GEAUGA COUNTY BOARD OF MENTAL HEALTH AND RECOVERY SERVICES

May 16, 2023 Planning and Policies Committee 2:00 – 3:00 P.M.

Present: Christine Lakomiak, Jim Mausser, Teresa Slater, Kathy Johnson, Alberta Chokshi, Walter Claypool, Ann Bagley, Mary Wynne Peaspanen, Charles Tong, Vicki Clark, Michelle Bertman

I. Call to Order and Pledge of Allegiance

Mr. Claypool called the meeting to order at 2:04 PM. The Pledge of Allegiance was then recited.

II. Minutes from February 8, 2023

Alberta moved to approve the Minutes as written. Kathy seconded the motion. Voice Vote: Ayes-4. Motion approved.

III. Review of Policy Manual and Prioritizing Updates

The Board's Policy Manual and Table of Contents were sent to committee members for review. The following was discussed:

- Alberta would like to start from the beginning unless something comes up that needs to be addressed. Kathy and Ann agree with that plan of action.
- Mr. Claypool feels there are certain policies where the Board may be at risk today, such as the
 records retention policy. Christine does not have a cell phone provided by the Board, so her
 personal cell phone is subject to records requests.
- Housing Policy: Christine has looked at the current housing policy. It will need to be updated and also include the charge of committee. There are certain populations the Board has to focus on. Mr. Claypool would like the Board to define what "housing" means. There may be various housing needs that are not the responsibility of the mental health board. He would like to see data and statistics to show what we are talking about, which can be used when making decisions. Christine said the housing/capital planning committee can define the different types of housing needs under the Board's auspices when developing a policy. Mr. Claypool feels that the planning and policies committee should set the policy based on information gathered from the other committees. Alberta suggested that the full Board decide what the housing priorities should be and how to move forward.
- Committees: Christine would like the Board to review its current committee structure. There are
 no committee requirements under the Ohio Revised Code. It is the preference of individual
 boards. She said there is work that can be done outside of committees by having working
 groups instead. There are also several members on more than one committee.

IV. Current/Proposed Organizational Chart

Christine referenced the current chart and then talked about her proposed changes. The Associate Director position would be changed to Clinical and Compliance Manager. The Secretary/Receptionist position title would be changed to Administrative and Office Manager to better reflect Teresa's job duties and responsibilities. There is no fifth position currently in the budget, but she did not want to remove it from the chart because there is a need for another

position under Jim Mausser. The committee briefly discussed hiring a consultant to redesign the Board's website instead of doing it in-house. The committee voted to recommend approval of the proposed organizational chart to the full Board.

V. Clinical and Compliance Manager Job Description

Mr. Claypool said this is a very complicated job description. He feels the priority should be to hire someone who can review program statistics/outcomes/best practices and determine what is or is not working. Christine is confident that we will be able to hire someone who can perform all the job duties listed. The committee discussed what credentials and clinical expertise is needed. Christine said it may be very challenging to find licensed professionals. She is a clinician but is not licensed in the state of Ohio. She doesn't want to disqualify someone if they are not licensed. Mr. Claypool commented that a person's clinical background may not be as important as their experience, especially if they will not be seeing patients. The committee voted to recommend approval of the job description to the full Board.

VI. Health Officer Policy and Procedure

Christine said Ohio Revised Code Sections ORC 5122.01 allows mental health boards to appoint health officers. This is someone who can involuntarily hospitalize a person if they meet specific criteria. This statute also lists who automatically has this authority, including a judge, sheriff, law enforcement, parole officers, psychiatrists, nurse practitioners. The only way to have a clinician involved when a person may be "pink slipped" is by the mental health board appointing health officers.

Ravenwood's chief clinical director was verbally given the authority to appoint health officers in the past. Christine would like to formalize that process, which would include reviewing credentials and providing in-depth training. She has not given that authority to anyone as the Executive Director and has asked agency personnel to stop writing pink slips until this has been brought to the Board. She has drafted a health officer policy and procedure for the committee to review which will allow her to appoint health officers after they meet certain qualifications.

Mr. Claypool is not comfortable giving someone the authority to take away another person's liberties. He is not averse to this but it does raise concerns. He then asked how often this is needed. Ms. Clark responded approximately 100 are hospitalized in this manner every year. Mr. Claypool does feel it should be done by someone who has been trained to assess behaviors and recognize what needs to be done. Mr. Claypool then asked what other counties are doing. Christine replied that most counties have health officers who are clinicians.

Kathy said having a clinician adds a layer of protection and compassion. When talking about involuntary hospitalization, this is a short-term situation used to diffuse a situation if a person is a danger to themselves or someone else. She would never advocate taking away someone's freedoms except for their own safety or the safety of others.

Christine said patients are hospitalized for up to 72 hours, and can either sign themselves in, be released, or a probate hearing is held to determine if the person needs to continue to be hospitalized or should be released. If not released, patients are committed to the mental health board for a specific period of time to receive services. What she needs from the committee is a motion to either allow the Executive Director or the Board to appoint health officers. The Board office would have a list of those who have been authorized as health officers.

Ann moved to recommend approval of the Health Officer Policy to the full Board. Linda seconded the motion. Voice Vote: Ayes-3; Nays-0; Abstentions-1. Motion approved.

VII. Quality Control/Programming

Christine reported that she is reviewing each program and meeting with agencies before drafting the service specifications for the next fiscal year.

VIII. Adjournment

Ann moved to adjourn the meeting. Alberta seconded the motion. The meeting was adjourned at 3:30 PM.