

# **Hancock County ADAMHS Board**

## **Strategic Plan Update**

**Drafted April 2022**

### **Aligning Treatment with a Recovery Oriented Approach**

#### **1. Involvement of Peers at all points of the treatment/recovery continuum.**

The following contract Agencies have peers on staff:

- Blanchard Valley Hospital – 2 peers
- FOCUS – 12 peers
- NAMI – 4 peers
- A Renewed Mind/OhioGuidestone – 2 peers
- Family Resource Center – 9 adult peers, 3 youth peers
- Hancock Public Health – 2 peers

Upon review last year, we had hoped to improve the understanding and use of peers within and across systems. Due to the workforce challenges and COVID, there was little progress on this. Peers do continue to be integral part of our system as our agencies work to meet the community's needs. The focus of better understanding and utilization of peers continues to be a Board priority.

There has been increased emphasis from the Board to pay based on experience and education vs. simply by role. Peers are generally the lowest-paid employee.

With the most recent federal award, FOCUS will be hiring an additional three peers, with a special focus on outreach and engagement.

#### **2. Development of a crisis continuum that includes “service on demand”.**

Monthly meetings continue to be held with key stakeholders related to crisis services provided in the community. Much has been done to improve communications and address areas of concern. This meeting is coordinated through the Board office under Jennifer’s leadership.

Crisis services have been expanded to include MRSS (mobile response and stabilization services) for youth; and the re-opening of the Tree Line property as The Steady Path in January of 2022. The implementation of MRSS was funded with a federal grant awarded to the State of Ohio where our Board was a sub-recipient. Effective July 1, 2022, the service will be Medicaid eligible. The state has also secured funding for those who are non-Medicaid eligible in need of the service.

The Steady Path is currently funded using a federal grant as well as funds from the Board which were previously used to fund Brookside. At the end of the federal grant, the financial support for the room and board will fall back on the Board. The opening of The Steady Path has increased the opportunity to serve individuals with higher levels of clinical need, however, due to the workforce shortage, they are not staffed to accept admissions 24/7 (this would require the presence of medical staff 24/7). As the staff gain experience, it is anticipated that the admission process will be shortened, providing more access during working hours.

The Brookside group home was closed with the opening of The Steady Path. Based on the recommendations of the special housing committee, the Brookside property is being prepared as a rental property for a Metropolitan Housing voucher eligible family.

Through the State Department, there is a statewide Crisis Task Force comprised of key stakeholders. Precia is one of 4 representatives from Boards. It is anticipated that the state will be making significant investments in crisis services. Such investments could be used to offset expenses associated with The Steady Path.

**3. Fully implement a criminal justice division at Family Resource Center with focus on engagement and diversion.**

There are three large criminal justice grants that have been awarded to Family Resource Center. The Agency currently provides services in the Justice Center (2.5 FTE's); services to the adult probation department; a QRT (Quick Response Team); and a LEAD program – an adult diversion program. In addition, staff support is provided to two drug courts and one Family Diversion Court.

The new grant with FOCUS includes outreach and engagement with individuals involved with the criminal justice system.

The state Stepping Up Initiative is conducting a virtual site visit in April to get an update on services provided in our community and share progress made throughout the state on working with the criminal justice population. They haven't been to our community since 2017. It is anticipated that they will recommend that our community undergo a Sequential Intercept Mapping Process to evaluate our progress and identify areas of need.

**Integrated Peer and Other Recovery Supports Mobilizing and Activating the Recovery Community.**

**1. Work with Housing Collective Impact Coalition to advocate for affordable housing for individuals with mental illness and/or substance use disorders.**

The Affordable Housing Alliance (AHA) continue their efforts to develop and sustain affordable housing, as well as remove barriers, for residents of Hancock County. Board staff attend the AHA meeting, held quarterly as well as participate in a sub-committee to identify barriers to housing. The Brookside Home project and Landlord Risk Mitigation fund dollars are two examples of work shared with AHA.

Their goals continue to be to:

- establish a community organization to coordinate financing for affordable housing
- expand existing renovation programs
- seal/expunge criminal records
- develop a revolving rent deposit assistance program
- provide incentives to landlords to participate in housing choice vouchers

**2. Identify ways to incorporate employment as a recovery capital measure and incorporate into contracting.**

This priority will be focused on in the upcoming years. The utilization of the Kan Du employment services available through both the CCBHC (Certified Community Behavioral Health Center) and the SOR (State Opiate Response) grants has been slow. Client engagement in those services has been minimal at this point. Family Resource Center is continuing to improve its referral process and addressing the lack of client engagement in these services. Lessons learned from this work will inform how we move forward.

