



Minutes of the
Mental Health, Addiction and Recovery Services Board of Lorain County
Board Meeting held on April 23, 2024
at The Amy H. Levin Learning & Conference Center, Lorain, OH 44055

Board Members Present: Charlita Anderson-White, Mike Babet, Monica Bauer, Tim Carrion, Michael Finch, Michele Flanagan, Earl Martin, Pat McGervey, Dr. Hope Moon, Clifton Oliver, Sandra Premura, James Schaeper

Board Members Absent: David Ashenhurst, Tim Barfield, Patricia Bell, Robert Stipe, Daniel Urbin

CALL TO ORDER

Board Vice Chair Mike Babet called the meeting to order at 5:00 p.m. Roll call was taken and quorum found.

APPROVAL OF MINUTES

RESOLUTION No. 24-04-01 Dr. Hope Moon made a motion to approve the March 26, 2024 board meeting minutes. Seconded by Sandra Premura. Motion carried. Minutes approved.

COMMITTEE REPORTS (reports attached)

- Community Planning & Oversight Committee – Mike Babet
- Finance Committee – Michael Finch
- Nominating Committee – Michele Flanagan
- Executive Committee – Mike Babet

Executive Director Report (report attached) by Michael K. Doud

Highlights

- SB 105 Proposes changes to ORC 340 to address timeframe contract renewal & termination, audits, access to data continues with hearings.
- HB 257 Authorize public bodies to meet virtually passed by House.
- June Board of Director Meeting will be offsite at Primary Purpose
- The Executive Committee will meet and discuss the creating of the Ad Hoc Strategic Planning Committee



Minutes of the
Mental Health, Addiction and Recovery Services Board of Lorain County
Board Meeting held on April 23, 2024
at The Amy H. Levin Learning & Conference Center, Lorain, OH 44055

APPROVAL OF CONSENT AGENDA

RESOLUTION No. 24-04-02 Tim Carrion made a motion to approve the Consent Agenda. Seconded by Michael Finch. Motion carried. Consent Agenda approved.

UNFINISHED BUSINESS

None to report

NEW BUSINESS

None to report

PUBLIC COMMENT

- John Nisky (former board member) shared his experience and some statistics he received while visiting United Way of Greater Cleveland's Problem Gambling 211 information session. Mr. Nisky also expressed his continued support to the MHARS Board of Lorain County.

UPCOMING COMMITTEE AND BOARD MEETINGS:

- Executive Committee – Friday, May 3, 2024 at 8:00am
- CP&O Committee – Tuesday, May 14, 2024 at 5:00pm
- Finance Committee – Tuesday, May 21, 2024 at 5:00pm
- Nominating Committee – Tuesday, May 28, 2024 at 4:00pm (prior to BOD meeting)
- Board Meeting – Tuesday, May 28, 2024 at 5:00pm
- CP&O Committee – Tuesday, June 11, 2024 at 5:00pm
- Finance Committee – Tuesday, June 18, 2024 at 5:00pm
- Board Meeting – Tuesday, June 25, 2024 at 5:00pm

ADJOURNMENT

Meeting adjourned at 5:28 p.m.



**Minutes of the
Mental Health, Addiction and Recovery Services Board of Lorain County
Board Meeting held on April 23, 2024
at The Amy H. Levin Learning & Conference Center, Lorain, OH 44055**



Board Chairperson



Board Secretary

BOARD OF DIRECTORS

Daniel T. Urbin, Chairperson

Mike Babet, Vice Chair

Sandra Premura, Secretary

James Schaeper, Chief Governance Officer

Charlita Anderson-White • David Ashenhurst • Tim Barfield • Monica Bauer • Patricia Bell
Tim Carrion • Michael Finch • Michele Flanagan • Earl Martin • Pat McGervey
Dr. Hope Moon • Clifton Oliver • Robert Stipe

Community Planning and Oversight Committee Report

Tuesday, April 9, 2024 5:00 p.m. MHARS Board Office – Conf Room

COMMUNITY PLANNING AND OVERSIGHT COMMITTEE: The Community Planning and Oversight Committee shall evaluate new programs and determine service gaps and unmet needs in the community. The Committee shall also set standards for evaluating service providers funded by the Board with respect to meeting the service terms of contracts, programs, goals and objectives, and the quality of service, and periodically monitor and review provider status. The Committee shall facilitate the development of a schedule of regular presentations to the BOD pertaining to current programming and emerging needs in the community.

Committee Members Present: Mike Babet, Committee Chair, David Ashenhurst, Earl Martin, Robert Stipe, Dan Urbin (ex officio)

Staff Present: Tonya Birney, Lauren Cieslak, Amanda Divis, Michael Doud, Arielle Edwards, Rebecca Jones, Vinaida Reyna, Mark Johnson

I. Informational:

A. Handle with Care (see Attachment A)

B. Highlighted Events (see Attachment B)

II. Recommendations: Agenda Process Sheet (APS)

A. FY24 Allocation Increase (see APS 04.24.01)

- Road to Hope for Recovery Housing \$60,000

- Robert Stipe made a motion to approve the staff recommendation for an allocation increase of \$60,000 for Road to Hope, as indicated in APS worksheet 04.24.01 and to move the recommendation to the Finance Committee. Earl Martin seconded the motion. All in favor. Motion carried.

B. FY24 Service Agreement (see APS 04.24.02)

- Emerald Development and Economic Network (EDEN) for Landlord Incentive Fund Coordination (Metrics & Guidelines) \$37,000

- David Ashenhurst made a motion to approve the staff recommendation to enter into a contract with EDEN Inc. in the amount of \$37,000 as indicated in APS worksheet 04.24.02 and to move the recommendation to the Finance Committee. Robert Stipe seconded the motion. All in favor. Motion carried.

C. FY25 Network Agency Budget Recommendations (see Attachment C & D)

AGENCY	FY25 Budget Recommendations
Beech Brook	40,000
Far West Center	161,727

Community Planning and Oversight Committee Report

Tuesday, April 9, 2024 5:00 p.m. MHARS Board Office – Conf Room

AGENCY	FY25 Budget Recommendations
Pathways	66,000
Silver Maple	120,000
Stella Maris	91,800
Big Brother Big Sister	119,800
El Centro	255,000
Lutheran Metropolitan Ministry	52,000
NAMI	160,000

- Earl Martin requested to remove the Far West Center budget recommendation and asked the Programs Team to provide extra information. Committee accepted request.
- David Ashenhurst made a motion to approve the staff recommendations for the Network Agency Budget Recommendations as indicated in Attachment D with the exception of Far West Center and to move the recommendations to the Finance Committee in the May meeting. Earl Martin seconded the motion. All in favor. Motion carried.

III. Unfinished Business

- A. Future Achievement Development Program update
 - Rebecca Jones and Chad Grude presented information this morning to a group of Elyria City managers. Materials included suicide prevention, MHARS Board programming and the crisis receiving center.
- B. Walk-On: Transportation update
 - Rebecca Jones is part of the ATP group which focuses on transportation including walking and biking in the county. Funded by Lorain County Transport, Lorain and Elyria will each pilot a “micro-transport system” that includes on demand rides within each of those cities for a cost of \$2/ ride. Rebecca recommended encouraging providers to educate their clients about this service.

IV. New Business – None at this time.

Adjourned at 7:29pm

Following Meeting: Tuesday, May 14, 2024 at 5:00pm at MHARS Board Office – Conf Room



HANDLE WITH CARE



Ohio Handle With Care is a collaborative cross-systems, trauma informed program aimed at ensuring that children who are exposed to adverse events receive appropriate interventions at school and have opportunities to build resilience through positive relationships with teachers and first responders. Directed by Hopewell Health Centers and supported by the Ohio Department of Mental Health and Addiction Services, Ohio HWC collaborates with communities across the state to implement HWC to fidelity. We gather leaders from around our county, representing cross sector agencies ranging from law enforcement and first responders, education and ESCs, mental health boards, FCFCs, and other community champions, to discuss implementing the HWC program in our community. In Lorain County, Lauren Cieslak Youth Services Program Officer at the MHARS Board, Chantille Jackson Elyria City Schools Social Worker, and Caroline Bryant Paramedic at Life Care Ambulance are the coordinators.

Handle With Care asks first responders to note when a school-aged youth is present during any event where first responders are present and send a simple alert. The first responder obtains the child's name and school, then sends a notice stating "Handle with Care". No specific information about the event is needed. The Handle with Care protocol allows school staff to provide additional support to students in the days following adverse or traumatic experiences and monitor for any ongoing needs. Regular visits to schools provide first responders with opportunities to connect with students to develop resilience-building relationships. The goal of Handle With Care is building resiliency through relationships!

Ohio Handle With Care: Building Resiliency Through Relationships!

Lorain County Handle with Care County Coordinators:

Lauren Cieslak- MHARS Board- Youth Services Program Officer lcieslak@MHARSLC.ORG
Chantille Jackson- Elyria City Schools- School Social Worker JacksonChantille@elyriaschools.org
Caroline Bryant- Life Care Ambulance cbryant@lifecareambulance.com

Please visit <https://handlewithcareoh.org> for more information.



state support

county coordinators



Mental Health,
Addiction & Recovery
Services Board of
Lorain County



Department of Mental Health and
Addiction Services



ATTACHMENT B

UPCOMING TRAININGS AND OUTREACH

APRIL 2024

8-12 – Peer Recovery Supporter Training (virtual) <i>REGISTRATION CLOSED</i>	Staff: Tonya Birney
17 – Youth MHFA Training at Amy Levin Center	Staff: Carrie Wykrent
17 – ReEntry Simulation at Salvation Army 9:00-12:00pm (volunteers needed)	Staff: Arielle Edwards
18 – Family Night at LCS Toni Morrison	Staff: Lauren Cieslak
18-19 – ASIST Training at Amy Levin Center	Staff: Rebecca Jones
22-26 – CIT Training at Amy Levin Center	Staff: Arielle Edwards
27 – Out of the Darkness Suicide Prevention Walk at LCCC	Staff: Rebecca & Lauren

MAY 2024

11 – Spanish MHFA Training at Amy Levin Center	Staff: Carrie Wykrent
--	------------------------------

ACRONYMS

ASIST = Applied Suicide Intervention Skills Training

HWC = Handle With Care

LCPH = Lorain County Public Health

MHFA = Mental Health First Aid

NHA = Neighborhood Alliance

QPR = Question Persuade Refer

SPC = Suicide Prevention Coalition

ATTACHMENT C

Budgeting Process Overview

Below is a link and password for you to be able to access the Live Binder (a web-based document repository) which has the Contract Applications from each agency.

<https://www.livebinders.com/b/3400461>

Key: MHARS

Even prior to agency application and budgetary reviews, network agency collaboration and review occurs ongoingly to inform the MHARS staff recommendations for the next fiscal year budget. A very broad overview of this includes:

- **Current Services and Capacity Indications** – Consistent with our Strategic Plan and Community Assessment Plan
- **Agency application, program development and growth predictions** – We seek to understand the funds being requested for each service or program that they were submitting.
- **Historic, current actual and projected utilization of funds** – Reviewing utilization over the past four fiscal years, and recognizing that the last quarter of FY20, all of FY21 and FY22 were impacted by Covid-19, we make recommendations knowing that a return to previous levels of service will be gradual as the impact of the pandemic is not over and we have continued to face a significant workforce shortage in FY23 and FY24.
- **Other funding opportunities and potential for clinical and administrative efficiencies.** State Opioid and Stimulant Response (SOS), additional state or federal grant awards and increased Medicaid utilization are examples of other funds to be used first. A decreased need for transportation as agencies and clients are more adept at telehealth are examples of this.

Attachment D is an excel document with Budget Analysis.

Of note: The federal fiscal year and our fiscal year do not match. Therefore, we will remove these funds from existing budgets so that we can present an apple to apples review of just FY25.

This may be discrepant with the numbers presented by the agencies in their original proposals.

State Opioid and Stimulant Response funding (SOS), for example, are federal dollars already awarded through the end of September. These funds cross our fiscal years 24 and 25 and agencies already have these funds through September. We will not duplicate these current funds in this budget process. When these funds are awarded for the next federal fiscal year, they will be additional allocations.

Not including these numbers at this time is in no way a reflection of our intentions towards that service or program in the future.

Also removed from some budgets are items where we have **“Pooled Funds”**. These include the Bi-lingual Staff Incentive, Internship Stipend, Professionally Led Support Groups and Interpreting. Again, these are still funded but will be done through pooled funding that can be accessed by the providers through invoicing.

Upon review, if there are any questions or clarifications that we can provide prior to the meeting, please reach out via email or call (440) 787-2073.

BEECH BROOK

UPDATED AS OF 03/18/2024

AGENCY	SERVICE	ACTUAL FY18	ACTUAL FY19	ACTUAL FY20	ACTUAL FY21	ACTUAL FY22	ACTUAL FY23
BEECH BROOK	Prevention: MH Problem Identification & Referral	8,298	22,001	12,168	8,951	47	
BEECH BROOK	Prevention: MH Education (Consultation)	10,428	11,032	16,896	9,833	18,969	30,762
BEECH BROOK	Community - Based Process					179	
BEECH BROOK	Prevention: Education	-	-	-	400	15,783	9,494
BEECH BROOK	Productivity Credits					150	800
PREVENTION SERVICES TOTALS		18,726	33,033	29,064	19,184	34,949	41,235

FY24					
BEGINNING BUDGET	CURRENT BUDGET	ACTUALS		PROJECTED	VARIANCE
		TOTAL	THROUGH		
		1,757	20231129	4,247	
37,200	37,200	19,673	20231121	39,945	
		451	20231130	1,083	
		-	0	-	
37,200	37,200	21,881		45,275	8,075

ASK FY25	% Increase (Decrease) from
-	0.0%
40,000	7.5%
-	0.0%
-	0.0%
-	0.0%
40,000	7.5%

RECOMMEND
1,000
38,000
1,000
-
40,000

ATTACHMENT D

FAR WEST

updated as of 03/18/2024

AGENCY	SERVICE	ACTUAL FY18	ACTUAL FY19	ACTUAL FY20	ACTUAL FY21	ACTUAL FY22	ACTUAL FY23	FY24				ASK FY25	% Increase (Decrease) from prior year	RECOMMEND		
								BEGINNING BUDGET	CURRENT BUDGET	ACTUALS					PROJECTED	VARIANCE
FAR WEST	MH Medical and Related Services	29,360	46,648	49,557	52,285	53,625	51,511	32,165	32,165	13,882	20240206	24,992	(7,173)	65,908	104.9%	32,165
FAR WEST	MH Assessment, Evaluation & Testing	5,517	6,359	12,039	12,821	9,298	13,985	8,725	8,725	4,089	20231206	9,446	721	13,664	56.6%	9,446
FAR WEST	MH Counseling & Therapy Services	30,694	48,868	62,634	61,258	27,917	39,336	47,616	47,616	24,446	20240213	43,293	(4,323)	74,981	57.5%	47,616
FAR WEST	MH Community Psychiatric Supportive Treatm	15,338	9,377	7,055	7,496	13,777	11,689	14,808	14,808	13,042	20240209	20,001	5,193	15,447	4.3%	20,000
	TREATMENT SERVICES SUBTOTALS	80,909	111,252	131,285	133,860	104,617	116,521	103,314	103,314	55,459		97,732	(5,582)	170,000	64.5%	109,227
FAR WEST	Psych Incentive # FTE's	10,230	10,260	9,735	9,360	9,360	9,360	11,200	11,200	4,680	20231231	9,334	(1,866)	12,000	7.1%	12,000
FAR WEST	Adult Wraparound	333	1,702	6,000	-	-	-	500	500	-		-	(500)	3,000	500.0%	500
FAR WEST	Transportation to Clinical Appointments (Non-billable)	-	15	110	-	-	-	-	-	-	-	-	-	-	-	-
FAR WEST	Non-Billable Case Management	-	-	65	-	-	-	-	-	-	-	-	-	-	-	-
FAR WEST	CPST Outcomes Incentive	-	300	-	-	-	-	-	-	-	-	-	-	1,000	-	-
FAR WEST	Senior Strong Program	-	-	-	-	-	-	50,000	50,000	17,853	20240228	26,927	-	65,000	-	40,000
FAR WEST	Miscellaneous Billings	5,337	-	-	-	-	-	-	-	-	-	-	-	-	-	-
FAR WEST	Productivity Credits	960	1,980	900	-	-	-	-	-	-	-	-	-	-	-	-
	SUBTOTALS	16,860	14,257	16,810	9,360	9,360	9,360	61,700	61,700	22,533		36,261	(2,366)	81,000	31.3%	52,500
	TOTALS	97,769	125,509	148,095	143,220	113,977	125,881	165,014	165,014	77,992		133,993	(7,948)	251,000	52.1%	161,727

PATHWAYS

UPDATED AS OF 03/15/2024

AGENCY	SERVICE	ACTUAL FY18	ACTUAL FY19	ACTUAL FY20	ACTUAL FY21	ACTUAL FY22	ACTUAL FY23	FY24				ASK FY25	% Increase (Decrease) from	RECOMMEND		
								BEGINNING BUDGET	CURRENT BUDGET	ACTUALS					PROJECTED	VARIANCE
								TOTAL	THROUGH							
PATHWAYS	MH Assessment, Evaluation & Testing	3,384	4,040	3,149	1,478	1,380	2,970	3,000	3,000	1,391	20240219	2,179	6,500	116.7%	4,000	
PATHWAYS	MH Counseling & Therapy Services	33,554	66,378	84,666	49,504	28,033	29,110	30,000	30,000	42,548	20240308	60,498	58,500	95.0%	62,000	
PATHWAYS	Productivity Credits				-	1,200										
TREATMENT SERVICES SUBTOTALS		36,938	70,418	87,815	50,982	30,613	32,080	33,000	33,000	43,939		62,677	29,677	65,000	97.0%	66,000

