

## ROSC Implementation Third Quarter FY'15 Scorecard Report – April 2015

**Current ADAMHS Mission:** “To create an environment that brings hope and improves the quality of life for persons affected by mental illness and substance abuse and promote wellness for all ages through a locally administered and publicly funded system.”

Strategic Objective: Aligning Treatment with a Recovery-Oriented Approach						
Key Priorities	Metric	Q1	Q2	Q3	Q4	Comments:
<b>Priority 1: Recovery Oriented Clinical Assessment that Includes Peers</b>						
<p><b>FY'14:</b> Display model plans for adaptation and adoption by community, all providers and those doing assessment; offer continuing education.</p> <p><b>FY'15:</b> Request that agencies include a plan for how they will do this in their FY'15 allocations proposal.</p> <p><b>FY'16:</b> Full implementation of a recovery oriented assessment w/SBIRT &amp; peer support and related initial recovery measures.</p> <p><b>FY'17:</b> Sustained use of recovery oriented assessment w/SBIRT &amp; peer support and related recovery measures.</p>	Clinical Assessment documents indicate involvement of peers	r	y	g		Issue discussed at the Agency Directors meeting. This item will be addressed in the FY'16 Standards Manual and/or contract language.
<b>Priority 2: Outreach/Engagement/Recovery Check-ups</b>						
<p><b>FY'14:</b> Review science and best practice for outreach/engagement, recovery check-ups; provide education.</p> <p><b>FY'15:</b> Request that agencies include a plan for how they will do this in their FY'15 allocations proposal.</p> <p><b>FY'16:</b> Full implementation of recovery check-ups with outcomes.</p> <p><b>FY'17:</b> Sustained use of recovery check-ups with outcomes.</p>	Number of individuals who remain in treatment; number of individuals receiving recovery check ups	r	y	g		Issue discussed at the Agency Directors meeting. This item will be addressed in the FY'16 Standards Manual and/or contract language.
<b>Priority 3: Residential Treatment Facility</b>						

<p><b>FY'14:</b> Funds secured for building. Write grant for up front expenditures.</p> <p><b>FY'15:</b> Century completes renovation and develops programming with peer support. Services delivered as of 1/1/15.</p> <p><b>FY'16:</b> Services continue to be delivered; project analysis for impact, effectiveness and potential expansion.</p> <p><b>FY'17:</b> Services continue to be delivered with analysis of impact/effectiveness.</p>	<p>Completion of facility; Numbers served in FY'15</p>	g	g	g		<p>Open house was held on January 12, 2015. Per diem rate finalized (\$35.00 per day). Facility full. Review of the service included in Dr. Flaherty's contract.</p>
<p><b>Priority 4: Medication Assisted Treatment</b></p>						
<p><b>FY'14:</b> Treatment Philosophy agreed to, written and adopted by treatment agencies in the community; best science/practice. Inventory existing need and capacity for MAT.</p> <p><b>FY'15:</b> Treatment Philosophy implemented across treatment providers with criminal justice coordination &amp; continual medical guidance &amp; input. Contract with additional providers to ensure access based on RM Philosophy or other EBP.</p> <p><b>FY'16:</b> Monitor access/outcomes to determine if/where additional funds need to be invested.</p> <p><b>FY'17:</b> Monitor access/outcomes to determine if/where additional funds need to be invested.</p>	<p>Ratification of Treatment Protocol Number of individuals receiving medication assisted treatment</p>	r	r	r		<p>Protocol was ratified but there is no broad based availability of Narcan. There is a national supply shortage. The University of Findlay has been very active in working with the Kroger Corporation to increase access. The Health Department and the University are both willing to assist with the required education component for filling the prescription.</p> <p>We are working with Century Health to develop a protocol related to financial assistance from the Board for the use of Vivitrol. This is a key component for the Drug Court.</p>
<p><b>Priority 5: Urgent Care Facility (Crisis/Detox/After Hours/Weekend Services)</b></p>						
<p><b>FY'14:</b> Initial discussion with Blanchard Valley Hospital regarding partnering on the effort. Initial draft developed by Dr. Flaherty regarding budget and program design.</p> <p><b>FY'15:</b> Business Plan completed for implementation; linkage to all providers and needed care established either at site or by "warm hand-off" referral.</p>	<p>Number of detox beds available/utilized Number of crisis intervention beds available/utilized Scope of Project Defined Funding Secured</p>	r	r	r		<p>Meeting with Blanchard Valley Hospital occurred. They are willing to discuss the option of "scatter beds". Shared examples from across the country related to urgent care facilities. Have suggested that this might be something to consider as a pilot in the state budget. No response from the state department regarding the potential for detox services in Putnam County.</p>