## **Performance Improvement and Evaluation**

**1. Establish a mechanism for ongoing consumer feedback.**

This has been identified as one of the top priorities to be achieved in the System of Care Strategic Plan that was completed in December of 2020. Brandeis has assisted with this effort. The goal is to develop an electronic system whereby anyone can provide feedback/input into services provided in this community at any time.

The survey tool has been developed and will soon launch throughout the agencies involved with the local Family First Council. Feedback received will be routed to the appropriate organization/agency for response. The feedback will be tracked for themes so it can be used for improving services at the systems level.

Public information related to this initiative is in the development stage via Family Resource Center.

**2. Participate in the Collective Impact Initiative, especially in the focus area of mental health and substance use.**

In 2016, the Mental Health & Substance Use Coalition was developed in conjunction with six other collective impact initiative coalitions to address community-identified issues (2014 Community Needs Assessment, 2014 Community Conversations). The coalitions were supported through a backbone organization, the Findlay-Hancock County Center for Civic Engagement, which was intended to support alignment of a common agenda, promotion of communication, and collection of data.

The Mental Health & Substance Use Coalition was a collective representation of the ADAMHS Board, including the Community Partnership, Opioid & Addictions Task Force, and ROSC Leadership Committee. It was realized this was a duplication of work and in 2020 and the Coalition transitioned to being represented in the other Collective Impact Initiative work by ADAMHS Staff. This representation continues today, reinforcing cross communication, support, and resource sharing across the other Collective Impact Initiative coalitions.

In the past year, the Center for Civic Engagement has been challenged with determining its place and role within the community. Local needs, interests, and challenges have significantly changed the way the CCE functions. It is the intention of the CCE Board, along with its Strategy Leader to determine the most appropriate way it can support the community, create a sustainable and intentional role within the community, and advance its Grand Challenge. The work of ADAMHS will continue be a part of collective impact throughout these community efforts.

**3. Monitor Implementation of System of Care Grant via national evaluation efforts. *Recommended change from the Program Committee: Monitor implementation of all federal grants.***

The Program Committee is recommending that this section be expanded to include all federal grants in the future. Currently the Board is managing 4 direct federal grant awards (System of Care; LEAD; The Steady Path; and the Outreach and Engagement grant with FOCUS). For this update, this section only addressed the System of Care grant.

This is the 4<sup>th</sup> and final year of the System of Care grant. Priorities for this year that are in progress include:

- a. Advancing Youth Thrive. A “train the trainers” training will be held in July and is capped at 30 participants. A representative from the state department will be attending the meeting.
- b. Safety Training. Training is planned for individuals who go into homes/living environments to secure their safety and the safety of the clients they serve. This will be open to all in home providers in the community (case managers; home health; first responders; QRT, etc.) and will be held this summer.
- c. NOMS Collection. We are on target to meet the numbers served identified in the application. Results overall are positive.
- d. The feedback survey is ready for launch.
- e. A Program Feedback survey is near ready to launch.

- f. A Care Pathway has been developed for transition age youth and incorporates the Youth Thrive Model. CSSP (Center for the Study of Social Policy) is working with Family Resource Center to modify the document for national use.
- g. A second System of Care grant was submitted, and if approved would begin in October of 2022.

## **Promotion of Population and Community Health with a Focus on Prevention and Early Intervention**

### **1. Conduct a public awareness campaign aimed at involving the community and to promote prevention messages.**

The Hancock County Community Partnership and Hancock County Opioid & Addictions Task Force continue to move forward efforts to increase awareness, reduce stigma, and build resilience. Some activities have included:

- Part-time Community Relations and Health Promotion Coordinator manages social media, press releases, and articles that promote prevention messages. (This position was included in the pending second System of Care grant.)
- Community-based collaboration to create messaging and outputs.
- Funding received from Hancock Public Health to fund the purchase of media and resources
- Prevention messages aired regularly on three local radio stations
- Diversified messaging outputs – coffee sleeves, pizza box stickers, coasters, posters/post cards in dollar store and gas stations (promoting Hancock Helps).

The pandemic necessitated a shift in messaging to focus on addressing grief, self-care, and connection, resulting in a promotion of the concepts of Reach Out. Connect. Belong. The Community Partnership and Opioid & Addictions Task Force maintain this campaign, modifying and improving messages to respond to the needs of the community.

### **2. Develop adult prevention services, including a focus on the importance of connection.**

While not currently developed as a specific position, progress has been made on expanding the availability of adult prevention services.