SILVER MAPLE

updated as of 03/15/2024

AGENCY	SERVICE	ACTUAL FY18	ACTUAL FY19	ACTUAL FY20	ACTUAL FY21	ACTUAL FY22	ACTUAL FY23
SILVER MAPLE	SUD Sub-Acute Detoxification - Residential Treatment				29,119	33,821	47,173
SILVER MAPLE	Detox Room and Board				2,036	2,143	3,428
SILVER MAPLE	SUD Housing - Residential Treatment Room & Board				7,266	15,941	26,739
SILVER MAPLE	Recovery Room and Board				19,150	7,106	40,054
TREATMENT SERVICES SUBTOTALS		-	13,300	39,665	57,571	59,011	117,394

FY24					
BEGINNING BUDGET	CURRENT BUDGET	ACTUALS		PROJECTED	VARIANCE
		TOTAL	THROUGH		
60,000	60,000	26,302	2024Q229	30,227	
37,000	37,000	15,563	2024Q229	18,724	
40,000	40,000	28,878	2024Q229	33,012	
137,000	137,000	70,743		81,963	(55,037)

ASK FY25	% Increase (Decrease) from
75,435	25.7%
#DIV/0!	
48,357	30.7%
224,840	462.1%
348,632	154.5%

RECOMMEND
50,000
30,000
40,000
120,000

STELLA MARIS

UPDATED AS OF 03/15/2024

AGENCY	SERVICE	ACTUAL FY19	ACTUAL FY20	ACTUAL FY21	ACTUAL FY22	ACTUAL FY23
STELLA MARIS	SUD Sub-Acute Detoxification - Residential Treatment			47,536	39,698	40,072
STELLA MARIS	Group Counseling IOP/PH Level of Care			7,419	7,119	9,442
STELLA MARIS	SUD Housing - Residential Treatment Room and Board			10,063	39,218	31,646
STELLA MARIS	SUD Housing - Time Limited/Temp Recovery Room and Board			8,140	6,365	7,099
TREATMENT SERVICES SUBTOTALS		77,000	76,042	73,158	92,400	88,259

FY24					
BEGINNING BUDGET	CURRENT BUDGET	ACTUALS		PROJECTED	VARIANCE
		TOTAL	THROUGH		
43,800	43,800	28,560	20240219	35,375	
18,000	18,000	9,676	20240229	11,251	
43,000	43,000	4,406	20240218	6,234	
7,000	7,000	17,727	20240305	21,568	
111,800	111,800	60,369		74,428	(37,372)

ASK FY25	% Increase (Decrease) from prior year
64,761	
40,444	
28,078	
31,718	
165,001	47.6%

RECOMMEND
43,800
15,000
13,000
20,000
91,800

BIG BROTHERS BIG SISTERS

UPDATED AS OF 03/15/2024

AGENCY	SERVICE	ACTUAL FY18	ACTUAL FY19	ACTUAL FY20	ACTUAL FY21	ACTUAL FY2	ACTUAL FY23	FY24						ASK FY25	% Increase (Decrease) from prior year	RECOMMEND
								BEGINNING BUDGET	CURRENT BUDGET	ACTUALS		PROJECTED	VARIANCE			
										TOTAL	THROUGH					
BIG BROTHERS BIG SISTERS	Mentoring (Prevention: Alternatives)	-	-	-	28,000	28,000	28,000	28,000	28,000	21,000	20240131	28,000	-	28,000	0.0%	28,000
BIG BROTHERS BIG SISTERS	Mentoring (Prevention: Community Based Process)	40,000	40,000	40,000	12,000	12,000	12,000	12,000	12,000	9,000	20240131	12,000	-	12,000	0.0%	12,000
BIG BROTHERS BIG SISTERS	Performance Incentive	20,000	20,000	20,000	-	-	-	-	-	-	-	-	-	-	-	-
BIG BROTHERS BIG SISTERS	Kernels for Life	9,800	9,800	9,800	-	-	-	-	-	-	-	-	-	-	-	-
BIG BROTHERS BIG SISTERS	CoC Funding (Prevention)	5,396	5,444	2,522	-	-	-	-	-	-	-	-	-	-	-	-
BIG BROTHERS BIG SISTERS	SUD (Prevention: Alternatives)	-	-	-	55,860	55,860	55,860	55,860	55,860	41,895	20240131	55,860	-	53,200	-4.8%	53,200
BIG BROTHERS BIG SISTERS	SUD (Prevention: Community Based Process)	70,000	70,000	70,000	23,940	23,940	23,940	23,940	23,940	17,955	20240131	23,940	-	26,600	11.1%	26,600
	TOTALS	145,196	145,244	142,322	119,800	119,800	119,800	119,800	119,800	89,850		119,800	-	119,800	0.0%	119,800

EL CENTRO

UPDATED AS OF 03/18/2024

AGENCY	SERVICE	ACTUAL FY18	ACTUAL FY19	ACTUAL FY20	ACTUAL FY21	ACTUAL FY22	ACTUAL FY23	FY24					ASK FY25	% Increase (Decrease) from prior year	RECOMMEND	
								BEGINNING BUDGET	CURRENT BUDGET	TOTAL	THROUGH	PROJECTED				VARIANCE
EL CENTRO	Money Management	210,120	208,727	205,517	201,289	210,938	193,640	210,000	210,000	106,654	20240131	153,260	(28,965)	210,000	0.0%	175,000
EL CENTRO	Recovery Goals	26,825	26,825	26,825	26,825	25,000	20,000	20,000	20,000	20,000	20231231	20,000	-	20,000	0.0%	20,000
EL CENTRO	FEMA Crisis Counseling Program					38,483										
EL CENTRO	Navigator	32,913	50,000	50,000	50,000	46,500	36,038	58,818	58,818	39,212	20240228	58,818	-	60,000	2.0%	60,000
EL CENTRO	Navigator (SUD)	-	-	-	20,000	20,000	15,500	-		-	0	-	-	-	#DIV/0!	
TOTALS		269,858	285,552	282,342	298,114	340,921	265,178	288,818	288,818	165,866		232,078	(28,965)	290,000	0.4%	255,000

ATTACHMENT D

UPDATED AS OF 03/18/2024

AGENCY	SERVICE	ACTUAL FY18	ACTUAL FY19	ACTUAL FY20	ACTUAL FY21	ACTUAL FY22	ACTUAL FY23	FY24				ASK FY25	% Increase (Decrease) from prior year #DIV/0!	RECOMMEND		
								BEGINNING BUDGET	CURRENT BUDGET	ACTUALS					PROJECTED	VARIANCE
								TOTAL	THROUGH							
LUTHERAN MM	Guardianship Services	29,000	41,000	43,000	45,000	45,000	43,000	49,000	49,000	24,500	20231231	49,000	-	52,000	6.1%	52,000
LUTHERAN MM	Under 45 Guardianship Services	-	1,421	3,124	2,899	6,000	1,552						-			-
	TOTALS	29,000	42,421	46,124	47,899	51,000	44,552	49,000	49,000	24,500		49,000	-	52,000	6.1%	52,000
NAMI	Education, Support and Awareness	69,714	119,160	139,983	137,632	137,632	137,632	140,000	140,000	105,000	20240331	140,000	-	160,000	14.3%	160,000
NAMI	Loss Team	23,267	-	-	-	-	-	-	-	-	-	-	-	-	0.0%	-
	TOTALS	92,981	119,160	139,983	137,632	137,632	137,632	140,000	140,000	105,000		140,000	-	160,000	14.3%	160,000

Finance Committee Meeting Report

Tuesday, April 16, 2024 5:00 p.m. Conference Room

FINANCE COMMITTEE: The Finance Committee shall review all expenditures of the Board monthly financial statements and shall report on these to the BOD. The Committee shall review the annual budget proposed by the Executive Director and shall make recommendations on the annual budget to the BOD.

The Committee shall review results from the annual county financial audit and monitor the implementation of any corrective action plans required by the audit.

Committee Members Present: Tim Barfield (Committee Chair), Monica Bauer, Patricia Bell, Michael Finch, Pat McGervey, and Dan Urbin (ex-officio)

Staff Present: Michael Doud, Barry Habony and Johanna Vakerics

The Finance Committee met at the Board Administration Building Conference Room on April 16, 2024 at 5:00 p.m. and reports two (2) informational items and four (4) recommendations.

Informational Items:

1. **List of Contracts** – The Committee reviewed the attached list of *Contracts Authorized by the Executive Director on Behalf of the MHARS Board of Directors*.
2. **Annual County Financial Audit** – The Committee reviewed the attached report letters and schedule of findings for the County annual audit of the period ended December 31, 2022.

Recommendations:

1. **Approval of the Fiscal Year 24 Statement of Revenue and Expenses and Statement of Cash Position** – The Committee reviewed the attached fiscal year 24 Statement of Revenue and Expenses and Statement of Cash Position, along with supporting schedules for the period ended March 2024 and found them to be in order.

(Resolution 24-04-04) The Committee Recommends approval of the fiscal year 24 financial statements for the period ended March 2024.

2. **Approval of the MHARS Board Listing of Expenses for February** – The Committee reviewed the attached Listing of Expenses for March 2024 totaling \$1,979,618.08 and found them to be in order.

(Resolution 24-04-05) The Committee Recommends approval of the MHARS Board 2024 Listing of Expenses.

Finance Committee Meeting Report

Tuesday, April 16, 2024 5:00 p.m. Conference Room

3. **Approval of the MHARS Board Revised Budget for Fiscal Year 24** – The Committee reviewed the attached MHARS Board Revised Budget for Fiscal Year 24. The budget revisions for fiscal year 24 were found to be in order.

(Resolution 24-04-06) The Committee Recommends approval of the MHARS Board Revised Budget for Fiscal Year 24.

4. **Approval of Contracts** – The Committee reviewed the attached list of *Contracts to be Authorized by the MHARS Board of Directors*, which includes contracts recommended for approval from the Community Planning & Oversight Committee and found them to be in order.

(Resolution 24-04-07) The Committee Recommends that the Executive Director be authorized to execute the *Contracts to be Authorized by the MHARS Board of Directors*.

Next Meeting of the Finance Committee scheduled for Tuesday, May 21, 2024 at 5:00pm at the MHARS Board Office – Conference Room.

Contracts Authorized by the Executive Director on Behalf of the MHARS Board of Directors

April 16, 2024

Consultants - Vendors	Service Provided	Amount Paid
WNZN-FM Power 89.1	Provide radio advertising services	NTE \$8,200 for 3/4/24 - 8/30/24

OHIO AUDITOR OF STATE KEITH FABER



88 East Broad Street
Columbus, Ohio 43215
ContactUs@ohioauditor.gov
(800) 282-0370

INDEPENDENT AUDITOR'S REPORT

Lorain County
226 Middle Avenue
Elyria, Ohio 44035

To the Board of County Commissioners:

Report on the Audit of the Financial Statements

Opinions

We have audited the financial statements of the governmental activities, the business-type activities, the aggregate discretely presented component units, each major fund, and the aggregate remaining fund information of Lorain County, Ohio (the County), as of and for the year ended December 31, 2022, and the related notes to the financial statements, which collectively comprise the County's basic financial statements as listed in the table of contents.

In our opinion, based on our audit and the report of other auditors, the accompanying financial statements referred to above present fairly, in all material respects, the respective financial position of the governmental activities, the business-type activities, the aggregate discretely presented component units, each major fund, and the aggregate remaining fund information of the County as of December 31, 2022, and the respective changes in financial position and where applicable, cash flows thereof and the respective budgetary comparisons for the General Fund, the Job and Family Services Fund, the Children Services Fund, the Mental Health, Addiction and Recovery Services Fund, the Lorain County Board of Development Disabilities Fund and the American Rescue Plan Fund for the year then ended in accordance with the accounting principles generally accepted in the United States of America.

We did not audit the financial statements of the Murray Ridge Production Center, Inc., which represent 9.4 percent, 14.9 percent, and 22.7 percent, respectively, of the assets, net position, and revenues of the aggregate discretely presented component unit as of December 31, 2022, and the respective changes in financial position, and where applicable, cash flows, thereof for the year then ended. Those statements were audited by other auditors whose report has been furnished to us, and our opinion, insofar as it relates to the amount included for the Murray Ridge Production Center, Inc., is based solely on the report of other auditors.

Basis for Opinions

We conducted our audit in accordance with auditing standards generally accepted in the United States of America (GAAS) and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Statements* section of our report. We are required to be independent of the County, and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audit. We believe that

Efficient • Effective • Transparent

the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinions. The financial statements of the Murray Ridge Production Center, Inc, were not audited in accordance with Government Auditing Standards.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the County's ability to continue as a going concern for twelve months beyond the financial statement date, including any currently known information that may raise substantial doubt shortly thereafter.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinions. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS and *Government Auditing Standards* will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS and *Government Auditing Standards*, we

- exercise professional judgment and maintain professional skepticism throughout the audit.
- identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the County's internal control. Accordingly, no such opinion is expressed.
- evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the County's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

Required Supplementary Information

Accounting principles generally accepted in the United States of America require that the *management's discussion and analysis*, and schedules of net pension and other post-employment benefit liabilities and pension and other post-employment benefit contributions be presented to supplement the basic financial statements. Such information is the responsibility of management and, although not part of the basic financial statements, is required by the Governmental Accounting Standards Board who considers it to be an essential part of financial reporting for placing the basic financial statements in an appropriate operational, economic, or historical context. We have applied certain limited procedures to the required supplementary information in accordance with auditing standards generally accepted in the United States of America, which consisted of inquiries of management about the methods of preparing the information and comparing the information for consistency with management's responses to our inquiries, to the basic financial statements, and other knowledge we obtained during our audit of the basic financial statements. We do not express an opinion or provide any assurance on the information because the limited procedures do not provide us with evidence sufficient to express an opinion or provide any assurance.

Supplementary Information

Our audit was conducted for the purpose of forming opinions on the financial statements as a whole. The combining statements and individual fund financial statements and schedules are presented for purposes of additional analysis and are not a required part of the basic financial statements.

Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the basic financial statements. The information has been subjected to the auditing procedures applied in the audit of the basic financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the basic financial statements or to the basic financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the combining statements and individual fund financial statements and schedules are fairly stated, in all material respects, in relation to the basic financial statements taken as a whole.

Other Information

Management is responsible for the other information included in the annual financial report. The other information comprises the introductory and statistical sections but does not include the basic financial statements and our auditor's report thereon. Our opinions on the basic financial statements do not cover the other information, and we do not express an opinion or any form of assurance thereon.

In connection with our audit of the basic financial statements, our responsibility is to read the other information and consider whether a material inconsistency exists between the other information and the basic financial statements, or the other information otherwise appears to be materially misstated. If, based on the work performed, we conclude that an uncorrected material misstatement of the other information exists, we are required to describe it in our report.

Other Reporting Required by Government Auditing Standards

In accordance with *Government Auditing Standards*, we will also issue our report dated June 30, 2023, on our consideration of the County's internal control over financial reporting and our tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements and other matters. The purpose of that report is solely to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the County's internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the County's internal control over financial reporting and compliance.



Keith Faber
Auditor of State
Columbus, Ohio

June 30, 2023

OHIO AUDITOR OF STATE KEITH FABER



88 East Broad Street
Columbus, Ohio 43215
ContactUs@ohioauditor.gov
(800) 282-0370

INDEPENDENT AUDITOR'S REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS REQUIRED BY GOVERNMENT AUDITING STANDARDS

Lorain County
226 Middle Avenue
Elyria, Ohio 44035

To the Board of County Commissioners:

We have audited, in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States (*Government Auditing Standards*), the financial statements of the governmental activities, the business-type activities, the aggregate discretely presented component units, each major fund, and the aggregate remaining fund information of Lorain County, (the County) as of and for the year ended December 31, 2022, and the related notes to the financial statements, which collectively comprise the County's basic financial statements and have issued our report thereon dated June 30, 2023. Our report includes a reference to other auditors who audited the financial statements of Murray Ridge Production Center, Inc., as described in our report on the County's financial statements. The financial statements of the Murray Ridge Production Center, Inc., were not audited in accordance with *Government Auditing Standards*, and accordingly, this report does not include reporting on internal control over financial reporting or compliance and other matters associated with Murray Ridge Production Center Inc., or that are reported on separately by those auditors who audited the financial statements of Murray Ridge Production Center, Inc.

Report on Internal Control Over Financial Reporting

In planning and performing our audit of the financial statements, we considered the County's internal control over financial reporting (internal control) as a basis for designing audit procedures that are appropriate in the circumstances for the purposes of expressing our opinions on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the County's internal control. Accordingly, we do not express an opinion on the effectiveness of the County's internal control.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct misstatements on a timely basis. *A material weakness* is a deficiency, or combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the County's financial statements will not be prevented, or detected and corrected, on a timely basis. *A significant deficiency* is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Efficient • Effective • Transparent

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses or significant deficiencies may exist that were not identified.

Report on Compliance and Other Matters

As part of obtaining reasonable assurance about whether the County's financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the financial statements. However, providing an opinion on the compliance with those provisions was not an objective of our audit and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

Purpose of this Report

This purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion of the effectiveness of the County's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the County's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.



Keith Faber
Auditor of State
Columbus, Ohio

June 30, 2023

OHIO AUDITOR OF STATE KEITH FABER



88 East Broad Street
Columbus, Ohio 43215
ContactUs@ohioauditor.gov
(800) 282-0370

INDEPENDENT AUDITOR'S REPORT ON COMPLIANCE WITH REQUIREMENTS APPLICABLE TO EACH MAJOR FEDERAL PROGRAM AND ON INTERNAL CONTROL OVER COMPLIANCE AND ON THE SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS REQUIRED BY THE UNIFORM GUIDANCE

Lorain County
226 Middle Avenue
Elyria, Ohio 44035

To the Board of County Commissioners:

Report on Compliance for Each Major Federal Program

Qualified and Unmodified Opinions

We have audited Lorain County's, (the County) compliance with the types of compliance requirements identified as subject to audit in the U.S. Office of Management and Budget (OMB) *Compliance Supplement* that could have a direct and material effect on each of Lorain County's major federal programs for the year ended December 31, 2022. Lorain County's major federal programs are identified in the *Summary of Auditor's Results* section of the accompanying schedule of findings.

