

MHR SB GOVERNANCE COMMITTEE MEETING

November 1, 2016

4:00 p.m.

Agenda

Item	Information Enclosed	Action Required	Allocation Required	Page
1. Call to Order				
2. Recognition of Visitors				
3. Meeting Minutes: Combined Governance/Planning & Finance Committee: October 11, 2016	✓	✓		1-7
4. MHR SB Policy Updates:				8-9
➤ Board, Committee and Sub-Committee Meeting	✓	✓		10-11
➤ Designation of Health Officers	✓	✓		123-16
5. MHR SB Organizational Chart Update				17-20
➤ Client Rights Officer – Part-Time Position	✓	✓		
6. Open Session				
7. Adjournment				

**COMBINED PLANNING & FINANCE/GOVERNANCE
COMMITTEE MEETING MINUTES
October 11, 2016**

Governance Committee Members Present:

Dr. Tim Valko	Neema Bell, Chair	Linda Alvarado-Arce
Tony Pfeiffer	Lynn Olman	

Governance Committee Members Not Present:

Linda Howe	Pastor Perryman	Andre Tiggs
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Planning & Finance Committee Members Present:

Linda Alvarado-Arce, Chair	Dr. Tim Valko	Dr. Mary Gombash
Lynn Olman	William Sanford	

Planning & Finance Committee Members Not Present:

Pastor Waverly Earley	Chief George Kral	James Stengle
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Staff: Scott Sylak, Carolyn Gallatin, Tim Goyer, Donna Robinson, Karen Olnhausen, Amy Priest, Cami Roth Szirotnyak, Cynthia Brown-Chery, Delores Williams.

Visitors: Richard Arnold; George Johnson, Rescue; Paul Lewis, Recovery Council; Larry Leyland, TASC; Janet Liuten, New Concepts; Adam Nutt, Zepf; Megan Mosiniak, City of Toledo BCR; Jeff DeLay, Unison; Annette Clark, FSNO; Chris Warner, Arrowhead; Michele Bryant, NAOMI, Inc.

Ms. Alvarado-Arce opened the meeting at 4:03 p.m., followed by an introduction of visitors.

Meeting Minutes:

- **P&F Committee – September 13, 2016**

Dr. Gombash made a motion to approve the minutes as presented and it was seconded by Mr. Olman. Following discussion, the minutes were approved by a voice vote.

- **Governance Committee – August 2, 2016**

Dr. Valko made a motion to approve the minutes as presented and it was seconded by Mr. Pfeiffer. Following discussion, the minutes were approved by a voice vote.

Treasurer's Report

- **September 2016 Financial Statements**

The MHR SB received the anticipated local levy revenue of \$7,653,486, and Ms. Gallatin reported through September 2016, the Board is under budget by approximately 20%.

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However, Ms. Gallatin indicated this under budget percentage will reduce significantly as the Board progresses through the fiscal year. The Consolidated Balance Sheet balance is reflective of the levy funds received as well as the reduction in accounts receivables and payables as the fiscal year financials finalized.

Ms. Gallatin reviewed the September 2016 expenditure transactions contained on pages 14-16 of the meeting packet, and asked the Committee if there were any questions or concerns before presenting the following motion for recommendation to the Board of Trustees:

The Mental Health & Recovery Services Board of Lucas County approves the September 2016 financial statements and the September 2016 voucher schedules of bills as presented in the October 18, 2016 Board meeting packet.

Dr. Valko made a motion and it was seconded by Mr. Sanford. Following discussion, the motion was approved by a voice vote.

Toledo Lucas County Health Department Syringe Access Program

Mr. Goyer referred to page 17 of the meeting packet to review the request made by the Toledo Lucas County Health Department (TLCHD) to allocate FY 2017 funds in the amount of \$19,987.26 to support implementation of a Syringe Access Program due to health concerns and prevention of Hepatitis C and HIV among the heroin intravenous drug use populations.

The TLCHD requested a partnership with the MHRSB and UTMC who is funding the staff to operate the program. Mr. Goyer said that some additional benefits in distributing kits that contain items that prevent the spread of the identified infectious diseases include the opportunity to provide education, linkage to treatment, and distribution of Naloxone to individuals who are injecting heroin. In addition, the Syringe Access Program aligns with the Board's Strategic and Community Plans as it increases collaboration, reduces the potential loss of life, and improves opportunities to deliver substance abuse treatment services to a vulnerable population. Mr. Sylak indicated that he anticipates this being a long-term relationship if it is effectively implemented. He reported that the Lucas County Prosecutor has indicated that there is liability protection to the MHRSB in ORC for these types of programs.

