Sharon Parsons, vice president of the Ohio Dental Association, the crisis came to her front door. Her son, Sean Herman, died of a heroin overdose in September 2015 when he was 27.

She often shares the story of how Sean first encountered opioids as a college student when he needed to manage pain after a dirt bike accident. A friend gave him oxycontin to help him cope while he was finishing his finals. That started the path to heroin addiction, a common next step for opioid users seeking to replicate the high.

Through the Ohio Dental Association, which joined the alliance in March, Parsons has used her story to become an industry-wide advocate for prevention and education throughout Central Ohio. She also speaks to national audiences about the medical community’s role in preventing addiction.

“Between the ages of 13 and 26, the prefrontal cortex of the brain is still forming,” says Parsons, who will take over as association president in October. “And in that tender age range, if you’re exposed to an opiate, you’re five times more likely to become addicted. That’s the time for middle school, high school, college sports and getting your wisdom teeth pulled.”

The common response to wisdom tooth surgery pain? Prescribe a narcotic.

“When I was in dental school, we learned to manage pain,” Parsons says. “I’m old enough now to remember—I graduated in 1981, I’m 62 years old now—that maybe eight to 10 years after that, they started changing their thinking from managing pain to eliminating pain. They were all prescribing for what they thought was a good reason and not realizing that they’re giving people something that could kill them.”

As Parsons speaks to dentists, medical practitioners and families, she emphasizes that denial can also exist as a refusal to change existing habits or mindsets about treating pain—opening another path to addiction.

From the employer education standpoint, Royer of ADAMH stresses the importance of companies supporting employees struggling with addiction or those dealing with family members in the throes of the disease.

“One of the other key conversations we have with employers is that for many people there, there’s still an embarrassment factor,” Royer says. “When a family member is experiencing difficulties with opioids or any form of substance use disorder, it’s somewhat stigmatizing. We’ve tried to educate our employers that if an employee comes in and talks about cancer, for example, there’s really no stigma associated with that. We all embrace and support that employee.”

He wants addiction to receive that same level of compassion. Relapse will be part of the process, he says. Employers should understand that addiction functions like a chronic disease that is not only debilitating for the individual, but that stretches through the entire family structure. Businesses and organizations can improve the culture of support for employees by offering internal assistance and references to external resources when needed.

And as Parsons advocates in memory of her son, she wants organizations to recognize the role they play in prevention and education.

“Just those two little words made people aware that we really do need to talk about it,” Parsons says. “I saw a statistic that says 192 people a day in this country die of drug overdoses. You can’t keep hiding that this is here.”

*Shannon Shelton Miller is a freelance writer for Columbus CEO.*

# The Columbus Dispatch

## Ohio drug deaths plunge 22% in 2018, but rise in Franklin County

By Catherine Candisky  
The Columbus Dispatch

Posted Aug 30, 2019 at 6:00 AM

Fatal drug overdoses dropped more than 22% in Ohio last year, the first decline since 2009 and a sign that the state may be turning the corner on the decade-old drug epidemic.

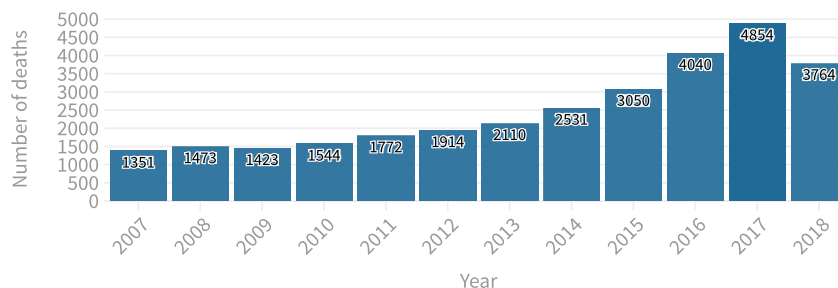
But Franklin County bucked the trend, logging 476 drug deaths last year, the largest toll in the state and up 10% from 2017.

County coroners reported 3,764 accidental drug deaths in 2018, 1,090 fewer than the previous year's record high of 4,854, according to preliminary data on unintentional drug deaths reported to the Ohio Department of Health. The numbers will be finalized in a few weeks but are not expected to change significantly.

Ohio's decrease was more than four times the national decline of 5%, according to provisional data released separately by the federal Centers for Disease Control and Prevention, which calculates deaths slightly differently. Ohio had the third-largest drop among states but still has among the highest rates of fatal drug overdoses in the country.

### Declining drug deaths

Fatal drug overdoses in Ohio fell last year for the first time in nine years, dropping 22% over 2017.



Source: Ohio Department of Health

“We are very encouraged that there has been 22% to 23% reduction in overdose deaths in Ohio from 2017 compared to 2018,” said Dr. Mark Hurst, medical director for the Ohio Department of Health. “At the same time we need to put that into perspective — that there are still thousands of individuals who lost their lives due to unintentional drug overdose — so our work is far from over.

“For the past 10 years we’ve seen an increase each year. This is the first year we’ve seen a decrease. There is hope for recovery.”