Qualified Opinion on Coronavirus State and Local Fiscal Recovery Funds

In our opinion, except for the noncompliance described in the *Basis for Qualified and Unmodified Opinions* section of our report, Lorain County complied, in all material respects, with the compliance requirements referred to above that could have a direct and material effect on Coronavirus State and Local Fiscal Recovery Funds for the year ended December 31, 2022.

Unmodified Opinion on Each of the Other Major Federal Programs

In our opinion, Lorain County complied, in all material respects, with the compliance requirements referred to above that could have a direct and material effect on each its other major federal programs identified in the *Summary of Auditor's Results* section of the accompanying schedule of findings for the year ended December 31, 2022.

Basis for Qualified and Unmodified Opinions

We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America (GAAS); the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States (*Government Auditing Standards*); and the audit requirements of Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Our responsibilities under those standards and the Uniform Guidance are further described in the *Auditor's Responsibilities for the Audit of Compliance* section of our report.

Efficient • Effective • Transparent

We are required to be independent of the County and to meet our other ethical responsibilities, in accordance with relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our qualified and unmodified opinions on compliance for each major federal program. Our audit does not provide a legal determination of the County's compliance with the compliance requirements referred to above.

Matters Giving Rise to Qualified Opinion on Coronavirus State and Local Fiscal Recovery Funds

As described in findings 2022-001 and 2022-002 in the accompanying schedule of findings, the County did not comply with requirements regarding the following:

Finding #	Assistance Listing #	Program (or Cluster) Name	Compliance Requirement
2022-001	21.027	Coronavirus State and Local Fiscal Recovery Funds	Reporting
2022-002	21.027	Coronavirus State and Local Fiscal Recovery Funds	Subrecipient Monitoring

Compliance with such requirements is necessary, in our opinion, for the County to comply with the requirements applicable to that program.

Responsibilities of Management for Compliance

The County's management is responsible for compliance with the requirements referred to above and for the design, implementation, and maintenance of effective internal control over compliance with the requirements of laws, statutes, regulations, rules, and provisions of contracts or grant agreements applicable to the County's federal programs

Auditor's Responsibilities for the Audit of Compliance

Our objectives are to obtain reasonable assurance about whether material noncompliance with the compliance requirements referred to above occurred, whether due to fraud or error, and express an opinion on the County's compliance based on our audit. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS, *Government Auditing Standards*, and the Uniform Guidance will always detect material noncompliance when it exists. The risk of not detecting material noncompliance resulting from fraud is higher than for that resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Noncompliance with the compliance requirements referred to above is considered material if there is a substantial likelihood that, individually or in the aggregate, it would influence the judgment made by a reasonable user of the report on compliance about the County's compliance with the requirements of each major federal program as a whole.

In performing an audit in accordance with GAAS, *Government Auditing Standards*, and the Uniform Guidance, we:

- exercise professional judgment and maintain professional skepticism throughout the audit.
- identify and assess the risks of material noncompliance, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the County's compliance with the compliance requirements referred to above and performing such other procedures as we considered necessary in the circumstances.

- obtain an understanding of the County's internal control over compliance relevant to the audit in order to design audit procedures that are appropriate in the circumstances and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of the County's internal control over compliance. Accordingly, no such opinion is expressed.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and any significant deficiencies and material weaknesses in internal control over compliance that we identified during the audit.

Other Matters

Government Auditing Standards requires the auditor to perform limited procedures on the County's responses to the noncompliance findings identified in our compliance audit described in the accompanying schedule of findings and corrective action plan. The County's responses were not subjected to the other auditing procedures applied in the audit of compliance and, accordingly, we express no opinion on the responses.

Report on Internal Control Over Compliance

Our consideration of internal control over compliance was for the limited purpose described in the *Auditor's Responsibilities for the Audit of Compliance* section above and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies in internal control over compliance and therefore, material weaknesses or significant deficiencies may exist that were not identified. However, as discussed below, we did identify certain deficiencies in internal control over compliance that we consider to be material weaknesses.

A deficiency in internal control over compliance exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. *A material weakness in internal control over compliance* is a deficiency, or combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. *A significant deficiency in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance. We consider the deficiencies in internal control over compliance described in the accompanying schedule of findings as items 2022-001 and 2022-002, to be material weaknesses.

Our audit was not designed for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, no such opinion is expressed.

Government Auditing Standards requires the auditor to perform limited procedures on the County's responses to the internal control over compliance findings identified in our audit described in the accompanying schedule of findings and corrective action plan. The County's responses were not subjected to the other auditing procedures applied in the audit of compliance and, accordingly, we express no opinion on the responses.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of this testing based on the requirements of the Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

Report on Schedule of Expenditures of Federal Awards Required by the Uniform Guidance

We have audited the financial statements of the governmental activities, the business-type activities, the aggregate discretely presented component units, each major fund and the aggregate remaining fund information of Lorain County (the County) as of and for the year ended December 31, 2022, and the related notes to the financial statements, which collectively comprise the County's basic financial statements. We issued our unmodified report thereon dated June 30, 2023. Our report also refers to other auditors who audited the financial statements of the Murray Ridge Production Center, Inc., as described in our report on the County's financial statements. The financial statements of the Murray Ridge Production Center, Inc., were not audited in accordance with *Governmental Auditing Standards*. Our audit was conducted for purpose of forming opinions on the financial statements that collectively comprise the County's basic financial statements. We have not performed any procedures on the audited financial statements subsequent to June 30, 2023. The accompanying schedule of expenditures of federal awards is presented for purposes of additional analysis as required by the Uniform Guidance and is not a required part of the basic financial statements. The schedule is the responsibility of management and was derived from and relates directly to the underlying accounting and other records management used to prepare the basic financial statements. We subjected this schedule to the auditing procedures we applied to the basic financial statements. We also applied certain additional procedures, including comparing and reconciling this schedule directly to the underlying accounting and other records used to prepare the basic financial statements or to the basic financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the schedule of expenditures of federal awards is fairly stated in all material respects in relation to the basic financial statements taken as a whole.



Keith Faber
Auditor of State
Columbus, Ohio

February 27, 2024

LORAIN COUNTY

SCHEDULE OF FINDINGS
2 CFR § 200.515
DECEMBER 31, 2022

1. SUMMARY OF AUDITOR'S RESULTS

<i>(d)(1)(i)</i>	Type of Financial Statement Opinion	Unmodified
<i>(d)(1)(ii)</i>	Were there any material weaknesses in internal control reported at the financial statement level (GAGAS)?	No
<i>(d)(1)(ii)</i>	Were there any significant deficiencies in internal control reported at the financial statement level (GAGAS)?	No
<i>(d)(1)(iii)</i>	Was there any reported material noncompliance at the financial statement level (GAGAS)?	No
<i>(d)(1)(iv)</i>	Were there any material weaknesses in internal control reported for major federal programs?	Yes
<i>(d)(1)(iv)</i>	Were there any significant deficiencies in internal control reported for major federal programs?	No
<i>(d)(1)(v)</i>	Type of Major Programs' Compliance Opinion	Unmodified for all major programs except for Coronavirus State and Local Fiscal Recovery Funds, which we qualified.
<i>(d)(1)(vi)</i>	Are there any reportable findings under 2 CFR § 200.516(a)?	Yes
<i>(d)(1)(vii)</i>	Major Programs (list):	Highway Planning and Construction Cluster COVID-19 Emergency Rental Assistance (AL #21.023) COVID-19 Coronavirus State and Local Fiscal Recovery Funds (AL #21.027) Child Support Enforcement (AL #93.563) Adoption Assistance (AL #93.659)

LORAIN COUNTY
SCHEDULE OF FINDINGS
2 CFR § 200.515
DECEMBER 31, 2022
(CONTINUED)

1. SUMMARY OF AUDITOR'S RESULTS

<i>(d)(1)(viii)</i>	Dollar Threshold: Type A/B Programs	Type A: > \$1,846,888 Type B: all others
<i>(d)(1)(ix)</i>	Low Risk Auditee under 2 CFR § 200.520?	Yes

**2. FINDINGS RELATED TO THE FINANCIAL STATEMENTS
REQUIRED TO BE REPORTED IN ACCORDANCE WITH GAGAS**

None.

3. FINDINGS FOR FEDERAL AWARDS

1. Coronavirus State and Local Fiscal Recovery Funds - Subrecipient Agreements

Finding Number: 2022-001
Assistance Listing Number and Title: AL #21.027, Covid-19 Coronavirus State and Local Fiscal Recovery Funds
Federal Award Identification Number / Year: SLT-1282 / 2022
Federal Agency: U.S Department of Treasury
Compliance Requirement: Subrecipient Monitoring
Pass-Through Entity: N/A - Direct
Repeat Finding from Prior Audit? No

NONCOMPLIANCE AND MATERIAL WEAKNESS

2 CFR 1000.10 provides that, except for the deviations set forth elsewhere in this Part, the Department of Treasury adopts the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards set forth at 2 CFR Part 200.

2 CFR 200.332 states, in part, that all pass-through entities must:

- Ensure that every subaward is clearly identified to the subrecipient as a subaward and includes the information noted at 2 CFR 200.332(a) at the time of the subaward;
- Evaluate each subrecipient's risk of noncompliance with Federal statutes, regulations, and the terms and conditions of the subaward for purposes of determining the appropriate subrecipient monitoring, described in paragraphs (d) and (e) of 2 CFR 200.332;
- Consider imposing specific subaward conditions upon a subrecipient if appropriate as described in § 200.208;
- Monitor the activities of the subrecipient as necessary to ensure that the subaward is used for authorized purposes, in compliance with Federal statutes, regulations, and the terms and conditions of the subaward, and that the subaward performance goals are achieved. Pass-through entity monitoring of the subrecipient must include those items listed in 2 CFR 200.332(d);
- Verify every subrecipient is audited as required by Subpart F of 2 CFR 200.332 when it is expected that the subrecipient's Federal award expended equal or exceed the threshold set forth in 2 CFR 200.501;

LORAIN COUNTY

SCHEDULE OF FINDINGS
2 CFR § 200.515
DECEMBER 31, 2022
(CONTINUED)

3. FINDINGS FOR FEDERAL AWARDS

1. Coronavirus State and Local Fiscal Recovery Funds - Subrecipient Agreements (Continued)

- Consider whether the results of the subrecipient's audits, on-site reviews, or other monitoring indicate conditions that necessitate adjustments to the pass-through entity's own records; and
- Consider taking enforcement action against noncompliant subrecipients as described in 2 CFR 200.339 and in program regulations.

The County did not have written subrecipient agreements for three of three (100%) tested subrecipients of Coronavirus State and Local Fiscal Recovery Funds (AL #21.027). The County did not have the proper internal controls in place to verify that subawards were identified to the subrecipient nor that the subrecipients were evaluated for risk or their award activities were monitored. A subrecipient agreement is one method that would allow the County to support the performance of risk assessment, that every subaward is clearly identified to the subrecipient as a subaward and includes required federal award identification information, and to support the determination of and the completion of monitoring activities.

Failure to have proper oversight and training procedures over the County's divisions to ensure the implementation of subrecipient monitoring requirements can lead to weaknesses with internal controls and compliance over subrecipient monitoring, as well as risk that subrecipients are not aware that the award is a Federal award or that noncompliance is not identified by the County.

The County should implement policies and procedures to ensure that subrecipient agreements are in place for all subrecipients of Federal funding and monitoring procedures are properly performed for all subrecipients.

Official's Response:

With the assistance of the County Legal Team (Prosecutor Office) draft and maintain a procedural document laying out requirements and processes to ensure proper compliance with the regulations for ARPA subawards granted to subrecipients.

LORAIN COUNTY

SCHEDULE OF FINDINGS
2 CFR § 200.515
DECEMBER 31, 2022
(CONTINUED)

3. FINDINGS FOR FEDERAL AWARDS

2. Coronavirus State and Local Fiscal Recovery Funds - Quarterly Reporting

Finding Number:	2022-002
Assistance Listing Number and Title:	AL #21.027, Covid-19 Coronavirus State and Local Fiscal Recovery Funds
Federal Award Identification Number / Year:	SLT-1282 / 2022
Federal Agency:	U.S. Department of Treasury
Compliance Requirement:	Reporting
Pass-Through Entity:	N/A - Direct
Repeat Finding from Prior Audit?	No

NONCOMPLIANCE AND MATERIAL WEAKNESS

2 CFR 1000.10 provides that, except for the deviations set forth elsewhere in this Part, the Department of Treasury adopts the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards set forth at 2 CFR Part 200.

2 CFR 200.329(c)(1) states that non-Federal entities must submit performance reports at the interval required by the Federal awarding agency or pass-through entity to best inform improvements in program outcomes and productivity. Reports submitted quarterly must be due no later than 30 calendar days after the reporting period.

31 CFR 35.4(c) requires recipients, in part, during the period of performance, to provide the Secretary of the U.S. Department of Treasury periodic reports providing detailed accounting of the uses of funds, modifications to a State or Territory's tax revenue sources, and such other information as the Secretary may require for the administration of this section.

The U.S. Department of Treasury provided supplementary information in its interim final rule on reporting requirements for State and Local Fiscal Recovery Funds for 31 CFR Part 35 and provided further guidance in its User Guide: Treasury's Portal for Recipient Reporting (User Guide). The interim rule supplementary information, part VIII states that counties will be required to submit quarterly Project and Expenditure reports through the end of the award period on December 31, 2026. The Department of Treasury's User Guide provides, in part, that counties with a population that exceeds 250,000 residents must submit a Project and Expenditure Report by January 31, 2022 and then the last day of the month after the end of each quarter thereafter.

The County did not have proper internal controls in place to ensure the timely and accurate submission of the Project and Expenditure Reports. During testing of Project and Expenditure Reports for the Coronavirus State and Local Fiscal Recovery Funds (AL #21.027), we noted that:

- The County did not submit the Project and Expenditure Reports for the third and fourth quarters by the required deadlines of October 31, 2022 and January 31, 2023, respectively, due to technical difficulties upon submission, and did not contact the U.S. Department of Treasury for assistance with their technical difficulties until January 26, 2023; and
- The County excluded \$23,000 of expenditures from the second quarter Project and Expenditure Report

LORAIN COUNTY

SCHEDULE OF FINDINGS

2 CFR § 200.515

DECEMBER 31, 2022

(CONTINUED)

3. FINDINGS FOR FEDERAL AWARDS

2. Coronavirus State and Local Fiscal Recovery Funds - Quarterly Reporting (Continued)

Failure to have the proper controls in place to ensure the timely and accurate submission of the Project and Expenditure Reports could result in Treasury taking action against the County for failure to comply with programmatic requirements.

The County should implement and have controls in place to ensure the quarterly Project and Expenditure Reports are accurate and filed by the required due dates.

Official's Response:

Work with US Treasury Helpdesk to get previous quarterly reports open to be updated. Once access granted to edit, work to bring reporting up to date.



LORAIN COUNTY COMMISSIONERS

Michelle Hung

David J Moore

Jeff Riddell



LORAIN COUNTY

CORRECTIVE ACTION PLAN

2 CFR 200.511(c)

DECEMBER 31, 2022

Finding Number	Planned Corrective Action	Anticipated Completion	Responsible Contact Person
2022-001	With the assistance of the County Legal Team (Prosecutor Office) draft and maintain a procedural document laying out requirements and processes to ensure proper compliance with the regulations for ARPA subawards granted to subrecipients.	9/15/23	KC Saunders
2022-002	Work with US Treasury Helpdesk to get previous quarterly reports open to be updated. Once access granted to edit, work to bring reporting up to date.	10/01/23	KC Saunders

MENTAL HEALTH, ADDICTION AND RECOVERY SERVICES BOARD OF LORAIN COUNTY

STATEMENT OF REVENUES AND EXPENSES FY24

Unaudited

JULY 1, 2023 TO MARCH 31, 2024

	BUDGET		ACTUAL			
	AMENDED FY24 BUDGET	YEAR TO DATE BUDGET	YEAR TO DATE ACTUAL	MARCH 2024	VARIANCE	% OF VARIANCE
REVENUES						
Levy 0.6 mill 5-year renewal expires 12/31/22	\$ 3,861,364	\$ 3,861,364	\$ 3,741,130	\$ 1,895,492	\$ (120,234)	-3.1%
Levy 1.2 mill 10-year renewal expires 12/31/24	8,276,900	8,276,900	8,012,851	4,059,382	(264,049)	-3.2%
Local Grants	91,130	68,949	68,949	32,492	-	0.0%
State Allocations & Grants	2,804,176	2,032,981	2,032,981	78,406	-	0.0%
Federal Allocations & Grants	5,792,745	3,178,976	3,178,976	283,570	-	0.0%
Pass-Through Grants	1,016,390	806,337	806,337	-	-	0.0%
Integrated Services Partnership	-	-	66,760	-	66,760	100.0%
Capital Reimbursements	6,600,000	1,350,000	1,350,000	-	-	0.0%
Miscellaneous	189,190	92,496	74,697	6,811	(17,799)	-19.2%
TOTAL REVENUES	\$ 28,631,895	\$ 19,668,003	\$ 19,332,681	\$ 6,356,153	\$ (335,322)	-1.7%
EXPENSES						
Personnel - Salary & Benefits	\$ 2,180,000	\$ 1,600,023	\$ 1,448,874	\$ 222,334	\$ 151,149	9.4%
Operating	444,000	307,424	269,093	65,035	38,331	12.5%
Printing & Advertising	75,000	54,948	14,060	1,479	40,888	74.4%
Capital Outlay	40,000	-	-	-	-	0.0%
Crisis Receiving Center	8,350,286	788,806	788,806	307,639	-	0.0%
Auditor & Treasurer Fees - Levy	211,500	211,500	189,456	108,371	22,044	10.4%
Integrated Services Partnership	1,260,033	840,016	622,546	130,335	217,470	25.9%
Pass-Through Grants	1,016,390	806,337	806,337	-	-	0.0%
Agency & Community	2,722,333	1,695,780	1,141,693	230,763	554,087	32.7%
Network Agency Contracts	16,900,234	11,309,414	9,307,998	1,135,996	2,001,416	17.7%
TOTAL EXPENSES	\$ 33,199,776	\$ 17,614,248	\$ 14,588,863	\$ 2,201,952	\$ 3,025,385	17.2%
NET	\$ (4,567,881)	\$ 2,053,755	\$ 4,743,818	\$ 4,154,201	\$ 2,690,063	