The following motion was recommended to the Board of Trustees:

The Mental Health and Recovery Services Board of Lucas County allocates \$19,987.26 for FY 2017 to the Toledo Lucas County Health Department for necessary items requested by the Health Department for the implementation of a Syringe Access Program; MHRSB's Executive Director is authorized to execute the appropriate agreements between MHRSB and TLCHD.

Dr. Valko made a motion and it was seconded by Mr. Olman. Following discussion, the motion was approved by a voice vote.

OMHAS Re-Entry Coalition of Northwest Ohio Allocation

Mr. Goyer reported that OMHAS directed the MHR SB to pass-thru one-time FY 2017 funding for the Re-Entry Coalition of Northwest Ohio in the amount of \$50,000 to be used for recovery support services that eliminate barriers to behavioral health treatment and that are specific to an individual's needs. This agenda item was discussed previously at the September 2016 P&F Committee and Board meetings; however, Mr. Sylak identified at the September Board meeting that his spouse was on the Re-Entry Coalition Board of Trustees, so no action was taken until an opinion could be obtained from the Lucas County Prosecutor's office who then confirmed there was no conflict since the grant was made by the State and not the County Board.

The following motion was recommended to the Board of Trustees:

The Mental Health and Recovery Services Board of Lucas County allocates \$50,000 to the Re-Entry Coalition of Northwest Ohio for recovery support using OMHAS FY2017 Re-Entry Coalition funds, and authorizes its Executive Director to execute a FY 2017 Memorandum of Agreement to reflect this allocation.

Mr. Olman made a motion and it was seconded by Ms. Bell. Following discussion, the motion was approved by a voice vote.

Unison Request for Additional Funds – FY2016 POS Overspending

Ms. Gallatin referenced a previous discussion at the August 9, 2016 Planning & Finance Committee meeting regarding the possibility that one or more agencies may exceed their FY 2016 POS allocations after aggregating the POS MH and AOD treatment allocations for Harbor, Unison, and Zepf. Subsequently, the MHR SB received a written request from Unison for an allocation of \$60,000, for payment of approximately \$57,000 of FY 2016 uncompensated claims and approximately \$3,000 in outstanding claims, due to exceeding their allocation. Upon Board staff's review of Unison's FY 2016 claims, and the determination that they served 350 more individuals than in FY 2015 and incurred \$25,000 in additional claims related to their CET program, Staff recommended payment to Unison for these outstanding claims under a FY 2017 allocation as a new line item since FY 2016 claims were already closed out.

The following motion was recommended to the Board of Trustees:

The Mental Health and Recovery Services Board of Lucas County allocates \$60,000 to Unison for the period of July 1, 2016 through June 30, 2017 for MH and AOD treatment services provided during FY2016 that exceeded Unison's purchase of service allocation for FY2016, and authorizes its Executive Director to amend Unison's FY 2017 Provider Agreement to reflect the increased allocation.

Mr. Sanford made a motion and it was seconded by Mr. Olman. Following discussion, the motion was approved by a voice vote.

DYS Re-Entry Services – TASC Allocation

Ms. Olnhausen explained the history behind the MHR SB being a recipient of funds from OMHAS that have been allocated to TASC over the past 15 years (ranging from \$100,000 – \$200,000 per year) to provide services for a large number of young people returning to the community from Ohio's Department of Youth Services (DYS) facilities who have behavioral health needs in varying degrees of severity. However, the population served over time has reduced to a small number of youth with serious felony charges due to a collaborative effort to provide diversionary alternatives and intensive services to preclude sentencing youth with less serious charges to DHS institutions.

Over the past year, the Board has met with DHS and TASC in an attempt to revise the program in an effort to improve program performance. In March 2016, the Board issued a 120-Day Notice to TASC not to renew their FY 2017 contract with the goal of creating alternate programming. In June 2016, the Board approved extending TASC's contract until November 1, 2016 and then issued a RFP for DHS Re-Entry Services. Three agencies responded with one of them being TASC; staff scored all three proposals and none of them indicated any new or innovative approaches in engaging this population which resulted in staff not recommending new funding for any of the three proposals.