<p><b>FY'16:</b> Implementation plan operationalized. Services begin before close of the fiscal year.  <b>FY'17:</b> Services maintained.</p>						
<b>Strategic Objective: Integrated Peer and Other Recovery Supports Mobilizing and Activating the Recovery Community</b>						
<b>Key Priorities:</b>	<b>Metric</b>	<b>Q1</b>	<b>Q2</b>	<b>Q3</b>	<b>Q4</b>	<b>Comments:</b>
<b>Priority 1: Transform Focus on Friends into a Peer-led Recovery Support Center</b>						
<p><b>FY'14:</b> Use of Focus on Friends addressed by Peer Support Steering Committee; identify needs of those served.  <b>FY'15:</b> Business Plan includes the use of Focus on Friends and additional services begin prior to the close of the fiscal year; establish goals and utilization measures.  <b>FY'16:</b> Continued expansion of the utilization of Focus on Friends as a Recovery Support Center; measure goals, needs and utilization.  <b>FY'17:</b> Continued expansion of the utilization of Focus on Friends as a Recovery Support Center; measure goals, needs and utilization.</p>	<p>Number of hours facility open  Number of individuals utilizing facility</p>	r	y	y		<p>The Board continues to provide Administrative Support Services to transition Focus on Friends to a recovery support center. Focus on Friends hired a full time director, Wayne Ford, who started on 4/20/15.</p> <p>Applications have started to arrive for the recovery home houseparents .</p> <p>Training of the recovery guides held April 25<sup>th</sup>. The Peer ROSC and the Housing ROSC Committees are meeting regularly and providing input and direction to staff.</p>
<b>Priority 2: Additional Single Bedroom Housing Units</b>						
<p><b>FY'14:</b> Develop Housing and Recovery Model &amp; guidelines from EBP.  <b>FY'15:</b> Board Housing Plan completed. A minimum of one grant submitted.  <b>FY'16:</b> Grant awarded to develop a minimum of 5 single units.  <b>FY'17:</b> A minimum of 5 single units completed.</p>	<p>Completion of Board Housing Plan  Number of housing units added</p>	g	g	g		<p>Clara completed course and passed her exam to become a certified property manager. Clara was also trained to be a surveyor of recovery residences. Housing study completed by the Regional Planning Commission.</p>
<b>Priority 3: Recovery Homes</b>						
<p><b>FY'14:</b> Community meeting on recovery housing &amp; focus group held in March. Steering Committee to be established; Develop Housing and Recovery Model &amp; guidelines from EBP before close of fiscal year.  <b>FY'15:</b> Steering Committee develops Business Plan for</p>	<p>Recovery Homes Open  Number of Clients Served</p>	g	r	r		<p>As per the direction of the Board at their February Board meeting, the Greendale home was sold to the LLC. The closing occurred on April 15<sup>th</sup>. The Program Agreement, resident handbook, and medication and toxicology testing policies have been completed. Focus on Friends working</p>

<p>the implementation of a Recovery Home and initiates implementation; Include Housing and Recovery Model Development.</p> <p><b>FY'16:</b> Implementation completed and Recovery Home opened based on Model.</p> <p><b>FY'17:</b> Recovery Home maintained and refined based on need/impact/goal attainment.</p>		g	r	r		<p>to have corresponding policies.</p> <p>Representative Sprague has introduced language requiring a public meeting and a resolution from the county commissioners before purchasing a property to be used for recovery housing.</p> <p>The state department is willing to consider requests to extend the timeframe for the expenditure of grant funds. A request has been submitted to the Mayor to present to City Council.</p>
<b>Priority 4: Employment Services</b>						
<p><b>FY'14:</b> OOD Employment Grant maintained. Employment Specialist on site 3 days per week at Focus on Friends. Employment Navigator hired by Job and Family Services.</p> <p><b>FY'15:</b> Employment Navigator sustained. Employment Network established.</p> <p><b>FY'16:</b> Business Plan to expand employment opportunities developed and a provider is secured.</p> <p><b>FY'17:</b> Expanded employment opportunities available; measure and report impact.</p>	<p>Employment Consortium Established; Number of Clients successfully employed</p>	g	r	y		<p>A request will be made to continue these funds. A follow up meeting will be scheduled with Putnam County Board following the second meeting of the Employment Consortium.</p>
<p><b>FY'14:</b> Peer Summit held in March 2014. Steering Committee Established.</p> <p><b>FY'15:</b> Business Plan developed and a provider secured before close of fiscal year.</p> <p><b>FY'16:</b> Continued growth in the recruitment and training of recovery coaches and peer support specialists; linkage or inclusion in all critical points of care.</p> <p><b>FY'17:</b> Continued growth in the recruitment and training of recovery coaches and peer support specialists; linkage or inclusion in all critical points of care.</p>	<p>Training/Screening Program Established for Recovery Guides</p> <p>Number of Guides Recruited, Trained and Matched</p> <p>Number of Employed Peer Support Specialist</p>	g	g	g		<p>The first Recovery Guide training was held on April 25<sup>th</sup>.</p>