Payroll	222,334
Report of Expenses	1,979,618
	2,201,952

MENTAL HEALTH, ADDICTION AND RECOVERY SERVICES BOARD OF LORAIN COUNTY

STATEMENT OF CASH POSITION FY24

Unaudited

JULY 1, 2023 TO MARCH 31, 2024

	AMENDED FY24 BUDGET	YEAR TO DATE ACTUAL
Board Levy Cash Balance - Beginning of Period	\$16,129,806	\$16,129,806
Board Levy Cash Balance - End of Period	\$14,094,988	\$21,429,340
Board Unrestricted Cash Balance - Beginning of Period	\$0	\$0
Board Unrestricted Cash Balance - End of Period	\$0	\$0
Local/State/Federal Allocations & Grants Cash Balance - Beginning of Period	\$1,236,810	\$1,236,810
Local/State/Federal Allocations & Grants Cash Balance - End of Period	\$30,043	\$1,236,880
Pass-Through Cash Balance - Beginning of Period	\$0	\$0
Pass-Through Cash Balance - End of Period	\$0	\$0
ISP Cash Balance Held by Board as Fiscal Agent - Beginning of Period	\$1,793,022	\$1,793,022
ISP Cash Balance Held by Board as Fiscal Agent - End of Period	\$532,989	\$1,237,236
Total Cash Balance - Beginning of Period	\$19,159,638	\$19,159,638
Total Cash Balance - End of Period	\$14,658,020	\$23,903,456
Net Difference	(\$4,501,618)	\$4,743,818

Board Levy Cash Balance		\$14,094,988
Reserve: Committed to Crisis Receiving Center Capital		(\$6,261,414)
Reserve: Committed to Crisis Receiving Center Operations for 5 yrs		(\$4,889,318)
Reserve: Capital Improvements		(\$60,000)
Reserve: Sick/Vacation Payout at Retirement or Separation		(\$291,624)
Reserve: Cash Flow		(\$1,800,000)
Board Levy Unobligated Cash Balance		\$792,632

Allocations & Grants Supporting Schedule

	<u>FY24 BUDGET</u>	<u>FY24 RECEIVED</u>
Local Grants:		
Hold for Unallocated	1,270	-
Suicide Prevention Coalition	2,050	2,050.00
OACBHA Week of Appreciation	1,680	1,680.00
Collective Impact	86,130	65,219.36
	<u>91,130</u>	<u>68,949.36</u>
State Allocations & Grants:		
Access to Wellness Recovery Supports	201,300	-
Community Innovations - Community Medication (Psychotropic Drug)	100,000	60,906.00
Continuum of Care - Board Elected and Additional Community Investment	88,631	88,631.00
Continuum of Care - Community Investments (Both MH & SUD)	366,184	270,888.00
Continuum of Care - Community Investments (Central Pharmacy)	23,000	17,079.00
Continuum of Care - Community Investments (MH Portion)	889,208	666,906.00
Continuum of Care - Community Investments (SUD Portion)	139,646	104,734.50
Continuum of Care - Crisis Flexible Funds	146,025	146,025.00
Continuum of Care - Crisis Infrastructure Funds	50,000	50,000.00
Continuum of Care - NEO Collaborative Jail Program	70,000	35,000.00
Criminal Justice Services - Addiction Treatment Program (ATP)	330,000	247,500.00
Criminal Justice Services - Community Transition Program (CTP)	90,000	67,500.00
Criminal Justice Services - Forensic Monitoring	7,850	5,887.50
Prevention & Wellness - Early Intervention	55,000	55,000.00
Prevention & Wellness - Prevention Services Evidence Based Practice (EBP)	24,800	24,800.00
Prevention & Wellness - Primary Prevention	22,685	17,013.75
Prevention & Wellness - Project AWARE	50,000	50,000.00
Problem Casino/Gambling Addiction - SUD Gambling Addiction Prevention/Treatment	98,947	74,210.25
Recovery Housing Operating Allocation	50,900	50,900.00
	<u>2,804,176</u>	<u>2,032,981.00</u>
Federal Allocations & Grants:		
Housing and Urban Development (HUD) Grant - Shelter + Care	465,439	280,825.92
Hospital Access Program	181,600	181,600.00
Mental Health Block Grant	172,144	129,108.00
Mental Health Court Grant	7,500	7,500.00
Mobile Response and Stabilization Services (MRSS)	50,000	-
Projects for Assistance in Transition from Homelessness (PATH) Grant	92,363	45,181.28
State Opioid & Stimulant Response (SOSR) Grant - Local Project Treatment and Recovery (Jul-Sep FFY23) SOS 3.0	738,019	738,018.61
State Opioid & Stimulant Response (SOSR) Grant - Local Project Treatment and Recovery (Oct-Sep FFY24) SOS 3.2	2,255,152	577,543.20
State Opioid Response (SOR) Grant - Care Teams and Education Media Campaign	62,964	62,964.47
State Opioid & Stimulant Response (SOS) Grant - Overdose Awareness Day	2,652	2,652.14
Substance Abuse Block Grant (SABG) - Adolescent Treatment Services	276,573	48,179.33
Substance Abuse Prevention and Treatment (SAPT) Block Grant - Prevention	295,762	221,821.50
Substance Abuse Prevention and Treatment (SAPT) Block Grant - Treatment	743,682	557,761.50
Title XX Grant	148,895	100,820.00
Treatment Access for Adults with Alcohol Use Disorder	300,000	225,000.00
	<u>5,792,745</u>	<u>3,178,975.95</u>
Pass-Through Grants:		
Lorain County Domestic Relations Family and Juvenile Drug Court	82,616	18,506.39
Subsidized Docket Support - Specialized Docket Payroll Subsidy Project	350,000	350,000.00
Substance Abuse Block Grant (SABG) - Circle for Recovery	100,000	75,000.00
Women's Treatment & Recovery	483,774	362,830.50
	<u>1,016,390</u>	<u>806,336.89</u>

Agency & Community Supporting Schedule

	Allocation/Grant FY24 Budget	Levy FY24 Budget	TOTAL FY24 BUDGET	Allocation/Grant FY24 Expense	Levy FY24 Expense	TOTAL FY24 EXPENSE
Supplies/Materials/Other	-	4,695	4,695	-	1,583.10	1,583.10
Contractual/Purchased Services (Trainings, Consultations, Housing Inspections etc.)	-	89,307	89,307	-	17,846.23	17,846.23
Pooled Agency Services (Bilingual Staff Incentive, Internship, Interpreting, Youth Wrap)	-	28,500	28,500	-	2,056.42	2,056.42
Bridge Pointe Commons - Front Desk and Security	-	168,372	168,372	-	107,490.68	107,490.68
Lorain County Sheriff Jail Re-Entry Coordinator	79,701	-	79,701	47,586.98	-	47,586.98
Transport Services - LifeCare	-	25,000	25,000	-	4,401.92	4,401.92
Adult Inpatient Local Bed Days (Mercy) - Hospital Access Program	181,600	10,000	191,600	132,800.00	-	132,800.00
Indigent/Youth Inpatient Local Bed Days (Various other than Mercy)	-	70,000	70,000	-	8,000.00	8,000.00
Respite (Blessing House)	-	5,000	5,000	-	5,000.00	5,000.00
Youth Led Suicide "You Belong" Initiative	-	40,000	40,000	-	33,274.70	33,274.70
Ad Hoc Disparities	-	20,000	20,000	-	17,000.00	17,000.00
The Confess Project	8,000	21,256	29,256	8,000.00	15,749.00	23,749.00
FCFC Funding	-	40,000	40,000	-	40,000.00	40,000.00
Housing Needs Assessment	-	25,000	25,000	-	-	-
Lorain Housing Project Capital Allocation	-	250,000	250,000	-	-	-
Primary Purpose Capital Allocation	-	66,263	66,263	-	-	-
Hold for Unallocated	1,267	-	1,267	-	-	-
OACBHA Week of Appreciation	1,680	-	1,680	1,099.21	-	1,099.21
NAMI - CIT - NEOMED	3,310	-	3,310	-	-	-
Community Collective Impact Grant	86,134	6,787	92,921	32,977.50	6,787.45	39,764.95
Suicide Prevention Coalition	2,675	-	2,675	60.00	-	60.00
Opiate Outreach	56,000	-	56,000	20,860.78	-	20,860.78
Addiction Treatment Program (ATP)	353,231	-	353,231	227,649.86	-	227,649.86
Prevention & Wellness	312,419	-	312,419	39,212.40	-	39,212.40
Psychotropic Drug Program	100,000	20,000	120,000	60,585.00	4,848.12	65,433.12
Central Pharmacy	8,000	-	8,000	2,400.00	-	2,400.00
Access to Wellness Recovery Supports	311,898	-	311,898	88,768.76	-	88,768.76
COVID Mitigation	32,098	-	32,098	32,097.33	-	32,097.33
Mental Health Court	7,500	-	7,500	2,436.29	-	2,436.29
SOS 3.0 (Oct-Sep FFY23)	72,992	-	72,992	72,991.86	-	72,991.86
SOS 3.2 (Oct-Sep FFY24)	148,032	-	148,032	42,511.95	-	42,511.95
SOSR Care Teams and Education Media	62,963	-	62,963	62,964.47	-	62,964.47
SOSR Overdose Awareness Day	2,653	-	2,653	2,652.14	-	2,652.14
	1,832,153	890,180	2,722,333	877,654.53	264,037.62	1,141,692.15

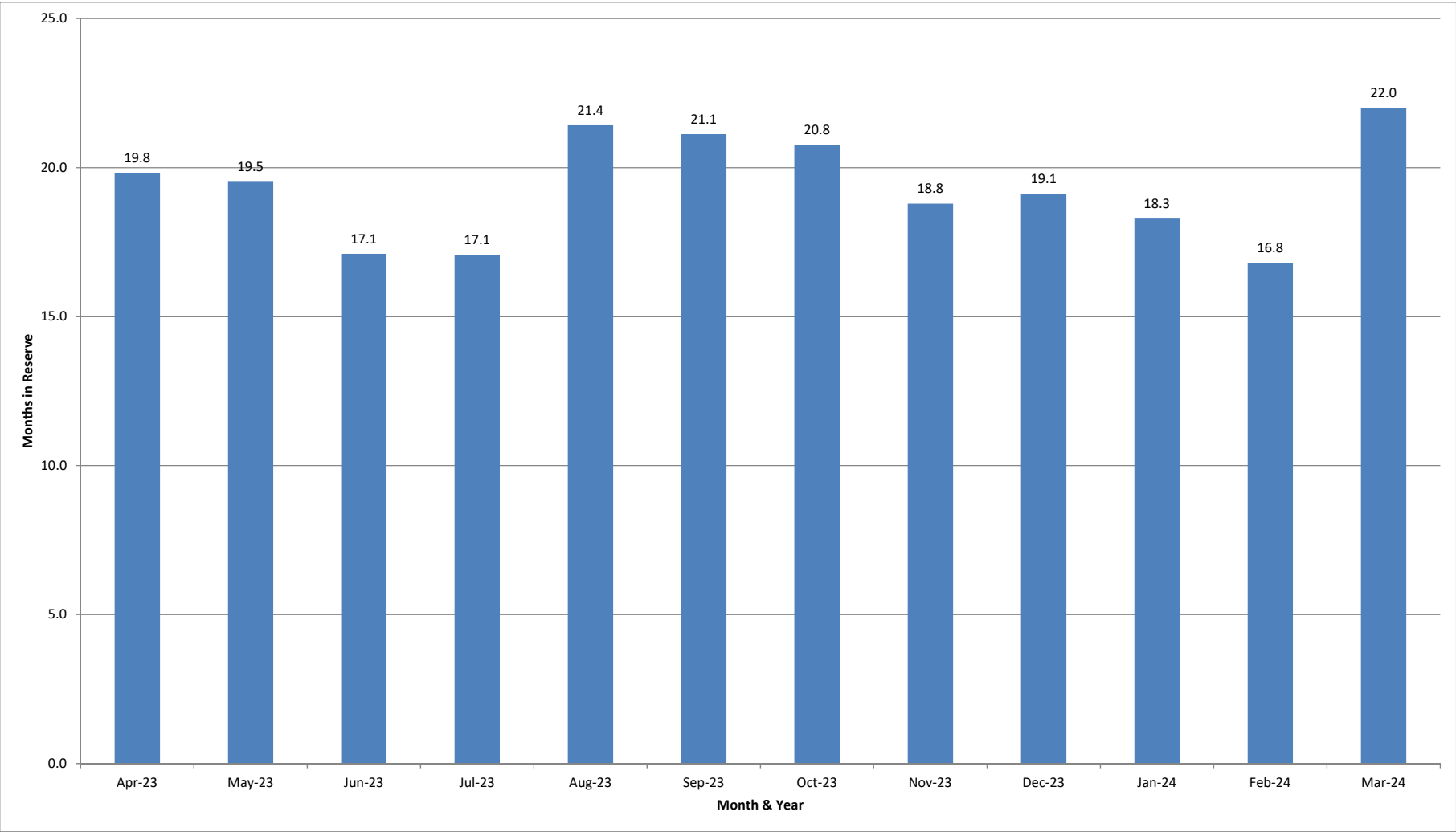
Network Agency Contracts Supporting Schedule

	Allocation/Grant FY24 Budget	Levy FY24 Budget	TOTAL FY24 BUDGET	Allocation/Grant FY24 Expense	Levy FY24 Expense	TOTAL FY24 EXPENSE
Applewood	291,573	701,206	992,779	47,211.05	426,979.63	474,190.68
Beech Brook	-	37,200	37,200	-	21,881.00	21,881.00
Bellefaire JCB	-	357,012	357,012	-	61,116.80	61,116.80
Big Brothers Big Sisters	79,574	40,226	119,800	59,850.00	30,000.00	89,850.00
Catholic Charities	-	194,000	194,000	-	59,544.24	59,544.24
El Centro	18,600	270,218	288,818	12,400.00	153,465.95	165,865.95
Far West	-	165,014	165,014	-	77,745.12	77,745.12
Gathering Hope House	-	375,000	375,000	-	367,329.84	367,329.84
LCADA Way	1,265,790	25,000	1,290,790	604,374.43	7,500.00	611,874.43
Let's Get Real	426,857	29,000	455,857	228,642.50	-	228,642.50
Lorain County Health & Dentistry	221,541	-	221,541	137,131.18	-	137,131.18
Lorain Urban Minority Alcoholism and Drug Abuse Outreach Program (UMADAOP)	157,864	-	157,864	111,742.89	-	111,742.89
Lutheran Metropolitan Ministry - Guardianship Services	-	49,000	49,000	-	24,500.00	24,500.00
MedMark Treatment Centers (Baymark Health)	144,174	-	144,174	100,594.62	-	100,594.62
NAMI	-	140,000	140,000	-	105,000.00	105,000.00
Neighborhood Alliance	154,931	27,455	182,386	87,304.54	16,626.67	103,931.21
New Directions (Crossroads Health)	-	57,000	57,000	-	47,248.35	47,248.35
New Sunrise	465,439	348,833	814,272	282,825.92	170,195.40	453,021.32
NORA	207,286	-	207,286	96,916.00	-	96,916.00
Nord Center	2,119,516	4,489,328	6,608,844	1,529,566.98	2,934,689.03	4,464,256.01
Ohio Guidestone	42,106	534,520	576,626	12,475.07	296,980.04	309,455.11
Pathways	-	65,000	65,000	-	44,787.88	44,787.88
Place to Recover Training and Resource Center	594,629	-	594,629	320,533.23	-	320,533.23
Primary Purpose	200,000	-	200,000	-	-	-
Road to Hope House	625,511	-	625,511	474,111.85	-	474,111.85
Safe Harbor/Genesis House	-	170,000	170,000	-	127,500.00	127,500.00
Silver Maple Recovery	344,524	-	344,524	174,932.42	-	174,932.42
Stella Maris	111,800	-	111,800	54,296.34	-	54,296.34
	<u>7,471,715</u>	<u>8,075,012</u>	<u>15,546,727</u>	<u>4,334,909.02</u>	<u>4,973,089.95</u>	<u>9,307,998.97</u>
<i>Reserves</i>	-	212,810	212,810			
<i>Unallocated</i>	493,897	646,800	1,140,697			
	<u>7,965,612</u>	<u>8,934,622</u>	<u>16,900,234</u>			