To ensure services continued to the DHS population, staff requested a FY 2017 contract of \$194,486 be provided to TASC for the period of November 1, 2016 through June 30, 2017 to provide case management and reentry related services. Dr. Valko asked why the MHR SB continues to fund an agency for a program that isn't meeting the needs of the population it is serving. Mr. Sylak stated that staff also struggled with the same issue, but felt it's in the youth's best interest to allow TASC to continue providing some services, while the MHR SB takes a leadership role in developing a new program. He noted that every system is struggling with how to best serve the needs of these youth and young adults, and he envisions a partnership with DHS, Juvenile Court and others as the MHR SB works to develop a project that will have a positive impact on this difficult to engage group of youth and young adults.

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The following motion was recommended to the Board of Trustees:

The Mental Health and Recovery Services Board of Lucas County allocates \$122,265 in grant funding to TASC for the continuation of existing re-entry services for DYS clients for the period November 1, 2016 through June 30, 2016, and for the same period allocates \$72,221 to TASC which can be drawn down for reimbursement of intensive services for offenders which TASC provides or purchases; MHRSB's Executive Director is authorized to execute the appropriate FY 2017 contract amendments.

Mr. Olman made a motion and it was seconded by Dr. Valko. Following discussion, the motion was approved by a voice vote with a change in the motion that the FY 2017 contract to TASC is for the period of November 1, 2016 through June 30, 2017.

Inclusion Council Update and New Policy

Ms. Williams provided an update from the last Inclusion Council meeting, indicating that a subgroup of the Council met on September 29, 2016 to continue work on the organizational self-assessment tool and its administration at provider agencies, with a timeframe of the first quarter of CY 2017. The Council also made a recommendation that Agency and MHRSB Board members and staff complete the self-assessment through on-line survey monkey.

Ms. Williams reviewed the draft Diversity and Inclusion Policy included in the meeting packet and received several recommended revisions from the Committee of which will be incorporated into the final draft for the Trustees approval at the October 18, 2016 Board meeting.

The following motion was recommended to the Board of Trustees:

The Mental Health & Recovery Services Board of Lucas County approves the Diversity and Inclusion Policy contained in the Board packet effective November 1, 2016.

Mr. Pfeiffer made a motion and it was seconded by Dr. Valko. Following discussion, the following revised motion was approved by a voice vote with a notation that this agenda item will be pulled off of the Consent agenda for further discussion by the Board of Trustees, as well as the recommendation that Diversity and Inclusion language be referenced consistently throughout the Diversity and Inclusion Policy:

The Mental Health & Recovery Services Board of Lucas County approves the Diversity and Inclusion Policy contained in the Board packet effective November 1, 2016.

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Open Session

- Mr. Arnold stated that tomorrow, the Volunteers of America will go before the Zoning & Planning Commission requesting a special use permit to add beds to its current facility so that it may increase services to female offenders. He also stated that the Ohio Link halfway house has had two large trailers on their property on Madison Avenue and are in violation of not having a special use permit; the Wernert Center will be requesting at the Planning & Zoning Commission meeting on Thursday, a special use permit and zoning change; at the November Planning & Zoning Commission; the 1826 Adams Street ARM location will be asking for special use permit; and 113 Main Street will be asking for a special use permit. He referenced that group living facilities zoning requirements are under review by the City Legal Department, with an upcoming public hearing in December.
- Mr. Olman informed the P&F/Governance Committee members that a committee of MHR SB Trustees was formed, comprised of Mr. Sanford, Mr. Tiggs, Mr. Olman and Ms. Howe (Chair), to discuss the renewal contract of the MHR SB Executive Director. The committee hired Aly Sterling Philanthropy to conduct an internal/external 360 evaluation of the Board's Executive Director with results due back to the committee in November 2016. The committee will present a recommendation to the Governance Committee for their consideration in re-setting Mr. Sylak's employment contract as his current contract expires on December 31, 2016. It was noted that this topic will not be discussed in today's Executive Session.