State data shows that most of Ohio’s six largest urban areas had double-digit declines, led by hard-hit Montgomery County, where drug overdoses fell 47% in 2018. Summit County reported a 46% decline.

Other than Franklin County, the only urban area to report a jump was Lucas County, where deaths increased 8% in 2018.

Cuyahoga County, which led the state in 2017 with 598 deaths, reported a 26% decline in 2018. Likewise, fatal overdoses in Hamilton County fell 20% last year.

Overall, drug overdoses in the six urban centers accounted for nearly half of the deaths statewide.

Montgomery County’s turnaround from having one of the highest overdose death rates in the U.S. was so stunning that Dayton was featured by the Center for American Progress as an example for the country.

“What Dayton has done is remarkable,” Ed Chung, vice president for the center’s criminal justice reform effort, said when the report was released. Chung grew up in the Dayton suburbs.

“Dayton has shown that the opioid crisis is not hopeless and that there are actionable steps that cities can take to reduce deaths and help people along the path to recovery.”

Dayton Mayor Nan Whaley said, “The big thing is, it’s stigma-busting, so you need to use the bully pulpit to break the stigma around addiction issues and treat addiction like the disease it is. That is really important.”

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The key to Dayton’s success is a community-wide collaborative. The city has widely used naloxone, a lifesaving drug that can reverse an opiate overdose, for more than five years and was one of the first communities to set up needle exchanges for addicts. Rather than hopelessly perpetuating drug use, as some critics contend, such “harm reduction sites” give an addict a place to go when they’re ready to start recovery, Whaley said.



Having police and recovering addicts work alongside social workers has proved greatly effective, she said. “I’m a big fan of peer advocates, because that person’s been through the walk. They’re not just do-gooders. They’re someone that has been there.”

Columbus Public Health Commissioner Dr. Mysheika W. Roberts commended those on the front lines in Montgomery County and elsewhere, saying she and other local officials have examined those efforts in hopes of duplicating their success. In response, they have assembled a broad-based coalition and are using data to update plans and setting goals to combat addiction and reduce overdose deaths.

The new Columbus and Franklin County addiction plan is being led by Columbus Public Health and is a collaboration between the city, county and the Alcohol, Drug and Mental Health Board, plus others.

“We’re trying to be more aggressive,” Roberts said, “and examine where did we miss an opportunity to intervene.”

For instance, a majority of those who overdose have had previous contact with law enforcement, so the coalition is beefing up addiction services provided in the county jail and after release.

“This is not going to be fixed overnight, even though some of our peers have seen dramatic declines,” Roberts said.

Hurst said it’s difficult to point to any one action causing drug deaths to decline, but counties such as Montgomery and Summit that have seen the biggest drops have taken a community approach.

“The community has come together and implemented a comprehensive approach to confront this epidemic. That consists of prevention, of early intervention, of effective treatment (and) blanketing the community with naloxone that’s available to reverse the effects of overdose,” Hurst said.

“That comprehensive approach is really what’s necessary. It’s really hard to attribute it to one specific thing.”

In Franklin County and across Ohio, powerful fentanyl continued to be the leading cause of drug deaths, accounting for 73% of fatal overdoses in 2018, but it could be losing its grip. Statewide, the number of deaths attributed to the synthetic opioid fell for the first time in a decade. Fentanyl killed 2,733 last year, down from 3,431 in 2017.

The state data shows other encouraging signs:

- Heroin deaths declined for the first time in more than a decade, falling 21% from the previous year, to 3,050.

- Cocaine-related deaths were down 29%, to 1,092 in 2018 from 1,540 in 2017.
- Fewer Ohioans are dying from prescription opioids, which are blamed for triggering the epidemic and serving as a gateway to fentanyl and heroin use. Fatal overdoses from prescription opioids fell to 328 in 2018, a 37% drop from 2017, and down from a peak of 724 deaths in 2011.

Of Ohio's 88 counties, 61 had fewer fatal overdoses in 2018, 24 had more and three counties reported no change. Most of the counties reporting higher death tolls were in the southeastern portion of the state. There also was a pocket of six counties around Toledo in northwest Ohio that had higher death tolls.

Why deaths continued to rise in Franklin County remains unclear.

Franklin County had several deadly surges in overdoses last year. Among the worst was in March, when 18 people died during a six-day span, all related to using drugs mixed with fentanyl.

Similar waves in overdoses have continued into 2019. In January, three people died from carfentanil, a particularly lethal synthetic opioid used to sedate large animals that has reappeared in central Ohio. In May, nine people died in a four-day span, all related to fentanyl. Both carfentanil and fentanyl are often mixed with drugs like cocaine and heroin and sold to usually unsuspecting buyers.

"We've seen this epidemic evolve several times in the past 10 years from prescription drugs to heroin, from heroin to fentanyl, from fentanyl to carfentanil, and all of those are continuing and now we're seeing the resurgence of stimulants, too," Hurst said. "We need to stay on this."