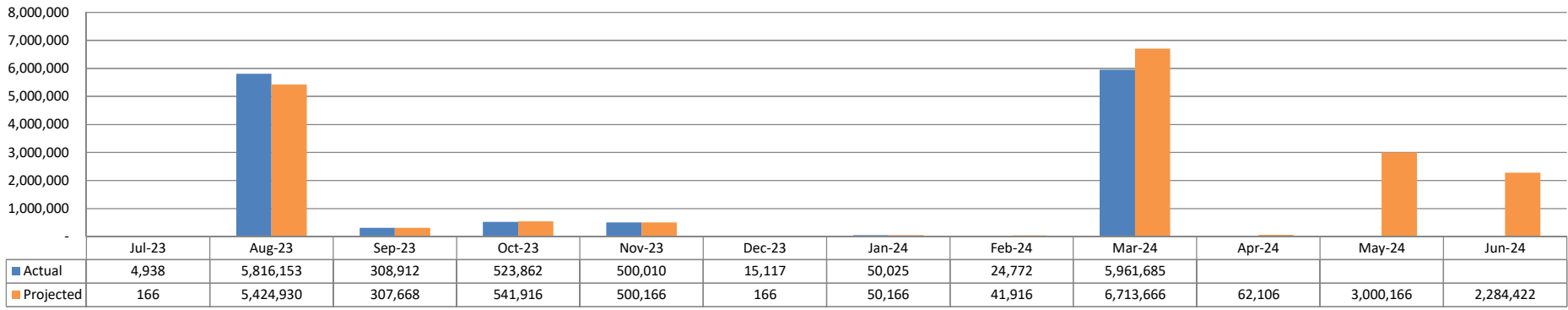
Pass-Through Grants:

Lorain County Domestic Relations Family and Juvenile Drug Court	82,616	-
Subsidized Docket Support - Specialized Docket Payroll Subsidy Project	350,000	350,000.00
Lorain UMADAOP - Substance Abuse Block Grant (SABG) - Circle for Recovery	100,000	50,000.00
The LCADA Way - Women's Treatment & Recovery	483,774	362,830.50
	<u>1,016,390</u>	<u>762,830.50</u>

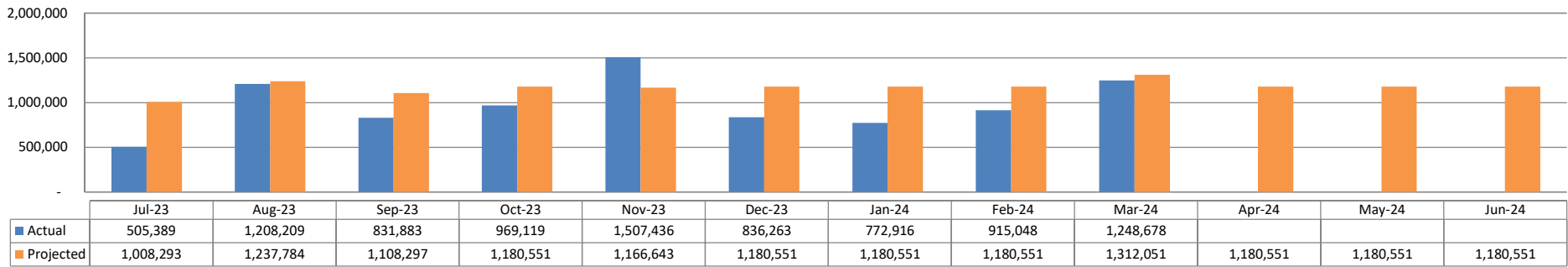
Levy Funds - Months in Reserve (Last 12 Months) - Supporting Table



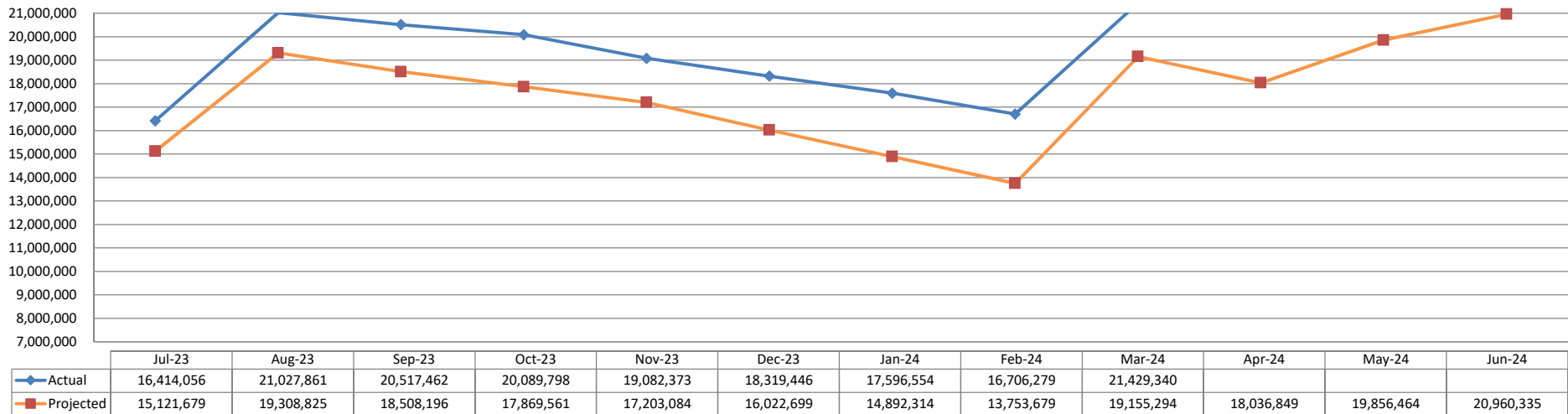
REVENUES



EXPENSES



CASH FLOW



**Variance Analysis
March 2024**

REVENUES:

Levy – (\$120,234) & (3.1%) and (\$264,049) & (3.2%)

- Amounts for homestead and rollback not yet received.

Local Grants – No Variance

- Please refer to Allocations & Grants Supporting Schedule for detail.

State Allocations & Grants – No Variance

- Please refer to Allocations & Grants Supporting Schedule for detail.

Federal Allocations & Grants – No Variance

- Please refer to Allocations & Grants Supporting Schedule for detail.

Pass-Through Grants – No Variance

- Please refer to Allocations & Grants Supporting Schedule for detail.

Integrated Services Partnership – \$66,760 & 100.0%

- Reimbursement from FY22 and FY23 expenses

Capital Reimbursements – No Variance

Miscellaneous – (\$17,799) & (19.2%)

- Reimbursement for ISP Director less than budgeted due to full-time position remains unfilled.

**Variance Analysis
March 2024**

EXPENSES:

Personnel-Salary & Benefits – \$151,149 & 9.4%

- Personnel expenses under budget due to current unfilled but budgeted positions and healthcare expense paid quarterly.

Operating – \$38,331 & 12.5%

- Operating expenses are under budget and are being monitored continuously by the Chief of Business Operations.

Printing & Advertising – \$40,888 & 74.4%

- Printing & Advertising expenses are under budget and are being monitored continuously by the Communications & Community Relations Director, as well as, the Chief of Business Operations.

Capital Outlay – No Variance

Crisis Receiving Center – No Variance

Auditor & Treasurer Fees-Levy – \$22,044 & 10.4%

- Levy fees for homestead and rollback not yet accounted for.

Integrated Services Partnership \$217,470 & 25.9%

- This variance results from the timing of billings from placement agencies and the number of children in care.

Pass-Through Grants – No Variance

Agency & Community – \$554,087 & 32.7%

- Please refer to Agency & Community Supporting Schedule for detailed breakdown.

Network Agency Contracts – \$2,001,416 & 17.7%

- Please refer to Network Agency Contracts Supporting Schedule for detailed breakdown.

MENTAL HEALTH, ADDICTION AND RECOVERY SERVICES BOARD OF LORAIN COUNTY

LISTING OF EXPENSES MARCH 2024

Warrant#	Chk Date	Inv Date	Journal Description/Payee Name	Amount
OPERATING				
5082555	12-MAR-24	04-MAR-24	FRIENDS SERVICE CO INC DBA FRIENDSOFFICE:SUPPLIES - INK & PAD - FEB & MAR 24 *2024	828.05
5084628	25-MAR-24	15-MAR-24	FRIENDS SERVICE CO INC DBA FRIENDSOFFICE:SUPPLIES - PAPER, TAPE, FLAGS & PROTECTORS - MAR 2024	157.99
5083615	19-MAR-24	16-FEB-24	GERGELY'S MAINTENANCE KING:JANITORIAL SUPPLIES FEB 24 *2024	83.79
5084856	25-MAR-24	27-FEB-24	JOHNSON, MARK R:MHARS 3340	5.74
5083622	19-MAR-24	05-MAR-24	LORAIN COUNTY MENTAL HEALTH BOARD:SUPPLIES - COSTCO - COFFEE & WATER - MAR 24 *2024	43.65
5084637	25-MAR-24	14-MAR-24	LORAIN COUNTY MENTAL HEALTH BOARD:SUPPLIES - GFS - CANDY FOR MHFA TRAINING - MAR 2024	14.99
5083621	19-MAR-24	06-MAR-24	LORAIN COUNTY MENTAL HEALTH BOARD:SUPPLIES - GFS - COFFEE CREAM & SUGAR - MAR 24 *2024	18.24
5085046	26-MAR-24	15-MAR-24	LORMET COMMUNITY FEDERAL CREDIT UNION:MHARS 3340	12.99
5083089	14-MAR-24	23-FEB-24	PROFESSIONAL ELECTRIC PRODUCTS CO PEPKO:MHARS 2024001407	1,588.80
5083916	20-MAR-24	05-MAR-24	WHITE HOUSE ARTESIAN SPRINGS INC:SUPPLIES - WATER - 03/05/2024 *2024	33.00
			SUPPLIES/MATERIALS	<u>2,787.24</u>
5082552	12-MAR-24	16-FEB-24	CDW LLC:ADOBE SUBSCRIPTION RENEWAL FEB 24 *2024	2,135.42
5083616	19-MAR-24	29-FEB-24	GREAT LAKES COMPUTER CORP:COMP SVCS USER LICENSES FEES FEB 2024	168.00
5083617	19-MAR-24	01-MAR-24	GREAT LAKES COMPUTER CORP:CONTR SVCS MICROSOFT LICENSES MAR 24 *2024	298.30
5082212	08-MAR-24	28-NOV-23	MARKET VISION PARTNERS INC:ACCESS TO RENTELLECT RENT BASED SOFTWARE 1/1-12/31/2024 *2024	550.00
5083908	20-MAR-24	07-MAR-24	QUALTRICS LLC:CONTR SVCS SOFTWARE SYSTEM ANNUAL THRU 10/30/24 *2024	26,460.00
5081854	06-MAR-24	14-FEB-24	VAKERICS, JOHANNA C:MHARS 3340	42.58
5084879	25-MAR-24	13-MAR-24	VAKERICS, JOHANNA C:MHARS 3340	21.29
			COMPUTER SYSTEM SOFTWARE	<u>29,675.99</u>
5084844	25-MAR-24	28-FEB-24	CIESLAK, LAUREN M:MHARS 3340	130.38
5084853	25-MAR-24	23-FEB-24	HINKLE, JEANETTE:MHARS 3340	25.52
5084854	25-MAR-24	23-FEB-24	HINKLE, JEANETTE:MHARS 3340	14.41
5081854	06-MAR-24	14-FEB-24	VAKERICS, JOHANNA C:MHARS 3340	13.92
5084879	25-MAR-24	13-MAR-24	VAKERICS, JOHANNA C:MHARS 3340	16.53
5084882	25-MAR-24	19-MAR-24	WILBERT, JOSEPH D:MHARS 3340	25.52
5084886	25-MAR-24	27-FEB-24	WYKRENT, CARRIE L:MHARS 3340	43.50
			GAS MILEAGE REIMBURSEMENT	<u>269.78</u>
5085046	26-MAR-24	15-MAR-24	LORMET COMMUNITY FEDERAL CREDIT UNION:MHARS 3340	577.99
			EQUIPMENT	<u>577.99</u>
5082227	08-MAR-24	29-FEB-24	US BANK NATIONAL ASSOCIATION:LEASING EQUIPMENT 2/24-3/24/2024 *2024	898.00
			EQUIPMENT LEASE	<u>898.00</u>
5082546	12-MAR-24	29-FEB-24	ACCESS INFORMATION MANAGEMENT CORPORATION DBA ACCESS:CONTR SVCS STORAGE FEES MAR 24	259.49
5084629	25-MAR-24	15-MAR-24	GREAT LAKES COMPUTER CORP:CONTR SVCS COMP SUPPORT SVCS 4/15-7/14/2024	2,700.00
5082207	08-MAR-24	29-FEB-24	GREAT LAKES COMPUTER CORP:CONTR SVCS STORAGE FEES FEB 2024	650.00
5083904	20-MAR-24	08-MAR-24	MHOBAN SERVICES LLC:CONTR SVCS PEST CONTROL BOTH BLDGS 3/8/24 *2024	230.00
			CONTRACTUAL/PURCHASED SERVICES	<u>3,839.49</u>
5085009	26-MAR-24	08-MAR-24	CELLCO PARTNERSHIP DBA VERIZON WIRELESS:MHARS 3340	668.88
5083756	19-MAR-24	01-MAR-24	CHARTER COMMUNICATIONS HOLDINGS LLC:MHARS 3340	379.00
5085012	26-MAR-24	14-MAR-24	CHARTER COMMUNICATIONS HOLDINGS LLC:MHARS 3340	595.00
5082771	13-MAR-24	01-MAR-24	CITY OF LORAIN UTILITIES DEPARTMENT:MHARS 3340	37.24
5082776	13-MAR-24	29-FEB-24	COLUMBIA GAS OF OHIO INC:MHARS 3340	52.18
5083758	19-MAR-24	12-MAR-24	COLUMBIA GAS OF OHIO INC:MHARS 3340	37.68
5083762	19-MAR-24	07-MAR-24	ELYRIA PUBLIC UTILITIES:MHARS 3340	20.08
5083765	19-MAR-24	11-MAR-24	OHIO EDISON:MHARS 3340	592.81
5083766	19-MAR-24	12-MAR-24	OHIO EDISON:MHARS 3340	1,066.79
5083770	19-MAR-24	11-MAR-24	OHIO EDISON:MHARS 3340	103.26
			UTILITIES	<u>3,552.92</u>
5082560	12-MAR-24	28-FEB-24	LORAIN COUNTY PROSECUTOR:PROF SVCS JAN-MAR 24 *2024	4,800.00
5082566	12-MAR-24	29-JAN-24	SHORR, RANDALL B:PROF SVCS - LEGAL - AUG-NOV 23 *2023	8,040.00
			PROFESSIONAL SERVICES	<u>12,840.00</u>
5082203	08-MAR-24	04-FEB-24	COZART, LEWIS W DBA COZY CONNECTION:REPAIRS & MAINT ALC CLEANING - FEB 24 *2024	200.00
5082550	12-MAR-24	01-MAR-24	C4AC LLC:MAINT SVCS CLEANING SVCS MAR 2024	520.00
5083629	19-MAR-24	01-MAR-24	SCHINDLER ELEVATOR CORP:ELEVATOR MAINTENANCE CONTRACT 3/1/24-2/28/25 *2024	4,652.86
			MAINTENANCE	<u>5,372.86</u>
5084665	25-MAR-24	11-MAR-24	YOUNG INVESTMENTS INC:LABOR & MATERIAL - GATHERING HOPE - MAR 2024	158.70
			REPAIR	<u>158.70</u>
5082218	08-MAR-24	22-JAN-24	POGORELC, ROBERT J JR DBA POGIE'S CATERING LLC:OTHER EXP - FOOD FOR BOARD & STAFF EVENT -	820.00
5083900	20-MAR-24	13-MAR-24	LORAIN COUNTY COMMISSIONERS:OTHER EXPNS-DRUG TEST-HUPPIR, JOSEPH - FEB 24 *2024	65.00
5084657	25-MAR-24	20-MAR-24	FLIGNER ENTERPRISES INC:OTHER EXP- FOOD FOR LCCRC LAW ENFORCEMENT WORKGROUP 3/20/2024	222.48
5084878	25-MAR-24	23-JAN-24	URBIN, DANIEL T:MHARS 3340	55.97
5085047	26-MAR-24	15-MAR-24	LORMET COMMUNITY FEDERAL CREDIT UNION:MHARS 3340	124.46
			OTHER	<u>1,287.91</u>