Mr. Sylak recommended that the combined P&F/Governance Committees enter into Executive Session for the purpose of discussing personnel related matters in follow-up to the September 20, 2016 Board meeting of which he expressed the need for the MHR SB to comply with the newly revised Fair Labor Standards Act (FLSA) requirements by December 1, 2016 that will have an impact on a number of MHR SB employees. Staff compiled a compliance plan after seeking legal guidance from Christina Shynak Diaz, Esq. that will be presented for discussion in Executive Session.

The following motion was recommended for the Committee's consideration:

Move that the Planning & Finance/Governance Committees adjourn into Executive Session for the purpose of discussing personnel matters related to compliance with the Fair Labor Standards Act and revisions to the existing MHR SB Table of Organization, including changes to existing positions and compensation levels where appropriate.

Ms. Bell made a motion and it was seconded by Mr. Olman to enter into Executive Session to discuss personnel related matters. Following discussion, the motion was approved by a roll-call vote. Voting to approve the motion was: Ms. Bell-yes; Mr. Pfeiffer-yes; Dr. Gombash-yes; Mr. Olman-yes; Mr. Sanford-yes; Dr. Valko-yes.

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Mr. Olman made a motion and it was seconded by Dr. Valko for the combined P&F/Governance Committees to return from Executive Session. The motion was approved by a voice vote.

Adjournment

The meeting was adjourned at 5:25 p.m.

The following motion was recommended to the combined Planning & Finance/Governance Committees:

The combined Planning & Finance/Governance Committees approve minutes from the October 11, 2016 meeting.

GOVERNANCE COMMITTEE MEETING

November 1, 2016

MHR SB Policy Updates

There are two policy revisions that Board Staff are presenting to the Governance Committee for consideration; the Board, Committee and Sub-Committee Meetings Policy and the Designation of Health Officer Policy.

➤ **Board, Committee and Sub-Committee Meetings**

Board staff is recommending the addition of language within the existing policy that clarifies that multiple committees of the MHR SB may meet jointly, and when those joint meetings occur, how a quorum will be defined. A copy of the recommended revised policy is attached.

The following motion is recommended to the Board of Trustees:

The Mental Health & Recovery Services Board of Lucas County revises its Board, Committee and Sub-Committee Meetings Policy as presented in the November 15, 2016 Board packet, effective December 1, 2016.

➤ **Designation of Health Officers**

Several issues surrounding the credentialing of System Health Officers have precipitated the review of MHR SB's existing "Designation of Health Officers" Policy. Non-contract agencies have requested that they have Health Officers designated from their staff, and at least one agency said that the current Health Officer Credentialing Committee is not broad enough in its membership. Ohio Public Meeting Act compliance concerns have also been identified by MHR SB staff.

Consequently, Board staff has reviewed the Designation of Health Officers Policy and propose an amended version (attached). If approved, the policy provides that agencies which currently do not have contracts with the MHR SB can have Board designated Health Officers if their agency administration accepts responsibility for necessary training and supervision of staff, and indemnifies the MHR SB. Approval of this policy would also require the MHR SB Board of Trustees to rescind the current appointments to the Health Officer Credentialing Committee as well as abolish the Committee. The revised policy will also streamline the Health Officer credentialing process, and it affords the Board's Executive Director the prerogative to convene an advisory group to consider issues related to Health Officer functioning.

The Lucas County Prosecutor is currently reviewing the indemnification language contained in the policy and may recommend changes.

GOVERNANCE COMMITTEE MEETING

November 1, 2016

The following motion is recommended to the Board of Trustees:

The Mental Health & Recovery Services Board of Lucas County revises its Designation of Health Officers Policy as presented in the November 2016 Board packet, rescinds all current Health Officer Credentialing Committee appointments and abolishes the Health Officer Credentialing Committee, effective December 1, 2016.

MENTAL HEALTH & RECOVERY SERVICES BOARD OF LUCAS COUNTY

Board, Committee and Sub-Committee Meetings

COQ: VI-A.1

Effective: 12-1-16

Supersedes: 5-1-16

POLICY

The Mental Health and Recovery Services Board ([MHR SB](#)) of Lucas County will follow a clearly defined procedure for conducting its public meetings in accordance with ORC 121.22. All meetings of the MHR SB, MHR SB established committees and their sub-committees are public meetings.