- Family Resource Center has been in discussions with ADAMHS Staff to determine the most appropriate way to create programming that supports strategies and services that reach adult populations to address mental health and wellness.
- The SAMHSA Suicide Prevention Grant (ending April 2022) expanded community outreach through self-care education and workplace suicide prevention trainings.
- In FY22, the ADAMHS Board supported alcohol server training for local restaurant and bar employees, offering funds to cover the cost of the training and an incentive to

participate in the training. This program is managed through a partnership with the Findlay-Hancock County Convention & Visitors Bureau.

- In FY22, the ADAMHS Board participated in the Bureau of Workers' Compensation Substance Use Recovery Program which provides reimbursement to local businesses who develop a comprehensive drug-free workplace program, including second chance policies and prevention education.
- Mental Health First Aid has been sustained through the efforts of NAMI Hancock County and Family Resource Center.
- Family to Family and Peer to Peer programming has been maintained by NAMI of Hancock County.

**3. Restructure the delivery of school-based services; create access to universal screening (streamline with System of Care Grant changes)**

- Family Resource Center continues to implement its prevention wellness program which combines both prevention and clinical services at local schools. Through this program, staff are assigned specific school buildings to build strong working relationship with school staff and students. There is continued growth in the request of prevention services across Findlay-Hancock County schools.
- Family Resource Center Prevention Services has evaluated its curriculum and program offerings through the lens of the Youth Thrive Framework, ensuring the services it delivers are reinforcing protective and promotive factors.
- The universal screenings have been utilized so far by Vanlue where 48 students were screened. Additionally, McComb has one scheduled has not yet been completed. Screening has been promoted to all of the schools, but these two have consistently utilized this resource.

**4. Advance the discussion of whole health model including the importance of mind/body connection.**

There has been no direct activity on this priority to date.

**Individualized Services Appropriate to Trauma, Culture, Gender, etc. (Interventions)**

**1. Develop specialized programming for caregiver and children impacted by substance use, mental health and family dysfunction.**

Family Resource Center is providing the following:

- Thrive Parent Support Group – safe space for parents and caregivers to gain support and thrive through mental health and addiction recovery.

- Grandparents Raising Grandkids Support Group – support for grandparents with tools and supports from others in the same situation.
- Nurturing Families Support Group – Pregnant moms or moms who are struggling with substance use and have child(ren) up to 18 months old.
- Transitional Age Youth Specialist – Provide additional services and positive adult influence to youth 14-25 years old.

The FFPSA (Federal Family First Prevention Services Act) and OhioRISE may result in additional programming for this priority.

The System of Care Initiatives, Youth Thrive and Case Review Workgroups are impacting much of the philosophical work of agencies. Agencies are increasingly including youth and family voices, looking at new ways to do it (vs. we have always done it this way), looking across systems for help, utilizing peers, etc. It is anticipated that other impacts from these initiatives may result in additional services for caregivers and children.

In addition, a youth camp for youth ages 9-17, impacted by addiction was implemented through a cross-system collaboration with the faith-based community. The next camp is scheduled for June of 2022 and is planned to be offered twice a year.

## **2. Establish a technology committee to develop and implement a plan to advance the use of technology in board system.**

While much has been done in the area of technology, such as the availability of telehealth services; updates to electronic health records to include screening on functional capabilities and risk for suicide, etc. there has been minimal advancement from last year on the development of a Digital Ecosystem as envisioned. This is a reflection of workforce shortage and competing priorities as a result of the pandemic.

The concept of a Digital Ecosystem has been developed by Kaiser Permanente and they are willing to share all of their materials. They have identified apps that would be helpful for patients; methods for training staff and referral sources; and ways to integrate technology into everyday clinical practice. Adopting a model such as this would greatly reduce the amount of time needed to get it in place.

## **3. Fully Implement Zero Suicide Initiative for youth and adults.**

Family Resource Center is working to develop a Zero Suicide Initiative 3-year work plan. The plan will include a strategic plan, internal & external trainings, and internal & external awareness. Support for the development of this plan was provided by the federal Suicide Prevention Grant awarded to Family Resource Center.

The SAMHSA grant provided the staff and resources to offer Self Care, Working Minds, and QPR trainings to the community. It also supported the availability of outreach and rapid follow up to individuals following an attempt or suicidal crisis.