MENTAL HEALTH, ADDICTION AND RECOVERY SERVICES BOARD OF LORAIN COUNTY

LISTING OF EXPENSES MARCH 2024

Warrant#	Chk Date	Inv Date	Journal Description/Payee Name	Amount
5084627	25-MAR-24	11-MAR-24	COALITION ON HOMELESSNESS AND HOUSING IN OHIO:ANNUAL MEMBERSHIP DUES 4/1/2024-3/31/2025	650.00
5084654	25-MAR-24	25-JAN-24	LEADERSHIP LORAIN COUNTY:MEMBER DUES REBECCA JONES - 6 MONTHS - JAN 2024	250.00
			DUES	<u>900.00</u>
5084841	25-MAR-24	16-FEB-24	BARON, PEGGY A.:MHARS 3340	314.90
5084845	25-MAR-24	05-MAR-24	DOUD, MICHAEL K:MHARS 3340	192.24
5084856	25-MAR-24	27-FEB-24	JOHNSON, MARK R:MHARS 3340	145.59
5084857	25-MAR-24	27-FEB-24	JOHNSON, MARK R:MHARS 3340	110.14
5084860	25-MAR-24	15-MAR-24	MASTNEY, JINX L:MHARS 3340	14.73
5084873	25-MAR-24	13-MAR-24	ROBERTSON, JANE A:MHARS 3340	1,019.85
5085047	26-MAR-24	15-MAR-24	LORMET COMMUNITY FEDERAL CREDIT UNION:MHARS 3340	360.00
			TRAVEL	<u>2,157.45</u>
5081846	06-MAR-24	14-FEB-24	DIVIS, AMANDA B:MHARS 3340	358.75
5084841	25-MAR-24	16-FEB-24	BARON, PEGGY A.:MHARS 3340	358.75
			STAFF TRAINING	<u>717.50</u>
			TOTAL OPERATING	<u><u>65,035.43</u></u>
PRINTING & ADVERTISING				
5082559	12-MAR-24	25-SEP-23	LORAIN COUNTY PRINTING & PUBLISHING:CRISIS CENTER NOTICE TO CONTRACTORS - SEP 23 *2023	1,479.21
			TOTAL PRINTING & ADVERTISING	<u><u>1,479.21</u></u>
CRISIS RECEIVING CENTER				
5081308	04-MAR-24	16-FEB-24	CITY OF LORAIN:MHARS 2024001470	27,871.59
5081309	04-MAR-24	20-FEB-24	CITY OF LORAIN:MHARS 2024001472	12,767.60
5081310	04-MAR-24	20-FEB-24	CITY OF LORAIN:MHARS 2024001471	12,575.00
5082217	08-MAR-24	19-FEB-24	PERSPECTUS ARCHITECTURE LLC:PROF SVCS ARCH & DESIGN JAN 24 *2024	9,410.80
5082556	12-MAR-24	19-FEB-24	HILL INTERNATIONAL INC:CRIC PROJECT 1/1/24-1/27/24 *2024	8,500.00
5082565	12-MAR-24	04-MAR-24	PANZICA CONSTRUCTION COMPANY:LCCRC PROJECT - TOTAL EARNED LESS RETAINANGE THRU 1/31/24	231,386.44
5083897	20-MAR-24	11-MAR-24	CTL ENGINEERING INC:CRIC INSPECTION TESTING SVCS - THRU FEB 24 *2024	5,128.00
			TOTAL CRISIS RECEIVING CENTER	<u><u>307,639.43</u></u>
AUDITOR & TREASURER FEES - LEVY				
03-22-24 2024 RE	22-MAR-24		FEB 2024 DEL ADVERTING RE/PU SETTLEMENT	62.20
03-22-24 2024 RE	22-MAR-24		FEB 2024 LBCC EXPENSE	557.61
03-22-24 2024 RE	22-MAR-24		AUDITOR FEES	11,754.09
03-22-24 2024 RE	22-MAR-24		DRETAC FEES	13,976.89
03-22-24 2024 RE	22-MAR-24		FEB 2024 DRETAC LAND BANK	13,976.89
03-22-24 2024 RE	22-MAR-24		TREASURER FEES	14,483.15
03-22-24 2024 RE	22-MAR-24		REAL ESTATE ASSESSMENT FEES	53,559.71
			TOTAL AUDITOR & TREASURER FEES - LEVY	<u><u>108,370.54</u></u>
INTEGRATED SERVICES PARTNERSHIP				
5083607	19-MAR-24	06-MAR-24	BELLEFAIRE JEWISH CHILDRENS BUREAU:AGENCY SVCS JOP SVCS FEB 24 *2024	21,557.99
5083608	19-MAR-24	06-MAR-24	CATHOLIC CHARITIES CORPORATION:AGENCY SVCS PATIENT CARE MENTORING FEB 24 GOSH *2024	2,689.50
5083896	20-MAR-24	29-FEB-24	CORNELL ABRAXAS GROUP INC:ISP PLACEMENT SVCS FEB 24 *2024	15,312.11
5083613	19-MAR-24	31-DEC-23	CUMBERLAND HOSPITAL LLC:ISP CLIENT PLACEMENT SVCS DEC 23 *2023	25,885.00
5083612	19-MAR-24	04-JAN-24	CUMBERLAND HOSPITAL LLC:ISP CLIENT PLACEMENT SVCS JAN 24 *2024	2,505.00
5082205	08-MAR-24	14-FEB-24	DONALD J HUPP JR:ISP DIRECTOR SHADOWING SVCS - 02/14/2024 -FEB *2024	210.00
5083903	20-MAR-24	03-MAR-24	LU, MENG.:ANCILLARY SVCS COUNSELING FEB 24 *2024	500.00
5082213	08-MAR-24	27-FEB-24	MEDINA CREATIVE ACCESSIBILITY:ISP FAMILY STABILITY - RIDING SESSIONS - SPRING 2024	475.00
5082221	08-MAR-24	01-FEB-24	REFLECTIONS GROUP HOME LLC:ISP PLACEMENT SVCS - 1/18/24-1/31/24 *2024	25,200.00
5083909	20-MAR-24	01-MAR-24	REFLECTIONS GROUP HOME LLC:ISP PLACEMENT SVCS - FEB 24 *2024	36,000.00
			TOTAL INTEGRATED SERVICES PARTNERSHIP	<u><u>130,334.60</u></u>
AGENCY & COMMUNITY				
5083888	20-MAR-24	12-MAR-24	AK VELEZ LLC DBA SUPERPRINTER:SUD OPIATE OUTREACH B208 - MED SAFE-YELLOW - 3/12/24 *2024	50.00
5082547	12-MAR-24	10-FEB-24	AK VELEZ LLC DBA SUPERPRINTER:SUD OPIATE OUTREACH B208 - PEER SPEC SUPPORT BOOKLET FEB *2024	600.00
5083889	20-MAR-24	26-FEB-24	AKINFOSILE, MAYA:TRAUMA-INFORMED TRAINING FEB 24 *2024	300.00
5084626	25-MAR-24	18-MAR-24	BIG BROTHERS/BIG SISTERS OF LORAIN COUNTY:COVID MITIGATION FUNDING - MAR 2024	1,712.64
5083610	19-MAR-24	28-FEB-24	CITY OF ELYRIA:SOS 3.2 - OPIOID OUTREACH EPD QRT FEB 24 *2024	200.00
5083894	20-MAR-24	07-MAR-24	CITY OF LORAIN:SOS 3.2 OPIOID OUTREACH LPD QRT FEB 24 *2024	450.12
5083895	20-MAR-24	04-OCT-23	COLORS+ DBA COLORS PLUS:SAFEZONE TRAINING 9/15/2023 *2023	300.00
5082204	08-MAR-24	13-FEB-24	DIANA SANTANTONIO EDS AND ASSOCIATES:CONTR SVCS ATP TREATMENT SVCS JAN 24 *2024	8,489.33
5082553	12-MAR-24	29-FEB-24	EDEN INC:BRIDGE POINTE COMMONS SECURITY & FRONT DESK REIMBURSEMENT FEB 24	15,165.17
5084653	25-MAR-24	15-MAR-24	EDEN INC:CONTR SVCS INSPECTIONS FEB 2024	382.14
5083898	20-MAR-24	04-MAR-24	EL CENTRO DE SERVICIOS SOCIALES INC:INTERPRETATION SVCS FEB 24 *2024	197.27

MENTAL HEALTH, ADDICTION AND RECOVERY SERVICES BOARD OF LORAIN COUNTY

LISTING OF EXPENSES MARCH 2024

Warrant#	Chk Date	Inv Date	Journal Description/Payee Name	Amount
5082208	08-MAR-24	13-FEB-24	LET'S GET REAL INC DBA LET'S GET REAL INC:CONTR SVCS ATP PEER SUPPORT JAN 24 *2024	6,419.50
5082210	08-MAR-24	07-FEB-24	LET'S GET REAL INC DBA LET'S GET REAL INC:QRT CONFERENCE TRAVEL REIMBURSEMENT - 1/23-1/26/24	401.09
5083618	19-MAR-24	19-DEC-23	LIFECARE AMBULANCE INC:CONTR SVCS CLIENT TRANSPORTATION DEC 23 *2023	745.69
5083619	19-MAR-24	19-FEB-24	LIFECARE AMBULANCE INC:CONTR SVCS CLIENT TRANSPORTATION FEB 24 *2024	509.71
5082558	12-MAR-24	09-FEB-24	LORAIN COUNTY ALCOHOL & DRUG ABUSE SERVICES INC DBA THE LCADA WAY:CONTR SVCS ATP	1,984.75
5084636	25-MAR-24	13-MAR-24	LORAIN COUNTY BOARD OF EDUCATION DBA EDUCATIONAL SERVICE CENTER OF LORAIN	9,917.95
5083901	20-MAR-24	11-MAR-24	LORAIN COUNTY DRUG TASK FORCE:SOS 3.2 - OPIOID OUTREACH LCSD QRT FEB 24 *2024	200.00
5084658	25-MAR-24	18-MAR-24	LORAIN COUNTY SAFE HARBOUR DBA GENESIS HOUSE:COVID MITIGATION FUNDING - MAR 2024	1,712.64
5084638	25-MAR-24	18-MAR-24	LORAIN COUNTY SHERIFF:CONTR SVCS RE-ENTRY COORDINATOR 1/28-2/24/2024	6,130.82
5084659	25-MAR-24	18-JAN-24	LORAIN COUNTY SHERIFF:PSYCHOTROPIC DRUGS REIMBURSEMENT JUL-DEC 2023	4,778.31
5084659	25-MAR-24	18-JAN-24	LORAIN COUNTY SHERIFF:PSYCHOTROPIC DRUGS REIMBURSEMENT JUL-DEC 2023	59,719.00
5083623	19-MAR-24	04-MAR-24	LORAIN COUNTY SHERIFF:SOS 3.2 JAIL BASED MAT PRE-RELEASE FEB 24 *2024	9,779.31
5084639	25-MAR-24	07-MAR-24	LORAIN/MEDINA COMMUNITY BASED CORRECTIONAL FACILITY:BEHAVIORAL HEALTH DRUG	69.81
5084639	25-MAR-24	07-MAR-24	LORAIN/MEDINA COMMUNITY BASED CORRECTIONAL FACILITY:BEHAVIORAL HEALTH DRUG	866.00
5084640	25-MAR-24	05-FEB-24	MERCY HEALTH REGIONAL MEDICAL CENTER LLC:AGENCY SVCS INDIGENT BED DAYS - JAN 2024	43,200.00
5082214	08-MAR-24	19-FEB-24	MERCY HEALTH REGIONAL MEDICAL CENTER LLC:AGENCY SVCS INDIGENT BED DAYS - NOV&DEC 23 *2023	32,000.00
5084641	25-MAR-24	31-MAR-24	MILLER, ESTHER FERN:CONTR SVCS EMDR GROUP CONSULTATION - 3/15/2024	450.00
5082561	12-MAR-24	04-MAR-24	NE OHIO PRINTING LLC DBA LAKE SCREEN PRINTING:PR-QRT POLO SHIRTS - B208 SUD OPIATE OUTREACH -	49.30
ON BEHALF	12-MAR-24		ON BEHALF PAYMENT (CENTRAL PHARMACY)	321.00
5084660	25-MAR-24	13-MAR-24	P2R TRAINING AND RESOURCE CENTER INC:CONTR SVCS MSA DRAWDOWN JAN-MAR 2024 PERSONNEL	13,432.06
5084646	25-MAR-24	13-MAR-24	P2R TRAINING AND RESOURCE CENTER INC:MSA OFFICE SPACE - JAN-MAR 2024	826.60
5082219	08-MAR-24	05-FEB-24	PRIMARY PURPOSE CENTER INC:CONTR SVCS ATP RECOVERY HOUSING SVCS JAN 24 *2024	2,355.00
5084661	25-MAR-24	12-MAR-24	PSYCH & PSYCH SERVICES LLC:WELLNESS COURT - TREATMENT & RECOVERY SVCS - FEB 2024	2,240.79
5082220	08-MAR-24	07-FEB-24	QPR INSTITUTE INC:QPR BOOKLETS SPANISH VERSION - FEB 24 *2024	1,087.00
5082226	08-MAR-24	02-FEB-24	THE ROAD TO HOPE INC:CONTR SVCS ATP RECOVERY HOUSING SVCS JAN 24 *2024	3,720.00
TOTAL AGENCY & COMMUNITY				230,763.00

NETWORK AGENCY CONTRACTS

5082549	12-MAR-24	26-FEB-24	APPLEWOOD CENTERS INC:AGENCY SVCS MRSS JAN 24 *2024	19,841.42
5082548	12-MAR-24	29-FEB-24	APPLEWOOD CENTERS INC:AGENCY SVCS PATIENT CARE JAN 24 GOSH *2024	14,286.26
5083606	19-MAR-24	05-MAR-24	APPLEWOOD CENTERS INC:AGENCY SVCS PSYCH INCENTIVE DEC 23 *2023	600.00
5083604	19-MAR-24	05-MAR-24	APPLEWOOD CENTERS INC:AGENCY SVCS PSYCH INCENTIVE JAN 24 *2024	600.00
5083605	19-MAR-24	05-MAR-24	APPLEWOOD CENTERS INC:AGENCY SVCS THE DETENTION CENTER - JAN 24 *2024	5,711.71
5083890	20-MAR-24	08-MAR-24	BAYMARK HEALTH SERVICES OF OHIO INC DBA MEDMARK TREATMENT CENTERS AMHERST:SOS 3.2	9,981.58
5084623	25-MAR-24	18-MAR-24	BEECH BROOK:AGENCY SVCS PATIENT CARE FEB 2024 GOSH	2,338.89
5082200	08-MAR-24	22-FEB-24	BEECH BROOK:AGENCY SVCS PATIENT CARE FEB 24 GOSH *2024	547.77
5082201	08-MAR-24	29-FEB-24	BEECH BROOK:AGENCY SVCS PATIENT CARE FEB 24 GOSH *2024	150.00
5083891	20-MAR-24	06-MAR-24	BEECH BROOK:AGENCY SVCS PATIENT CARE FEB 24 GOSH *2024	444.00
5084624	25-MAR-24	14-MAR-24	BELLEFAIRE JEWISH CHILDRENS BUREAU:AGENCY SVCS IHBT STAFF INCENTIVE JUL-DEC 2023	5,500.00
5082202	08-MAR-24	29-FEB-24	BELLEFAIRE JEWISH CHILDRENS BUREAU:AGENCY SVCS PATIENT CARE JAN 24 GOSH *2024	643.18
5084625	25-MAR-24	18-MAR-24	BELLEFAIRE JEWISH CHILDRENS BUREAU:AGENCY SVCS PATIENT CARE THRU FEB 2024 GOSH	20,547.14
5083893	20-MAR-24	04-MAR-24	BELLEFAIRE JEWISH CHILDRENS BUREAU:AGENCY SVCS PSYCH INCENTIVE DEC 23 *2023	185.00
5083892	20-MAR-24	04-MAR-24	BELLEFAIRE JEWISH CHILDRENS BUREAU:AGENCY SVCS PSYCH INCENTIVE JAN 24 *2024	253.00
5084655	25-MAR-24	18-MAR-24	CATHOLIC CHARITIES CORPORATION:AGENCY SVCS PATIENT CARE FEB 2024 GOSH	1,350.84
5083609	19-MAR-24	06-MAR-24	CATHOLIC CHARITIES CORPORATION:AGENCY SVCS PATIENT CARE FEB 24 GOSH *2024	4,710.20
5082551	12-MAR-24	29-FEB-24	CATHOLIC CHARITIES CORPORATION:AGENCY SVCS PATIENT CARE JAN-FEB 24 GOSH *2024	1,545.65
5083611	19-MAR-24	06-MAR-24	CROSSROADS HEALTH DBA NEW DIRECTIONS:AGENCY SVCS PATIENT CARE FEB 24 GOSH *2024	2,078.19
5082554	12-MAR-24	29-FEB-24	EL CENTRO DE SERVICIOS SOCIALES INC:AGENCY SVCS PATIENT CARE THRU FEB 24 GOSH *2024	32,034.60
5083614	19-MAR-24	06-MAR-24	EL CENTRO DE SERVICIOS SOCIALES INC:AGENCY SVCS PATIENT CARE THRU FEB 24 GOSH *2024	1,558.44
5082206	08-MAR-24	22-FEB-24	FAR WEST CENTER:AGENCY SVCS PATIENT CARE JAN 24 GOSH *2024	7,963.02
5084656	25-MAR-24	11-MAR-24	FAR WEST CENTER:AGENCY SVCS SENIOR STRONG FEB 2024	6,648.73
5082557	12-MAR-24	01-MAR-24	LET'S GET REAL INC DBA LET'S GET REAL INC:AGENCY SVCS NEO-COLLAB PEER NAV DESK/OUTREACH - FEB	2,184.00
5082211	08-MAR-24	26-FEB-24	LET'S GET REAL INC DBA LET'S GET REAL INC:MI-AGENCY SVCS PEER SUPPORT SAPT TREATMENT 1/19-	5,967.00
5082209	08-MAR-24	22-FEB-24	LET'S GET REAL INC DBA LET'S GET REAL INC:SOS 3.2 - PEER SUPPORT & WHO JAN 24 *2024	30,235.50
5084631	25-MAR-24	18-MAR-24	LORAIN COUNTY ALCOHOL & DRUG ABUSE SERVICES INC DBA THE LCADA WAY:AGENCY SVCS AUD GRANT	8,181.86
5084635	25-MAR-24	19-MAR-24	LORAIN COUNTY ALCOHOL & DRUG ABUSE SERVICES INC DBA THE LCADA WAY:AGENCY SVCS GAMBLING	27,159.27
5084634	25-MAR-24	19-MAR-24	LORAIN COUNTY ALCOHOL & DRUG ABUSE SERVICES INC DBA THE LCADA WAY:AGENCY SVCS GAMBLING	540.03
5083620	19-MAR-24	05-MAR-24	LORAIN COUNTY ALCOHOL & DRUG ABUSE SERVICES INC DBA THE LCADA WAY:AGENCY SVCS PROJECT	3,323.67
5084632	25-MAR-24	18-MAR-24	LORAIN COUNTY ALCOHOL & DRUG ABUSE SERVICES INC DBA THE LCADA WAY:AGENCY SVCS SUD	38,181.49
5084633	25-MAR-24	18-MAR-24	LORAIN COUNTY ALCOHOL & DRUG ABUSE SERVICES INC DBA THE LCADA WAY:AGENCY SVCS SUD	14,789.16
5083899	20-MAR-24	11-MAR-24	LORAIN COUNTY ALCOHOL & DRUG ABUSE SERVICES INC DBA THE LCADA WAY:MI: SOS 3.2-CARE COORD,	10,750.68
5084630	25-MAR-24	18-MAR-24	LORAIN COUNTY ALCOHOL & DRUG ABUSE SERVICES INC DBA THE LCADA WAY:SOS 3.2 TREATMENT SVCS	10,961.16
5083902	20-MAR-24	08-FEB-24	LORAIN COUNTY HEALTH AND DENTISTRY:SOS 3.2 - TREATMENT SVCS FEB 24 *2024	14,663.18
5083624	19-MAR-24	06-MAR-24	LORAIN UMADAOP:SOS 3.2 PREVENTION SVCS FEB 24 *2024	5,070.25
5082562	12-MAR-24	19-JAN-24	NEIGHBORHOOD ALLIANCE:PATH 2ND QTR FY24 OCT-DEC 23 FEDERAL & LOCAL MATCH *2023	7,630.38
5082562	12-MAR-24	19-JAN-24	NEIGHBORHOOD ALLIANCE:PATH 2ND QTR FY24 OCT-DEC 23 FEDERAL & LOCAL MATCH *2023	28,080.86
5084642	25-MAR-24	12-MAR-24	NEIGHBORHOOD ALLIANCE:SOS 3.2 - PATH PROGRAM JAN 2024	4,849.45
5082564	12-MAR-24	31-JAN-24	NEW SUNRISE PROPERTIES:AGENCY SVCS HUD SPC RENTS JAN 24 *2024	31,191.00
5082563	12-MAR-24	29-FEB-24	NEW SUNRISE PROPERTIES:AGENCY SVCS PATIENT CARE THRU FEB 24 GOSH *2024	92,817.00
5083905	20-MAR-24	31-DEC-23	NORTHERN OHIO RECOVERY ASSOCIATION:SOS 3.2 TREATMENT SVCS DEC 23 *2023	10,813.53
5083906	20-MAR-24	29-FEB-24	OHIOGUIDESTONE:AGENCY SVCS FAMILY CONSULT - JAN & FEB 24 *2024	816.00
5084645	25-MAR-24	29-FEB-24	OHIOGUIDESTONE:AGENCY SVCS IYDCC - DEC 2023	683.00
5084643	25-MAR-24	29-FEB-24	OHIOGUIDESTONE:AGENCY SVCS IYDCC - JAN-FEB 2024	1,219.20