Board, Committee and Sub-Committee Meetings:

A. Meetings and Quorum:

The Board shall meet at least six times a year, while Committees and Sub-Committees will meet as defined within their approved charter. A quorum for Board, Committee and Sub-Committee meetings is defined as over one-half of the voting membership in attendance as appointed and/or duly sworn into office. MHR SB established committees are permitted to meet jointly. Committees meeting jointly will be considered a unified committee for the purpose of conducting business. A quorum for a unified committee meeting will be defined as over one-half of the unified committees' voting membership in attendance.

B. Order of Business and Record of Proceeding:

Meetings shall proceed according to an agenda prepared by the Chairs of the Board, Committee or Sub-Committee in cooperation with the Executive Director or the Executive Director's designee. Such agendas, together with the supporting data, shall be made available via electronic media to all Board, Committee and Sub-Committee members and anyone who requests notice prior to the meeting. At the discretion of the Executive Director, agendas and supporting data may be sent via regular mail to requesting parties. Board meeting minutes will be kept by the Secretary or their designee. Committee and Sub-Committee meeting minutes will be kept by a Board staff member designated by the Executive Director.

C. Meeting Protocol:

Member discussion on a Board motion will begin only after the Board motion has been seconded by another Board member. Before a Board member can speak on a motion, he/she must be recognized by the Chair. The floor does not pass from person-to-person, but must go through the Chair. Each speaker must be recognized by the Chair. All discussions of a motion must be directed to the Chair. The Chair may impose a time limit of three minutes for each member speaking to a motion. Once discussion has taken place

**MENTAL HEALTH & RECOVERY
SERVICES BOARD OF LUCAS COUNTY**

Board, Committee and Sub-Committee Meetings	COQ: VI-A.1 Effective: 12-1-16 Supersedes: 5-1-16
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on the proposed Board motion, a polling of all Board members will commence unless the Board member who placed the motion on the floor withdraws the motion and the seconding Board member agrees on the withdrawal. Members must be present to cast a vote on a Board motion. Committee and Sub-Committee decision making will be made in the same manner, except that all recommendations made by a sub-committee vote must be forwarded to its convening committee, and if approved by that committee, the motion will be forwarded to the MHR SB for consideration. Committee recommendations are not considered binding without final approval of the MHR SB.

D. Visitor Participation:

Each meeting will provide an open session for the purpose of soliciting comments from visitors. The Chair will address the visitors and request that any person wishing to address the body shall:

1. Identify himself or herself;
2. Identify the group for which he/she is the spokesperson;
3. Identify each issue if there is more than one issue on which he/she wishes to speak.

Each person who has identified himself/herself will be allowed to speak during the open session of the agenda for a maximum of three minutes per issue. A new issue brought up by a visitor may not be considered by the Board, Committee or Sub-Committee. At the discretion of the MHR SB or Committee Chairs, issues brought up by visitors, may be forwarded to the Executive Director for follow up. Sub-committee Chairs may forward information to their convening committee for consideration. The Chair reserves the right to recognize visitors during other parts of the Board Committee, or Sub-Committee proceedings if he/she believes the visitor's comments would be pertinent to the motion or business being considered.

ACCOUNTABILITY

MHR SB, Committee and Sub-Committee Chairs

Approved:

Scott A. Sylak, Executive Director

Date

MENTAL HEALTH & RECOVERY SERVICES BOARD OF LUCAS COUNTY

Designation of Health Officers

**COQ: V-A.26; X-A.3
Effective Date: 12/1/16
Supersedes Date: 3/1/14**

POLICY

The Mental Health and Recovery Services Board (MHRSB) of Lucas County will establish a process to credential and designate certain key agency staff to serve Lucas County as Health Officers, as defined in ORC 5122.01(J) to facilitate emergency hospitalization as described in ORC 5122.10. In order to serve as a Board appointed Health Officer, an appropriately credentialed person must be sponsored by a certified agency that accepts full responsibility for the officer's training, supervision, performance and reporting. MHRSB is not responsible or liable for any damage resulting from acts or omissions of the Agency's Health Officers; a formal agreement must indemnify the Board.

Accordingly:

- 1) MHRSB will establish minimum qualifications to serve as a health officer, and rules related to appointment, terms, and removal from office.
- 2) MHRSB will promulgate a description of the responsibilities of appointed Health Officers.
- 3) MHRSB's Director of Programs & Services (or designee) will facilitate a process to review both new and renewal applications for Health Officers to ensure that the applicants meet the minimum qualifications. The Director will make recommendations as appropriate for approval by the Board of Trustees.
- 4) MHRSB will annually review a report of Health Officer activity.