Strategic Objective: Performance Improvement and Evaluation						
Key Priorities:	Metric	Q1	Q2	Q3	Q4	Comments:
<b>Priority 1: Ongoing Consumer Feedback</b>						
<p><b>FY'14:</b> One focus group held with recovery community.</p> <p><b>FY'15:</b> Plan put in place to conduct focus groups on a regular basis. Said plan implemented by second half of fiscal year; review progress, issues, set goals.</p> <p><b>FY'16:</b> Focus groups conducted on a regular basis with feedback taken to ROSC Leadership Group for review, issue discussion and oversight.</p> <p><b>FY'17:</b> Focus groups conducted on a regular basis with feedback taken to ROSC Leadership Group for review, issue discussion and oversight.</p>	Clients actively provide feedback directly to the Board	y	Y	g		No focus groups in place. Participated in the United Way Strategic Planning Process. Substance abuse a clear priority. United Way contributed funds toward the purchase of a van for Tree Line. A grant was awarded by the Foundation to update the Health Assessment in the fall of 2015. The goal is to have community conversations as a part of the entire needs assessment process; not just for the United Way.
<b>Priority 2: Community Metrics Committee</b>						
<p><b>FY'15:</b> Committee Established.</p> <p><b>FY'16:</b> Committee used to evaluate Health Assessment.</p> <p><b>FY'17:</b> Public data plotted geographically.</p>	Data collected demonstrates composite picture of Hancock County and displayed geographically when possible	y	y	y		Database updated. Committee will convene once the Health Assessment is completed to review results as well as the summary of the United Way Community Conversations and information from the database.
<b>Priority 3: New Auditing Process</b>						
<p><b>FY'15:</b> New program auditing process developed.</p> <p><b>FY'16:</b> New program auditing process implemented.</p> <p><b>FY'17:</b> New program auditing process maintained.</p>	Revisions to the Standards Manual	y	y	y		Anticipate a draft will be in place for allocation discussions in the spring of 2015.
<b>Priority 4: Community Measures for ROSC: Increased Access to Care; Retention in Care; Outcomes</b>						
<p><b>FY'14:</b> Discussions held with ROSC Leadership group related to measures. Draft developed for review of initial measures.</p> <p><b>FY'15:</b> Measures adopted and incorporated into business plans/contracts for each and for all services.</p> <p><b>FY'16:</b> Measures, tracked, and reported.</p> <p><b>FY'17:</b> Measures tracked and reported; cost analysis of effort/savings, etc.</p>	Measures Collected	g	g	g		Measures adopted. Data collection initiated Oct. 1, 2014. New graph in board room displaying the number of deaths related to overdose and/or suicide as well as the number of births where the infant was exposed and/or has neonatal abstinence syndrome. Working with Representative Sprague to get language adopted for real time reporting of suspected deaths related to suicide and/or overdose. Follow up meeting with local physicians scheduled to review cases where a death from overdose and/or suicide has occurred.