MENTAL HEALTH, ADDICTION AND RECOVERY SERVICES BOARD OF LORAIN COUNTY

LISTING OF EXPENSES MARCH 2024

Warrant#	Chk Date	Inv Date	Journal Description/Payee Name	Amount
5083627	19-MAR-24	29-FEB-24	OHIOGUIDESTONE:AGENCY SVCS IYDCC FEB 24 *2024	10,191.60
5082215	08-MAR-24	29-FEB-24	OHIOGUIDESTONE:AGENCY SVCS PATIENT CARE FEB 24 GOSH *2024	15,474.84
5083626	19-MAR-24	06-MAR-24	OHIOGUIDESTONE:AGENCY SVCS PATIENT CARE FEB 24 GOSH *2024	6,541.06
5084644	25-MAR-24	18-MAR-24	OHIOGUIDESTONE:AGENCY SVCS PATIENT CARE MAR 2024 GOSH	9,160.74
5083907	20-MAR-24	29-FEB-24	OHIOGUIDESTONE:AGENCY SVCS TBS/NURSING - FEB 24 *2024	343.08
5083625	19-MAR-24	04-MAR-24	OHIOGUIDESTONE:SOS 3.2 - TREATMENT SVCS JAN 24 *2024	1,213.42
5082216	08-MAR-24	22-FEB-24	PATHWAYS COUNSELING AND GROWTH CENTER:AGENCY SVCS PATIENT CARE FEB 24 GOSH *2024	1,136.85
5083628	19-MAR-24	06-MAR-24	PATHWAYS COUNSELING AND GROWTH CENTER:AGENCY SVCS PATIENT CARE FEB 24 GOSH *2024	2,735.77
5084647	25-MAR-24	18-MAR-24	PATHWAYS COUNSELING AND GROWTH CENTER:AGENCY SVCS PATIENT CARE MAR 2024 GOSH	2,179.55
5083911	20-MAR-24	08-MAR-24	SILVER MAPLE RECOVERY LLC:AGENCY SVCS PATIENT CARE FEB 24 GOSH *2024	16,880.16
5082222	08-MAR-24	22-FEB-24	SILVER MAPLE RECOVERY LLC:AGENCY SVCS PATIENT CARE JAN 24 GOSH *2024	5,807.61
5083910	20-MAR-24	08-MAR-24	SILVER MAPLE RECOVERY LLC:SOS 3.2 TREATMENT SVCS THRU FEB 24 GOSH *2024	25,270.06
5082223	08-MAR-24	22-FEB-24	STELLA MARIS INC:AGENCY SVCS PATIENT CARE FEB 24 GOSH *2024	7,062.13
5082567	12-MAR-24	29-FEB-24	STELLA MARIS INC:AGENCY SVCS PATIENT CARE FEB 24 GOSH *2024	5,213.54
5084662	25-MAR-24	18-MAR-24	STELLA MARIS INC:AGENCY SVCS PATIENT CARE MAR 2024 GOSH	2,451.12
5083630	19-MAR-24	06-MAR-24	STELLA MARIS INC:AGENCY SVCS PATIENT CARE THRU FEB 24 GOSH *2024	2,978.22
5083912	20-MAR-24	06-MAR-24	THE NORD CENTER:AGENCY SVCS ADULT WRAP - FEB 24 *2024	900.04
5082570	12-MAR-24	01-MAR-24	THE NORD CENTER:AGENCY SVCS CBCF MEDS - FEB 24 *2024	1,161.25
5084650	25-MAR-24	13-MAR-24	THE NORD CENTER:AGENCY SVCS CRISIS INTERVENTION FEB 2024	73,012.50
5084650	25-MAR-24	13-MAR-24	THE NORD CENTER:AGENCY SVCS CRISIS INTERVENTION FEB 2024	31,168.80
5084651	25-MAR-24	13-MAR-24	THE NORD CENTER:AGENCY SVCS HOTLINE FEB 2024	38,714.86
5084664	25-MAR-24	18-MAR-24	THE NORD CENTER:AGENCY SVCS LAKEVIEW HOUSING MAR 2024 GOSH	5,931.24
5082224	08-MAR-24	22-FEB-24	THE NORD CENTER:AGENCY SVCS PATIENT CARE FEB 24 GOSH *2024	32,269.82
5082225	08-MAR-24	29-FEB-24	THE NORD CENTER:AGENCY SVCS PATIENT CARE FEB 24 GOSH *2024	32,731.67
5083631	19-MAR-24	06-MAR-24	THE NORD CENTER:AGENCY SVCS PATIENT CARE FEB 24 GOSH *2024	32,562.80
5082568	12-MAR-24	22-FEB-24	THE NORD CENTER:AGENCY SVCS PATIENT CARE FEB 24 GOSH *2024	2,965.62
5082572	12-MAR-24	29-FEB-24	THE NORD CENTER:AGENCY SVCS PATIENT CARE FEB 24 GOSH *2024	2,965.62
5083632	19-MAR-24	06-MAR-24	THE NORD CENTER:AGENCY SVCS PATIENT CARE FEB 24 GOSH *2024	2,965.62
5084648	25-MAR-24	18-MAR-24	THE NORD CENTER:AGENCY SVCS PATIENT CARE MAR 2024 GOSH	94,647.03
5082569	12-MAR-24	27-FEB-24	THE NORD CENTER:AGENCY SVCS PEER SUPPORT SVCS - MAR 2024	12,804.00
5084649	25-MAR-24	27-FEB-24	THE NORD CENTER:AGENCY SVCS TITLE XX Q2 JAN-MAR FY2024	31,227.00
5083913	20-MAR-24	07-MAR-24	THE NORD CENTER:AGENCY SVCS TRANSPORTATION - FEB 24 *2024	749.00
5084663	25-MAR-24	13-MAR-24	THE NORD CENTER:AGENCY SVCS WARMLINE FEB 2024	8,727.01
5084652	25-MAR-24	07-MAR-24	THE NORD CENTER:MI: AGENCY SVCS PATIENT CARE FEB 2024	25,799.78
5082571	12-MAR-24	01-MAR-24	THE NORD CENTER:MI-AGENCY SVCS HAP, RENT, HAP PATH FEB 24 *2024	13,701.93
5083914	20-MAR-24	08-MAR-24	THE NORD CENTER:SOS 3.2 - HARM REDUCTION CLINIC FEB 24 *2024	1,628.94
5083915	20-MAR-24	05-MAR-24	THE ROAD TO HOPE INC:AGENCY SVCS RECOVERY HOUSING REIMBURSEMENT THRU FEB 24 *2024	32,493.30
5082573	12-MAR-24	01-MAR-24	THE ROAD TO HOPE INC:AGENCY SVCS SAPT RENTS FEB 24 *2024	11,520.00
5083633	19-MAR-24	01-MAR-24	THE ROAD TO HOPE INC:SOS 3.2 RECOVERY HOUSING SVCS FEB 24 *2024	41,081.00
TOTAL NETWORK AGENCY CONTRACTS				1,135,995.87
APPROVED BY EXECUTIVE DIRECTOR:				TOTAL MHARS BOARD EXPENSES - MARCH 2024
				1,979,618.08

Mental Health, Addiction and Recovery Services Board of Lorain County
Revised Budget for FY24

	Original Budget FY24	Prior Approved Revisions FY24	Proposed Revisions FY24	Revised Budget FY24
Estimated Beginning Cash Balance - Board Levy	\$ 16,194,219		\$	16,129,808
Estimated Beginning Cash Balance - Unrestricted	-			-
Estimated Beginning Cash Balance - Board Allocations & Grants	1,006,432			1,236,810
Estimated Beginning Cash Balance - ISP	1,923,474			1,793,022
Estimated Beginning Cash Balance - TOTAL	<u>19,124,125</u>			<u>19,159,640</u>
Revenues:				
Levy	12,138,264	-	-	12,138,264
Local Grants	55,000	36,130	-	91,130
State Allocations & Grants	2,367,760	436,416	37,000	2,841,176
Federal Allocations & Grants	2,989,623	2,803,122	-	5,792,745
Pass-Through Grants	871,123	145,267	-	1,016,390
Integrated Services Partnership	-	-	-	-
Miscellaneous	6,769,000	20,190	-	6,789,190
Total Revenues	<u>25,190,770</u>	<u>3,441,125</u>	<u>37,000</u>	<u>28,668,895</u>
Expenses:				
Personnel - Salary and Benefits	2,180,000	-	-	2,180,000
Operating	408,000	36,000	-	444,000
Printing & Advertising	75,000	-	-	75,000
Capital Outlay	40,000	-	-	40,000
Crisis Receiving Center	8,350,286	-	-	8,350,286
Auditor & Treasurer Fees - Levy	211,500	-	-	211,500
Integrated Services Partnership	1,260,033	-	-	1,260,033
Pass-Through Grants	871,123	145,267	-	1,016,390
Agency & Community	1,718,955	1,003,378	37,000	2,759,333
Network Agency Contracts	14,265,422	2,634,812	-	16,900,234
Total Expenses	<u>29,380,319</u>	<u>3,819,457</u>	<u>37,000</u>	<u>33,236,776</u>
Net Income	<u>(4,189,549)</u>	<u>(378,332)</u>	<u>-</u>	<u>(4,567,881)</u>
Estimated Ending Cash Balance - Board Levy	14,271,135			14,028,727
Estimated Ending Cash Balance - Unrestricted	-			-
Estimated Ending Cash Balance - Board Allocations & Grants	-			30,043
Estimated Ending Cash Balance - ISP	663,441			532,989
Estimated Ending Cash Balance - TOTAL	<u>\$ 14,934,576</u>		<u>\$</u>	<u>14,591,759</u>

Increase State Allocations & Grants revenue and Agency & Community expense \$37,000 for Landlord Incentive Program allocation

BUDGET REVISION NOTES

PRIOR APPROVED REVISIONS FY24

REVENUES

DATE	CATEGORY	AMOUNT	EXPLANATION
08/22/23	State Allocations & Grants	246,416	Adjustments for carryover and additional allocations
08/22/23	Federal Allocations & Grants	520,334	Adjustments for carryover and additional allocations
08/22/23	Pass-Through Grants	120,621	Additional allocation for Women's Set-Aside Grant
09/26/23	State Allocations & Grants	9,730	Adjustments for carryover and additional allocations
09/26/23	Federal Allocations & Grants	(38,050)	Adjustments for carryover and additional allocations
09/26/23	Pass-Through Grants	24,646	Additional allocation for Circle for Recovery Grant
10/24/23	State Allocations & Grants	50,270	Adjustments for carryover and additional allocations
10/24/23	Federal Allocations & Grants	1,290,795	Adjustments for carryover and additional allocations for SOS 3.2 bridge funding
11/15/23	Local Grants	3,488	Additional allocation for Collective Impact Grant
01/23/24	State Allocations & Grants	50,000	Additional allocation for MRSS Grant
01/23/24	Federal Allocations & Grants	946,043	Adjustments for additional allocations for SOS 3.2 and various grant reconciliations
02/27/24	Local Grants	32,642	Additional grant for Collective Impact Grant
02/27/24	State Allocations & Grants	80,000	Additional allocation for Addiction Treatment Program (ATP)
02/27/24	Federal Allocations & Grants	75,000	Additional allocation for Hospital Access Program
02/27/24	Miscellaneous	20,190	Additional grant for Collective Impact Grant
03/26/24	Federal Allocations & Grants	9,000	Additional allocation for Hospital Access Program
NET REVENUE CHANGE		3,441,125	OVERALL AMOUNT REVENUES INCREASED / (DECREASED)

EXPENSES

DATE	CATEGORY	AMOUNT	EXPLANATION
06/27/23	Agency & Community	20,000	Re-allocate unused portion of Ad Hoc Disparities from FY23 to FY24
08/22/23	Pass-Through Grants	120,621	Additional allocation for Women's Set-Aside Grant
08/22/23	Agency & Community	676,196	Adjustments for carryover and additional allocations
08/22/23	Network Agency Contracts	286,172	Adjustments for carryover and additional allocations
09/26/23	Pass-Through Grants	24,646	Additional allocation for Circle for Recovery Grant
09/26/23	Agency & Community	(52,862)	Adjustments for carryover and additional allocations
09/26/23	Network Agency Contracts	(13,696)	Adjustments for carryover and additional allocations
10/24/23	Agency & Community	(13,908)	Adjustments for carryover and additional allocations
10/24/23	Network Agency Contracts	1,439,932	Adjustments for carryover and additional allocations for SOS 3.2 bridge funding
11/15/23	Agency & Community	3,488	Additional allocation for Collective Impact Grant
11/15/23	Agency & Community	(25,700)	Shift in funding lines
11/15/23	Network Agency Contracts	25,700	Shift in funding lines
01/23/24	Agency & Community	61,909	Adjustments for additional allocations and various grant reconciliations
01/23/24	Network Agency Contracts	896,704	Adjustments for additional allocations and various grant reconciliations
02/27/24	Operating	36,000	Expense for demolition of Oberlin Ave property
02/27/24	Agency & Community	258,992	Adjustments for additional allocations and various grant reconciliations
03/26/24	Agency & Community	9,000	Additional allocation for Hospital Access Program
03/26/24	Agency & Community	66,263	Primary Purpose Capital Allocation
NET EXPENSE CHANGE		3,819,457	OVERALL AMOUNT EXPENSES INCREASED / (DECREASED)

NET OVERALL CHANGE **(378,332)** **OVERALL AMOUNT ENDING BALANCE INCREASED / (DECREASED)**

Contracts to be Authorized by the MHARS Board of Directors

April 23, 2024

Contractor/Vendor	Service Provided	Contracted/Budgeted Amount
*Road to Hope	See APS 04.24.01 3340.C107.600.S24.05.6200.6221	NTE increase \$60,000 to \$310,000 for 7/1/23 - 6/30/24
*Emerald Development and Economic Network (EDEN)	See APS 04.24.02 3340.B209.600.C24.05.6200.0000	NTE \$37,000 for 7/1/23 - 6/30/24
* Contract recommended for approval from Community Planning & Oversight Committee		



Agenda Process Sheet **04.24.01**

- COMMUNITY PLANNING & OVERSIGHT COMMITTEE
- FINANCE COMMITTEE
- OTHER COMMITTEE
- BOARD OF DIRECTOR'S MEETING

NEW PROGRAM

CONTINUING PROGRAM

EXPANDING PROGRAM

Subject: FY24 Allocation Increase

Contract Entity(s): Road to Hope

Contract Term: fiscal year 2024 (7/1/23-6/30/24)

Funding Source(s): SAPT (Substance Abuse, Prevention and Treatment – OhioMHAS)

Contract Amount: Allocation increase \$60,000 for a new total of \$310,000

Project Description: This funding provides a path of payment for those seeking Recovery Housing. These monies ensure Lorain County residents are able to live in recovery housing in their home county, connecting them to their recovery support network. By staying in Lorain County, residents are able to build local treatment and recovery supports that they can continue to engage once they move out of recovery housing.

Planning considerations or impact specific to Diversity, Equity and Inclusion: Each client develops a treatment plan unique to their personal and cultural needs.

Related Facts: This funding is utilized in the beginning phases of recovery housing while a resident is stabilizing and seeking employment.

Number Served: 81 in first half of the fiscal year

System Impact: By staying in Lorain County, residents are able to build local treatment and recovery supports that they can continue to engage once they move out of recovery housing.

Metrics <i>(How will goals be measured)</i>	Number of MHARS Board funded clients served. At the midway point of the fiscal year and end of the year data is reported below.
---	---

Evaluation/ Outcome Data <i>(Actual results from program)</i>	Data 7/1/23-2/28/24 Number of new MHARS Board funded clients entering Recovery Housing: 53 Number of MHARS funded clients maintained in Recovery Housing from last reporting period: 28 Number of MHARS funded clients successfully completing the program: 59
---	---



Agenda Process Sheet 04.24.02

- COMMUNITY PLANNING & OVERSIGHT COMMITTEE**
- FINANCE COMMITTEE**
- OTHER COMMITTEE**
- BOARD OF DIRECTOR'S MEETING**

NEW PROGRAM

CONTINUING PROGRAM

EXPANDING PROGRAM

Subject: Landlord Incentive Program

Contract Entity(s): EDEN Inc.