ACCOUNTABILITY

MHRSB Chair, Executive Director

**MENTAL HEALTH & RECOVERY
SERVICES BOARD OF LUCAS COUNTY**

Designation of Health Officers

**COQ: V-A.26; X-A.3
Effective Date: 12/1/16
Supersedes Date: 3/1/14**

PROCEDURE

Health Officer Qualifications and Requirements

- 1) An applicant for appointment by MHRSB as a Health Officer, must be sponsored by an OMHAS-certified agency whose chief executive officer has signed his/her assurance that the applicant represents the agency and that the agency assures that it has/will provide the training, supervision, and support outlined below. The agency sponsoring the application must provide MHRSB with a copy of their written policy that governs the activity and supervision of the Health Officer.
- 2) Health Officers must meet criteria established under the State of Ohio Mental Health and Addiction Services Qualified Provider Rules of the Administrative Code, Section 5122-29-10(B)(3) governing provider qualifications for crisis intervention mental health service.
- 3) Agency employees recommended for designation as a Health Officer shall:
 - a) Have two (2) years of experience in assessment of persons with severe mental illness, and possess appropriate professional licensure (LISW, LPCC, RN-MSN); or
 - b) Be a registered nurse with three (3) years of experience in assessment of individuals with severe mental illness; or
 - c) Be a licensed mental health professional (LSW/LPC) with three (3) years of experience in assessment of individuals with severe mental illness.
- 4) An agency applying to MHRSB to have an employee designated for the first time as a Health Officer shall submit:
 - a) The MHRSB Health Officer Application (Form A);
 - b) Copies of professional licenses, registrations and/or certificates;
 - c) At least two written references, which comment on the person's ability to assess individuals with serious mental illness. One of these letters must be external to the sponsoring agency;
 - d) A criminal record check from the Bureau of Criminal Investigation dated within six months of application;
 - e) Verification that the employee has completed training approved by the Board with curriculum which, at a minimum, shall address the following subjects:
 - o Training in Ohio Revised Code pertaining to involuntary mental health treatment which includes understanding of major mental illness and assessing for risk and vulnerability, and training regarding appropriate utilization of community resources;

MENTAL HEALTH & RECOVERY SERVICES BOARD OF LUCAS COUNTY

Designation of Health Officers

COQ: V-A.26; X-A.3
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- Training in first aid, CPR, and universal precautions for infection control;
 - Training in non-violent physical crisis intervention;
 - (Separate trainings are not required when the candidate's credentialing already indicates a proficiency).
- 5) MHR SB staff will review the application, and if it meets the criteria, will recommend the appointment to the Board of Trustees for approval. If approved, the sponsoring agency shall be notified in writing of the designation and term of each Health Officer. Although the MHR SB designates Health Officers for a specified two-year period, for an initial appointment, the term will be provisional for six months. During that time, the candidate for Health Officer will be supervised by a psychiatrist, licensed clinical psychologist, licensed physician, or an MHR SB designated Health Officer. The supervision should include the candidate both observing and being observed during the process of taking into custody a person that is believed to be mentally ill and subject to court order. After six months, the sponsoring agency's clinical director may petition in writing to have the applicant moved from a provisional status to active status.
- 6) At the expiration of a Health Officer's two-year term, a sponsoring agency may apply for renewal of the certification by:
- a) At least 60-days prior to the expiration of term, complete the MHR SB Health Officer renewal application (Form B) for review by MHR SB staff; and
 - b) Provide a summary of the applicant's performance as a Health Officer (a Health Officer requesting renewal must have performed a minimum two (2) field assessments in the previous term). If not, a written letter from the sponsoring agency's clinical director stating that the Health Officer remains competent in clinical assessment for involuntary hospitalizations must be included in the application.
- 7) A Health Officer designation may be revoked at any time at the sole discretion of the Executive Director of the MHR SB upon written notice to the sponsoring agency. A designation as a Health Officer shall automatically expire if the designee terminates employment with the sponsoring agency unless transfer status within the system is endorsed by the receiving agency's executive director; all required information and training must be current and the application approved by MHR SB. It is the responsibility of the sponsoring agency's clinical or executive director to notify the MHR SB of any Health Officers who terminate employment.
- 8) Any complaints or grievances pertaining to a Health Officer's performance of duties shall be handled as follows:
- a) The sponsoring agency shall conduct a thorough investigation and prepare a written report of the complaint or grievance. The written report of the investigation and its findings along with any action taken by the agency shall be submitted to the MHR SB