Strategic Objective: Performance Improvement and Evaluation						
Key Priorities:	Metric	Q1	Q2	Q3	Q4	Comments:
<b>Priority 1: SBIRT (Screening, Brief Intervention an Referral to Treatment)</b>						
<b>FY'14:</b> CME held and information distributed. <b>FY'15:</b> Community trainings held on SBIRT and implementation strategies designed. <b>FY'16:</b> Implementation of SBIRT expanded (especially in physician practices, health & MH clinics, trauma, and crisis center, ER and general medical care). <b>FY'17:</b> Broad use of SBIRT throughout the community; evaluation of impact.	Number of Trainings Held/Number of Participants Number of Screens Completed	g	g	g		An advanced SBIRT training was held on March 27 <sup>th</sup> with 30 participants. Next step is to focus training with the faith based community.
<b>Priority 2: Mental Health First Aid</b>						
<b>FY'14:</b> Two trainers certified and trainings initiated in Feb. One additional trainer to be trained in May. <b>FY'15:</b> A minimum of three trainings held in the community per year. <b>FY'16:</b> A minimum of three trainings held in the community per year. <b>FY'17:</b> A minimum of three trainings held in the community per year.	Number of Participants; Results of Evaluations	g	g	g		157 trained to date. Would like to do more outreach to employers/human resource directors to encourage participation in the course. Three trainers attending training in Columbus on the Youth Curriculum.
<b>Priority 3: Craft the Message</b>						
<b>FY'14:</b> Communication tools drafted and sub-committee established. <b>FY'15:</b> Communication plan designed. Communication tools available; Speakers Bureau and resource drop box established. <b>FY'16:</b> Communication Plan Implemented. <b>FY'17:</b> Communication Plan Implemented.	Completion of public relations materials Amount of materials distributed	y	r	r		Short term communications plan completed. Barb Lockard has agreed to Chair a Communications Committee for the Board. National conversations occurring to see if there is momentum for the development of a national tool kit. Meeting held with Director Plouck requesting the state department assist with the education of public officials. She agreed to make this a priority for staff at the department. Recovery is Beautiful materials are available for use from the Board Association.
<b>Priority 4: Coalition of Excellence Designation/Mentoring</b>						
<b>FY'15:</b> Review requirements and secure funding for	Excellence Designation Achieved; Successful	g	g	g		Application for a Coalition of Excellence has been

completion. FY'16: Sustain designation. FY'17: Sustain designation.	development of a Coalition in Marion County					submitted. There has been no response to date from the department. Outreach to Marion County coalition continues to be provided.
<b>Strategic Objective: Individualized Services Appropriate to Trauma, Culture, Gender, etc. (Interventions)</b>						
<b>Key Priorities:</b>	<b>Metric</b>	<b>Q1</b>	<b>Q2</b>	<b>Q3</b>	<b>Q4</b>	<b>Comments:</b>
<b>Priority 1: Trauma Informed Care Learning Community</b>						
FY'14: Trauma Learning Community Grant Approved. FY'15: Formal contract with the National Council completed and Learning Community Initiated. FY'16: Learning Community Grant Completed. FY'17: Efforts sustained.	Number of plans completed; progress in implementing local agency work-plans based on domain area	g	g	g		February site visit from the National Council Completed. Participating organizations in process of submitting requests for implementation funds from the grant awarded to the Board from the state department. Next newsletter dedicated to the trauma initiative.
<b>Priority 2: Mental Health-Substance Abuse Criminal Risk Framework Grant</b>						
FY'14: Assessment completed and Staff hired. FY'15: Policy/system changes implemented related to assessment and RM services provided. FY'16: Full implementation of the Framework/Modification and Evaluation of Effectiveness. FY'17: Implementation sustained/modified (based on evaluation, cost & outcomes).	Individuals Screened and assessed by level of risk Pre-treatment and skills streaming groups offered Corrections Officers Trained Reduction in recidivism	g	g	g		Body scanner on location but not installed due to renovations that need to be made at the jail. Interviewed for a SAMHSA publication on the implementation of the framework.
<b>Priority 3: Development of a Recovery Passport (Emphasis on 90 Days Continuous Care)</b>						
FY'15: Passport created. FY'16: Broad distribution and utilization of the passport. FY'17: Broad distribution of passport and monitoring of utilization.	Number of Clients with 90 days continuous care	y	y	y		This will be included in the communications strategy.
<b>Priority 4: Implementation of HB43 (Involuntary Outpatient Commitment)</b>						
FY'15: Law Implemented. FY'16: Monitor Utilization of the law/make changes in local protocol as needed. FY'17: Monitor Utilization of the law/make changes in local protocol as needed.	Number of Clients on Outpatient Commitment	g	g	g		Local meeting held with key stakeholders for implementation. No clients on outpatient commitment to date.
<b>Priority 5: Pilot Use of Electronic Interventions</b>						
FY'15: Host regional training on the use of electronic	Number attending training. Results of pre/post -test	y	g	r		Unable to secure a key note for training on "applied