*Public Affairs Editor Darrel Rowland contributed to this story.*

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# The Columbus Dispatch

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## \$3.9 million grant to boost Franklin County's opiate prevention, response efforts

By Megan Henry

**The Columbus Dispatch**

Posted Sep 3, 2019 at 7:25 PM

For the next three years, Franklin County Public Health will receive nearly \$3.9 million a year from the federal Centers for Disease Control and Prevention to gather data on opiate overdoses that is more timely and more comprehensive.

"It will allow us to track the effects of opiate addiction on the children of addicted parents, better link overdose survivors with treatment, work more effectively with our local hospitals, and create a campaign to address the stigma around opiate-use disorder," said Marilyn Brown, president of the Franklin County Board of Commissioners.

Ohio had the second-highest number of opioid-involved overdose deaths per capita in 2017, according to a report by the CDC. The state had 4,293 overdose deaths involving opioids, a 19% increase from 2016.

"Each of those deaths leaves behind an empty seat at the dinner table, a permanent gap in our community," Columbus Mayor Andrew J. Ginther said Tuesday.

The information collected through the Overdose Data to Action Grant, which went into effect Sunday, will be used to help prevention and response efforts, said Joe Mazzola, the Franklin County Public Health commissioner.

"This will better enable us to coordinate our community's rapid response to spikes in overdose as well as inform our overall prevention efforts," he said.

In the first year of the grant, Franklin County Public Health will split \$2.3 million with 14 partner organizations, including the Columbus Division of Fire, Columbus Public Health, Equitas Health, Mount Carmel Health System, OhioHealth, Ohio University and Ohio State University's College of Public Health and Wexner Medical Center, "to continue their great work," according to a news release on the grant award.

The grant, for instance, will allow the fire division to create a second Rapid Response Emergency Addiction Crisis Team (RREACT) to link overdose survivors with treatment and recovery support, Ginther said.

The existing team includes a mental-health nurse and a social worker who follow up with overdose patients treated by Columbus fire medics. Those who are interested in additional recovery are then put in touch with the nonprofit group Southeast Inc. for treatment.

“We are facing an opioid-addiction crisis, and our community has been hit particularly hard,” Ginther said.

Addiction is a chronic, relapsing brain disease, Columbus Health Commissioner Dr. Mysheika Roberts said, and the information that comes from the grant will allow the community to take a huge step forward in understanding and responding to the devastating disease.

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*@megankhenry*

# APDS hones its services to meet community needs

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**SB** [sbnonline.com/article/apds-hones-its-services-to-meet-community-needs/](http://sbnonline.com/article/apds-hones-its-services-to-meet-community-needs/)

Jayne  
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August 23,  
2019



My passion is to help people help themselves.

## **Jerry Saunders Sr.**

CEO, Africentric Personal Development Shop

While the Africentric Personal Development Shop may not be well known by the Greater Columbus community, CEO Jerry Saunders Sr. says it has the most important factor down — street credibility.

Since 1988, the Near East Side nonprofit has quietly helped take care of the community. Saunders joined APDS in 1997.

“On the front of our building, it says making families healthier and safer,” Saunders says. “I’m aware that when people are well off and they get counseling, it’s usually very confidential. We’re set up to serve people who may not have the funds to receive such services, and I believe it’s important for them to have confidentiality just as it they would have if they could pay for the psychologist or for the substance abuse counselors.”

It’s a delicate balance, though, because sometimes maintaining confidentiality means people in the neighborhood don’t know what APDS does.

## Concentrating down

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The behavioral health care center specializes in cognitive behavioral therapy and education classes to prevent, treat and eliminate substance abuse and domestic violence. Recently, APDS focused on its top three programs — substance abuse outpatient treatment, domestic violence intervention education for male batterers and youth prevention services through a summer day camp.

By paring back its broader approach, the nonprofit hopes to make a bigger impact, Saunders says.

“My passion is to help people help themselves,” he says, adding that APDS has found that it is important to treat the entire family, so he’d like to add family therapy programs in the future.

## Meeting needs

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After more than two decades helping people with substance use disorders, this summer APDS added medication-assisted treatment in response to the opioid epidemic. The programs are isolated, with different waiting rooms and classrooms to keep from triggering someone in a sobriety program.

Domestic violence is another area of expertise. APDS provides education classes to more than 200 male batterers annually.

“We provide those services to the perpetrator because our focus is about making families healthier and safer, and we saw that with a number of our clients, the victim was dropping them off and picking them up for their counseling sessions. We knew they were still involved, unless they had a stay-away order, so that impacted the children,” Saunders says.

APDS also puts on a nine-week summer enrichment program for 120 youth ages 6 to 12. Saunders says the idea is to enhance their lives so they won’t need the services of an agency like APDS when they become teenagers and adults.

## One challenge after another

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The work isn’t easy for the 11 full-time staff, two contractors and dozen summer employees at the Africentric Personal Development Shop.

“You have to be very committed to and caring about people,” Saunders says.

Failure is common. A good success rate for a substance use disorder program, on a national level, is 48 percent.

“For us at APDS, that’s unacceptable — that’s saying that half the people will be successful,” Saunders says. “I understand that this is a very serious illness that we’re addressing, but we’re doing our best to get above that.”

APDS’ goal this year is a success rate of 52 percent.