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COQ: V-A.26; X-A.3
Effective Date: 12/1/16
Supersedes Date: 3/1/14

- Executive Director with a copy to the MHR SB Client Rights Officer for review. Such report shall be submitted within 20 days of the complaint or grievance, and be consistent with the Board's Client Rights and Grievance Policy.
- b) The MHR SB requires that any agency that requests an employee be designated as a Health Officer pursuant to this policy shall execute an indemnification agreement with MHR SB that is ongoing, requiring no renewal, and remains in force as long as the agency has currently certified Health Officers.
- 9) MHR SB requires a quarterly Quality Assurance Report for Health Officers from each sponsoring agency. The report will include: the number of assessments requested; the number of assessments performed; the number of involuntary applications completed; and the final disposition of the clients that were evaluated.

Responsibilities of Health Officers

A person designated as a Health Officer by MHR SB is empowered to evaluate, take into custody, and facilitate transportation to an appropriate facility, persons whom they believe to be mentally ill and who represent a substantial risk of physical harm to himself or others if allowed to remain at liberty. The Health Officer's assessment shall be made in accordance with the emergency involuntary hospitalization criteria set forth in the Ohio Revised Code Section 5122.10. In the event that a Health Officer takes a person into custody for the purpose of emergency examination or treatment, they must:

- 1) Provide a written statement to the hospital that specifies the circumstances under which said person was taken into custody and the basis for the Health Officer's conclusion that the person is mentally ill, and subject to hospitalization as defined in ORC 5122.01 (B) (1-5). A copy of the written statement must be provided to the respondent or his/her attorney upon the request of either;
- 2) Make every reasonable and appropriate effort to take persons into custody in the least conspicuous manner possible;
- 3) Explain to the person being taken into custody that the custody-taking is not a criminal arrest, and that the person is being taken for examination by a mental health professional or psychiatrist to a specified mental health facility identified by name;
- 4) Take precautions to preserve and safeguard the personal property in the possession of or on the premises occupied by that individual;
- 5) Abide by the proper code of ethical conduct for licensed mental health professionals and protect the client's right to privacy and confidentiality;
- 6) Maintain current knowledge of O.R.C. 5122.10 (emergency hospitalization) and O.R.C. 5122.29 (patient rights), and the MHR SB's Designation of Health Officers Policy.

**MENTAL HEALTH & RECOVERY
SERVICES BOARD OF LUCAS COUNTY**

Designation of Health Officers

**COQ: V-A.26; X-A.3
Effective Date: 12/1/16
Supersedes Date: 3/1/14**

Health Officer Advisory Group

- 1) The MHRSB Executive Director may convene an advisory group as needed. When convened the group will be facilitated by the Director of Programs and Services (or designee); it will be open to all sponsoring agencies. In addition, the Director may recruit hospital staff, consumers, law enforcement, or community stakeholders to serve in the advisory role.
- 2) The Health Officer Advisory Group should participate in the development and review of a Board approved training for Health Officers.
- 3) The Health Officer Advisory Group may advise on questionable applications, Health Officer qualifications, community policy regarding Health Officer Activity, or procedural issues that present from time-to-time, or other related topics determined by the MHRSB's Executive Director or by the Group itself.

Approved:

Scott A. Sylak, Executive Director

Date

MHRSB Organizational Chart Update

➤ Client Rights Officer – Part-Time Position

On November 2, 2015 the MHRSB's contracted Client Rights Officer terminated her contract with the MHRSB. Since that time, the MHRSB Client Rights Officer activities have been redistributed to Associate Director, Tim Goyer, with support provided by Amy Priest, Manager of Treatment Services and Karen Olnhausen, Director of Programs & Services.