<p>interventions as an adjunct to treatment.</p> <p><b>FY'16:</b> Provide funds to agencies to use electronic interventions.</p> <p><b>FY'17:</b> Monitor use and impact on clinical outcomes.</p>	<p>regarding knowledge of what is available</p> <p>Number of treatment plans that include the use of technical support</p>					<p>technology” for treatment and prevention services. The June training will be on trauma and substance abuse. (June 18, 2015.)</p>
<b>Priority 6: Fiscal, Policy and Regulatory Alignment</b>						
<b>Key Priorities:</b>	<b>Metric</b>	<b>Q1</b>	<b>Q2</b>	<b>Q3</b>	<b>Q4</b>	<b>Comments:</b>
<b>Priority 1: Shared Funding and/or Agreements; Incorporate Performance Measures into Funding Agreements</b>						
<p><b>FY'15:</b> New contracting methods explored; provider work- force development plan sought. Grant policy including performance measures developed; design evaluation plan with independent partner (e.g. University).</p> <p><b>FY'16:</b> New contracting methods piloted, provider workforce development plan enacted. Performance measures modified and collected based on outcome measures selected by ROSC Leadership Group/Board and Evaluator.</p> <p><b>FY'17:</b> Successful new contracting methods implemented, provider-workforce development plan enacted. Existing performance measures sustained. Performance measures linked to all service funding agreements, gathered by evaluator and monitored by ROSC Leadership Group and Board.</p>	<p>Contracts have mechanism for shared funding</p> <p>Performance Measures added to contracts</p> <p>Performance in relationship to established measures</p>	y	y	y		<p>Continued meetings with the University of Findlay regarding assistance with provider work force development. They are willing to put together a substance abuse certificate program as well as a substance abuse minor. They are also willing to assist with promoting peer training and providing a training location.</p> <p>Need to identify a University interested in evaluating the implementation of ROSC.</p> <p>Board auditing process to be reviewed in the spring. Existing measures to be reviewed.</p>
<b>Priority 2: RFP (Request for Proposal) Policy</b>						
<p><b>FY'15:</b> Policy drafted incorporating ROSC principles.</p> <p><b>FY'16:</b> RFP's used on an as needed basis.</p> <p><b>FY'17:</b> RFP's used on an as needed basis.</p>	<p>Policy Adopted</p> <p>Number of RFP's Completed</p>	g	g	g		<p>Policy approved by the Board.</p>
<b>Priority 3: Advocate for Funds with Legislature</b>						
<p><b>FY'15:</b> Provide input to state legislature regarding the need to develop an allocation formula that is fair and equitable. Advocate during the state biennial budget.</p> <p><b>FY'16:</b> Implement formula used by state for funds to local Boards.</p>	<p>Allocation methodology adopted by the state</p>	g	r	r		<p>Budget submitted by the State Director did not include the 50 million dollars that that was in each year of the previous biennium. The budget is out of the House without the 100 million. The budget is now in the Senate. A meeting has been scheduled with Senator Cliff Hite on Monday, May 11</p>

<b>FY'17:</b> Continue to advocate for funds. Run local levy campaign.		g	r	r		at 9:00 a.m.
<b>Priority 4: Promote Community Mental Health Fund</b>						
<b>FY'15:</b> Make general public aware of the fund. Fund established in October of 2013. Fund must reach \$10,000 by October of 2015 to become a permanent Fund. <b>FY'16:</b> Secure permanent fund. Continue to focus on growth of the Fund with the Fund Development Committee. <b>FY'17:</b> Continue to focus on growth of the Fund.	Permanent Level of Funding Achieved (\$10,000) Number of donors providing support	g	g	g		Fund has received 100% of what is needed to become permanent fund of the Foundation (\$10,000). Focus now on growing the fund.
<b>Priority 5: Monitor use of High Acute Services (Inpatient; Residential; Detox; etc.)</b>						
<b>FY'15:</b> Update Service Coordination Mechanism in collaboration with the Family First Council to address high risk youth. Maintain and improve tracking for use of inpatient; residential and detox services for adults. <b>FY'16:</b> Implement changes to Service Coordination Mechanism and ENGAGE Grant to address intensive needs of youth. Monitor use of detox and residential treatment services. <b>FY'17:</b> Monitor use of high end services and implement improvements as identified.	Number of youth and adults utilizing high-end or inpatient care Cost of services Tracking of warm hand-offs to lower levels of care	g	g	g		Consultation provided by Neil Brown to the Family First Council on the Service Mechanism. Ongoing meetings with the state in collaboration with our local Development Disabilities Board and the Agency on Aging to look at multigenerational/service enhanced solutions to high end needs.

CME: Continuing Medical Education      SBIRT: Screening, Brief Intervention and Referral to Treatment      ROSC: Recovery Oriented System of Care      MBR: Mid-biennial Review

Yellow: progress is being made

Green: progress is according to timeline and/or task is completed

Red: There are critical issues that need to be brought to the attention of the Board for discussion