Other activities supporting this work include the following:

- Critical Time Intervention – recognizing that additional support is critical at times of transition.
- Daily Crisis Huddle – daily meeting at FRC to review crisis line reports, police reports (CIT), hospital admissions/discharges to determine what additional supports are needed.
- Grief Recovery Method – an approach to healing from losses that is offered in community group setting.
- Companioning the Mourner – a six-week class to support those who have lost a loved one from death by suicide.
- Caring Contacts – addressing suicide risk by sending cards to individuals during times of transition or following a suicide attempt.

**4. Develop a Board position statement on acceptance and inclusion to promote community safety.**

ADAMHS Staff lead efforts and provide administrative support to the Hancock County Cultural Humility & Health Equity Delegation. The Delegation is seeking to create a Community of Belonging in Findlay-Hancock County. As a result of their strategic planning effort, the Delegation is focused on the following priorities: establish common practices to ensure governance, data collection, and leadership/staff representation are most effective for the people served; and advocate for policy changes that establish clear guidelines on addressing issues of adversity and health inequities. Through the work of the Delegation, the ADAMHS Board will be able to model its own statement on this body of work.

Financial support for the Delegation has come from The Community Foundation and the SOR (State Opiate Response) funds.

**5. Increase the availability of services through the collaborative development of a mobile health clinic and the availability of transportation.**

The mobile health clinic is under the direction of Hancock Public Health. It was used during the past year, primarily to assist with making the COVID vaccine available. As the pandemic advances to the endemic stage; the use of the mobile health clinic will be expanded. Currently, the Health Department has a position posted for someone to coordinate the efforts of the mobile health clinic. The Board continues to advocate for the availability of mental health and addiction resources/screening to be available when the clinic is in use.



## **Fiscal, Policy and Regulatory Alignment**

### **1. Monitor the implementation of Managed Care.**

Ohio has made a decision to do a managed care “carve out” for multi-system youth. The initiative is called OhioRISE. Aetna has been selected as the managed care company to administer funds for youth enrolled into OhioRISE (anticipated to be approximately 60,000 youth in Ohio). Precia is serving on the state advisory board to oversee the implementation of the initiative in Ohio. Implementation will begin on July 1, 2022.

The goal is to retain youth in the home with their families. As a result, additional “in-home” and intensive intervention services will be needed. This includes intensive home-based services and MRSS (mobile response and stabilization services). Youth will be enrolled as a result of a CANS (Children and Adolescent Needs and Strengths) Assessment. If eligible, youth will be assigned to a regional CME (Care Management Entity). The region that includes Hancock County will be administered by Harbor Behavioral Healthcare in Lucas County.

There is a local implementation committee to address the needs to be in compliance with OhioRISE as well as the FFPSA (Federal Family First Prevention Services Act).

As with other initiatives, the primary concern is the workforce shortage.

### **2. Develop a long-term vision for capital, including the development of a wellness center in the community.**

The Board passed a Property Policy in March of 2021. As a part of the development of the policy a written summary of all Board owned properties was developed and shared with all Board members. The first property to have a mortgage expire is Basu Point in 2024. The mortgage on the Board office expires in 2025.

As a part of the policy, Board members are to receive a copy of the actual costs to provide housing for Hancock County residents using Board owned properties. A copy of that report is attached. The total net cost, including property and programming expenses for FY’21 was \$577,575.

The State Department, in August of 2021, sent a correspondence indicating the availability of funding to support the top two capital priorities of the Board. The two priorities submitted by the Board included the purchase/renovation of The Fostoria Junction by New Housing Corporation; and renovation of the Board Office.

New Housing closed on the purchase of Fostoria Junction in early April. We are currently in the process of working with the state department on the capital application.

The Board submitted a request to the County Commissioners for match funding for the renovation of the Board Office. Applications for financial assistance were accepted through April 25, 2022. If approved, the renovation project can begin ASAP. If no funds are awarded, the Board will need to determine if/how to advance the renovation project.

**3. Re-evaluate Board sliding fee scale.**

This issue has been tabled due to the merger of A Renewed Mind with OhioGuidestone and the implementation of the CCBHC grant at Family Resource Center.

**4. Secure Levy (current levy expires tax year 2022)**

In January 2022, the ADAMHS Board established The Citizens Committee for Mental Health & Substance Use Services to prepare for a replacement levy on the May 3rd ballot. The Committee has been meeting bi-weekly, implementing a campaign strategy to inform the community of the importance of the funding generated by the levy. If passed on May 3, 2022, approximately 2.85 million dollars per year will be secured for the next five years.

***Recommended Additions for FY'23:***

- 1. Develop a System-wide Workforce Development Plan.***
- 2. Expand the availability of occupational therapy with the use of student interns.***
- 3. Promote engagement in services for pregnant women with Substance Use Disorders.***