The FY 2017 MHRSB Administrative Budget provided \$26,624 in consultation services to contract with a new Client Rights Officer. Previously, various discussions relative to the nature of this position's duties and responsibilities have resulted in concern relative to the classification of this position as an independent contractor versus an employee. To alleviate these concerns, Board staff is recommending the MHRSB Trustees create a part-time Client Rights Officer position within the MHRSB Organizational Chart. As an employee of the MHRSB, it is further recommended that the Client Rights Officer position be a classified and non-exempt position with an established salary range of \$17,000 to \$24,000 annually. As a part-time position, the Client Rights Officer would work up to 20-hours per week, or 40-hours per pay period. Subsequently, the Client Rights Officer would not be eligible for health and dental benefits.

Should the MHRSB Trustees agree with the above recommendation, the impact on the MHRSB budget for the remainder of FY 2017 and FY 2018 would be negligible as the \$26,624 previously allocated for consultant services would be redirected to this position, covering the entire cost of the position's salary and taxes. Other related expenses, such as training and transportation, will be absorbed within the MHRSB's current and future administrative budgets without an increase.

A copy of the proposed Client Rights Officer's Job Description and a revised MHRSB Organizational Chart is attached.

The following motion is recommended to the Board of Trustees:

The Mental Health and Recovery Services Board of Lucas County approves the addition of a part time (.5fte) Client Rights Officer position with a salary range of \$17,000 to \$24,000 annually effective November 16, 2016.

**MENTAL HEALTH AND RECOVERY
SERVICES BOARD OF LUCAS COUNTY**

Position Description

**Client Rights Officer
(Part Time)**

**Classified X Unclassified
Exempt Non-Exempt X
Supervises: 0
Reports To: **Director, Programs
and Services**
Effective **11/16/2016****

SUMMARY:

The Client Rights Officer serves to ensure that MHR SB is accomplishing its responsibilities in regard to provisions in OAC 5122:2-1-02. This includes monitoring contract agencies to ensure that they are in compliance with OAC 5122-26-18, monitoring and implementing the Board's grievance policy and procedures, addressing client rights complaints, maintaining MHR SB records related to grievances, and summarizing at least annually those records of grievances received and their disposition. Further, the Client Rights Officer serves as MHR SB's primary point of contact to respond to complaints and grievances from individuals who are encountering difficulties in accessing services from contracted providers, or who feel that those providers (or MHR SB) have in some way violated their rights as outlined in OAC.

PRIMARY DUTIES AND RESPONSIBILITIES:

1. Maintain MHR SB's Client Rights and Grievances Policy and Procedures to ensure that the MHR SB Board policy is in compliance with Ohio Administrative Code.
2. Monitor contract agencies to ensure that they are in compliance with Ohio Administrative Code as well as MHR SB contracts.
3. Maintain a current roster of Client Rights Officers at each contract provider.
4. Respond to all calls from consumers who are complaining about access to the system or against providers, or grieving a violation of their rights. Provide information or direct caller to agency CRO.
5. When appropriate, assist client to file grievance against contract providers. Work with both parties to resolve issue or to refer to OMHAS or U.S. Health and Human Services.
6. Maintain appropriate records of all complaints and grievances, including their disposition.

**MENTAL HEALTH AND RECOVERY
SERVICES BOARD OF LUCAS COUNTY**

Position Description

<p>Client Rights Officer (Part Time)</p>	<p>Classified <u> X </u> Unclassified <u> </u> Exempt <u> </u> Non-Exempt <u> X </u> Supervises: <u> 0 </u> Reports To: Director, Programs and Services Effective 11/16/2016</p>
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7. Collect all data related to Reportable Incidents and maintain records. Report as necessary.
8. Collect annual reports from contract providers regarding complaints and grievances.
9. Prepare annual summary of complaints and grievances at the MHR SB Board and Provider level.
10. Maintain a regular schedule of office hours in order to be accessible to callers.
11. Other duties as assigned.

EDUCATION/EXPERIENCE:

The Client Rights Officer must have a minimum of a Bachelor's Degree in a customer service related field. He/she will also have a minimum of three (3) years of experience working in a customer service related position. Training/experience in mediation or negotiation is preferred. The Client Rights Officer will have excellent organizational, listening, and written and verbal communication skills. He/she must be technically proficient in Microsoft Office software including Word, Excel, PowerPoint, etc.

Signature Employee:

Date

Signature Supervisor

Date

MHRSB Organizational Chart

Draft November 16, 2016