Contract Term: FY24

Funding Source(s): OhioMHAS

Contract Amount: \$37,000.00

Project Description: OhioMHAS is providing funding to incentivize landlords to rent to individuals with a criminal record, those who experience mental illness and/or substance use disorders, or those who are being discharged from a hospital. The goals of this funding are:

- To increase number of landlords willing to rent to individuals with a criminal record, those who experience mental illness and/or substance use disorders, or those who are being discharged from a hospital.
- Secure permanent housing for individuals with a criminal record, those who experience mental illness and/or substance use disorders, or those who are being discharged from a hospital.

These funds will be passed through to EDEN, Inc. and they will be responsible for the administration of these funds in our network.

Planning considerations or impact specific to Diversity, Equity and Inclusion:

Discrimination laws and fair housing laws in Ohio and federal law prohibit landlords from discriminating based on race, color, religion, sex, and more.

Related Facts:

Allowable Uses of Funding: Up to \$2,000 per individual can be used for the following Landlord Incentive payments. Funds can only be used to support the target population.

- Vacancy payment incentive to hold unit until tenant is available to move in (30-60days max)

- Additional security deposits
- Pet deposits
- Small repairs in rental units to conform with Housing and Urban Development’s (HUD) Housing Quality Standards at time of lease signing
- Rent reporting services to improve tenant credit scores
- Additional insurance coverage for landlords.

Number Served: New Program

System Impact: This funding will allow for the recruitment of new landlords to help house those with barriers that have otherwise kept them from being permanently housed. It will also impact the availability of shelter beds if those who have been harder to house are able to move into permanent housing from shelter beds.

Metrics <i>(How will goals be measured)</i>	EDEN will collect data based on submitted allowable expenses regarding landlord and tenant information and submit that data to the Board. Quarterly reports will then be submitted to OMHAS by the Board. Key data points include:	
	Number of new landlords recruited in SFY24 4th Quarter:	Excerpts from OMHAS required reporting (excel below)
	Number of landlords retained in SFY24 4th Quarter:	
	Number of placements in SFY24 4th Quarter:	
	Where the individual came from:	
	Does the person have criminal records	
	Does the person have history of arson conviction?	
	Is the person a registered sex-offender?	
Does the person have mental illness, SUD, or co-occurring disorder?		

Evaluation/ Outcome Data <i>(Actual results from program)</i>	This is a new program, so there are no metrics currently available.
---	---

Nominating Committee Meeting Report

Thursday, April 18, 2024 5:00 p.m. Conference Room

NOMINATING COMMITTEE: The Committee shall conduct interviews and shall make recommendations of potential BOD members to the BOD to formally request the appropriate appointing authorities to fill vacancies. The Committee shall endeavor to ensure that the composition of the BOD reflects the demographic characteristics of Lorain County.

The Nominating Committee shall have the responsibility to prepare, recommend, and nominate candidates for election as officers to be submitted to the BOD at its May meeting, after soliciting names of candidates from the members of the BOD after which the nominations shall be closed. The Nominating Committee shall convene, consider, and recommend to the BOD candidates for vacant officer positions and shall act by a majority vote of its members. The Nominating Committee shall propose the slate of candidates for BOD officer positions by the June Board meeting each year.

The Committee will have supervisory capacity regarding:

- New member orientation

The Committee will establish and supervise a:

- Board Member Mentoring Procedure
- Process for Community Representatives serving on the Committees.

Expected Members: Michele Flanagan (Committee Chair), Mike Babet, Tim Carrion, Dr. Hope Moon, Sandra Premura

Expected Staff: Michael Doud

I. **Informational**

a. Selection of applicant for vacant position with OhioMHAS (partial term ending 6/30/2026):

- Kreig Brusnahan completed application through OhioMHAS on 3/27/24 (received)
- Wanda Ewing completed application through OhioMHAS on 4/1/24 (received)

b. Process for Election of Officers for FY25

- Staff will email the BODs on 4/24/24 to solicit names of candidates from the BODs for election as officers to be submitted at the May meeting. Request is to send description of the officers' positions. Nominations must be received no later than Monday, May 20th. Dr. Hope Moon and Tim Carrion are available to address questions from BODs. The Committee will provide a slate of officers in May
- The following members have indicated their interest for officer position:
 - a. Dan Urbin – Chair
 - b. Mike Babet – Vice Chair
 - c. Sandra Premura – Secretary

II. **Unfinished Business** – None at this time

III. **New Business** – None at this time

Nominating Committee Meeting Report

Thursday, April 18, 2024 5:00 p.m. Conference Room

NOMINATING COMMITTEE: The Committee shall conduct interviews and shall make recommendations of potential BOD members to the BOD to formally request the appropriate appointing authorities to fill vacancies. The Committee shall endeavor to ensure that the composition of the BOD reflects the demographic characteristics of Lorain County.

The Nominating Committee shall have the responsibility to prepare, recommend, and nominate candidates for election as officers to be submitted to the BOD at its May meeting, after soliciting names of candidates from the members of the BOD after which the nominations shall be closed. The Nominating Committee shall convene, consider, and recommend to the BOD candidates for vacant officer positions and shall act by a majority vote of its members. The Nominating Committee shall propose the slate of candidates for BOD officer positions by the June Board meeting each year.

The Committee will have supervisory capacity regarding:

- New member orientation

The Committee will establish and supervise a:

- Board Member Mentoring Procedure
- Process for Community Representatives serving on the Committees.

IV. Any recommendations to place on consent agenda

- Dr. Hope Moon made a motion to recommend the full board approve Wanda Ewing to fill the OhioMHAS vacant seat term expiring 6/30/2026. Second by Tim Carrion. All in favor. Motion carried.

Next meeting: Tuesday, May 28, 2024 at 4:00pm (prior to BOD meeting)

ELECTION OF OFFICERS

FY25

The Nominating Committee shall have the responsibility to prepare, recommend, and nominate candidates for election as officers to be submitted to the BOD at its May meeting, after soliciting names of candidates from the members of the BOD after which the nominations shall be closed. The Nominating Committee shall convene, consider, and recommend to the BOD candidates for vacant officer positions and shall act by a majority vote of its members. The Nominating Committee shall propose the slate of candidates for BOD officer positions by the June Board meeting each year.

ARTICLE VI: OFFICERS

The officers of the BOD shall consist of the **Chair, Vice Chair, Secretary and Chief Governance Officer**. The officers of the BOD shall be elected annually. **The officers shall be elected by the Board from its membership at the regular monthly meeting of the BOD in June with terms of office beginning July of the new fiscal year.**

Any officers may be removed for causes by a two-thirds affirmative vote of the full membership of the BOD, at any special meeting of the BOD called for that purpose, or at any regular meeting of the BOD. Such officer shall be informed by the notice of the meeting of the charges against him/her prior to the meeting.

Vacancies in any office of the BOD may be filled for the unexpired term by the BOD, at any special meeting of the BOD called for that purpose, or at any regular meeting of the Board.

ARTICLE VII: DUTIES OF OFFICERS

Section 1: Chairperson

- Preside at all meetings of the BOD
- Serve as Chairperson of the Executive Committee
- Act as ex-officio member of all committees with the privilege of attending meetings and casting the deciding vote in case of a tie.
- Appoint the chair and other members of the standing committees
- Appoint members of the BOD to all ad hoc committees
- May call for special meetings of the BOD consistent with Ohio Revised Code and these By-Laws
- Plan and prepare, in consultation with the Executive Director, agendas for BOD meetings and meetings of the Executive Committee
- Give leadership to the BOD and encourage all members to their best effort

Section 2: Vice-Chairperson

The duties of the Vice-Chairperson shall be to preside in the absence of the Chairperson; to aid the Chairperson and perform the duties of the Chairperson in his/her absence; serve as member of the Executive Committee; and to perform such other duties designated by the Chairperson. The Vice-Chairperson shall assume duties of the Chairperson, if vacancy occurs, until the next regular or special meeting of the BOD.

ELECTION OF OFFICERS

FY25

Section 3: Secretary

In absence of the Chairperson and Vice-Chairperson, the BOD Secretary, or his/her designee will conduct the meeting. The Secretary shall certify the evidence of BOD actions, including BOD policies and minutes.

Section 4: Chief Governance Officer

The Chief Governance Officer (CGO) has the responsibility to be familiar with the BOD's By-Laws and shall advise the BOD if, in his/her opinion, the BOD is not in compliance with its own By-Laws. The CGO shall chair the Governance Committee.

Executive Committee Meeting Report

Tuesday, March 26, 2024 5:30pm (following BOD meeting) **Amy Levin Center**

The Executive Committee shall be composed of the Chair, the Vice Chair, Secretary, Chief Governance Officer, and ALL Chairs of Standing Committees. Between the meetings of the BOD, the Executive Committee, shall have, and may exercise, the authority of the BOD, except as such authority is limited by statute. The Executive Committee shall have only such power and authority of the BOD between meetings of the BOD as shall be necessary to address crisis situations of the Board; any such action taken by the Executive Committee between meetings of the BOD shall be subject to ratification or modification by the BOD at its next regularly scheduled meeting.

Committee Members Present: Daniel Urbin, Board Chair; Mike Babet, Vice Chair, James Schaeper, Chief Governance Officer; Sandra Premura, Secretary; Tim Barfield, Michele Flanagan

Staff Present: Michael Doud, Barry Habony, Vinaida Reyna

I. Recommendations

- a. LCCRC Change Order #3
 - Todd Cooper, Owner Rep, presented via Zoom to the committee Change Order #3 for LCCRC Project
 - After a long discussion, the committee scheduled a follow-up meeting to review the final change order request after Todd Cooper reviews the change order.

II. Unfinished Business – None at this time

III. New Business

- a. Revisit Resolution No. 20-06-12
 - Mike Babet asked to revisit Resolution No. 20-06-12 that reads *Board adopts the OACBHA Declaration “Racism is a Public Health Crisis” Resolution adopted June 25, 2020.*
 - The committee felt no change was necessary. Work continues through staff at the Board.

IV. Determination of Consent Agenda – None at this time

Next Meeting: Friday, March 29, 2024 at 8:00am

Executive Committee Follow-Up Meeting Report

Friday, March 29, 2024 8:00am MHARS Board Office – Conference Room

The Executive Committee shall be composed of the Chair, the Vice Chair, Secretary, Chief Governance Officer, and ALL Chairs of Standing Committees. Between the meetings of the BOD, the Executive Committee, shall have, and may exercise, the authority of the BOD, except as such authority is limited by statute. The Executive Committee shall have only such power and authority of the BOD between meetings of the BOD as shall be necessary to address crisis situations of the Board; any such action taken by the Executive Committee between meetings of the BOD shall be subject to ratification or modification by the BOD at its next regularly scheduled meeting.

Committee Members: Daniel Urbin, Board Chair; Mike Babet, Vice Chair, James Schaeper, Chief Governance Officer; Tim Barfield, Michele Flanagan

Committee Members Absent: Sandra Premura

Staff Present: Michael Doud, Barry Habony

I. Recommendations

- a. LCCRC Change Order #3 follow-up
 - Todd Cooper, Owner Rep, presented via Zoom to the committee Change Order #3 for LCCRC Project
 - After reviewing the request, the committee approved moving the change order to Consent Agenda for April 2024.
 - Determine the need to draw against the Mike Bass award for future change orders. Committee was reminded there are state & county ARPA funds (\$8.5M) in the project that need to be drawn against before 2025 along with federal award \$1.5M.
 - Update web site to reflect progress of the project.

II. Determination of Consent Agenda

- Approval of Change Order #3 for the LCCRC Project in the amount not to exceed \$278,625.00.

Next Meeting: Friday, April 12, 2024 at 8:00am at the MHARS Board Office

General Contractor Change Order Summary

Approved Change Orders

24-01-03	South Drive Change Order 1	\$ 178,221.00
24-02-04	Bulletin 1 - Storm Modifications	\$ 6,027.00
24-02-05	South Drive Change Order 2	\$ 262,670.00

Total Approved Change Orders **\$ 446,918.00**

Pending Change Orders

South Drive Change Order Reconciliation	\$ (60,000.00)
Building Pad Soils Remediation	\$ 353,625.00

Total Pending Change Orders **\$ 293,625.00**

Total Approved and Pending Change Orders **\$ 740,543.00**

Total Contingency **\$ 706,505.05**

Available Contingency **\$ (34,037.95)**

Panzica Change Order
RFI #11 Building Pad Unsuitable Soils

PCO 06 Building Pad Unsuitable Soils	\$	278,625.00	T&M Not to Exceed
Foundation Undercuts (if required)	\$	75,000.00	T&M Not to Exceed
Total	\$	353,625.00	T&M Not to Exceed



POTENTIAL CHANGE ORDER

23-0021 - Lorain County Crisis Receiving Center

DATE: 03/26/2024
PCO#: 06

Todd Cooper
Hill International, Inc.

Potential Change Order 06: Building Pad Unsuitable Soils

Panzica Construction Company has completed pricing for Potential Change Order #06: Building Pad Unsuitable Soils.

Pricing includes site work associated with RFI 11 for the unsuitable soils at the building pad. Scope of work includes undercutting the east building pad approximately 105'x125' to -5' deep, removing unsuitable soils offsite, replacing undercut area with compacted 304 limestone in 6" to 8" lifts to achieve required compaction. This pricing does not include concrete cost or schedule impacts if soft or wet soils are discovered at the footing bottom during excavation for building foundations per the GeoSci report.

A cost breakdown for this work is as follows:

Description	Amount
Site Work Labor and Material	\$239,094.00
PCC Superintendent	\$19,200.00
PCC Project Manager	\$4,320.00
PCC Project Engineer	\$2,400.00
PCC OH/ Fee	\$13,251.00
Grand Total:	\$278,265.00

The total cost for this work is \$278,265.00 and is based on the attached quotations. Please review and respond if this pricing is approved. If you have any questions regarding this PCO, please call me at your earliest convenience.

Respectfully,

Danielle James

CC: M. Panzica

CE O-006 RFI 11						
Building Pad Unsuitable Soils						
Subcontractor	Scope Item	Units	UOM	Cost/Unit	Cost	Comments
Chieftain	Site Work Labor and Material	1	ls	\$ 239,094	\$ 239,094	
PCC	Superintendent	240	hr	\$ 80	\$ 19,200	
PCC	Project Manager	48	hr	\$ 90	\$ 4,320	
PCC	Project Engineer	48	hr	\$ 50	\$ 2,400	
PCC	Overhead and Fee	1	ls	\$ 13,251	\$ 13,251	
					\$ 278,265	

**This cost does not include potential impacts incurred from the delay in the project schedule for any additional temporary building enclosure, temporary heating, temporary protection, or contractor overtime to expedite the building envelope due to potential inclement weather impacts as a result of the schedule delay.

***This cost does not include potential impacts for labor and material cost increases as a result of the schedule delay.

****Per Hill International's request this does not include any estimated potential concrete cost or schedule impacts on anticipated issues to complete the additional work as described in RFI 11.

Schedule Impacts

- 2/21/2024 CTL was onsite to observe the proof roll of the north building pad and access road. The compacted are of the east side of the building pad did not pass the proof roll test. CTL recommended to cut 2'-3' down where the proof roll failed and replace in 6"-8" lifts.
- 2/22/2024 Team had OAC meeting which discussed CTL's recommendation and PCC to send estimate for this work.
- 2/27/2024 RFI 11 with confirmation to proceed with CTL's direction was submitted from PCC.
- 3/4/2024 Direction to proceed on T&M for work described in RFI 11/ CTL's report from 2/21/2024 was approved by Hill based on estimate provided from PCC.
- 3/11/2024 Excavation and backfill started per directive in CTL's recommendation, the soils were deemed unsuitable for use even with the 6"-8" lifts backfilled.
- 3/12/2024 Site walk with Hill, Perspectus, CTL, PCC/ Chieftain to review work completed and failed yesterday and RFI 11 was revised per this site walk to address further questions and how to proceed.
- 3/14/2024 Follow up site walk with Hill, Perspectus, Barber Hoffman, PCC/ Chieftain. Design team to review what the next steps are to be. Meeting scheduled with Hill and design team for tomorrow.
- 3/18/2024-3/20/2024 RFI 11 response from design team to undercut building pad to shale/ red clay in areas that did not pass proof roll and backfill with #304 limestone to subgrade elevation to achieve compaction requirements. When concrete excavation occurs, if soft or wet soils are encountered at the footing bottom, over excavation to be performed with lean concrete placed from shale/ red clay to bottom of designed footing elevation.
- 3/21/2024 Onsite OAC meeting team discussed moving forward with pricing per the directive from RFI 11 revision 1.
- 3/29/2024 Hill and design team to attend MHARS Board meeting for NTE cost for work described per RFI 11 revision 1.
- 4/1/2024 Change order work to start.

Schedule Delays

TBD - pending approval to proceed with the work and site conditions found once work starts
PCC personal time is based on the delay starting on 2/21/2024, MHARS Board approval on 3/29/2024, and field work starting 4/1/2024.
Site work is anticipated to take 6 working days, concrete work is unknown for the complete additional scope needed and is not included in this price.
The completion of this work is a direct impact to schedule critical path. Final PCC personal and schedule delay days can be validated once this change order work is complete.



CHIEFTAIN TRUCKING & EXCAVATING

3926 Valley Road • Cleveland, Ohio 44109
Office 216-485-8034 • Fax 216-485-8036

FBE / CSB / EDGE / SBE

March 22, 2024

Panzica Construction Company
739 Beta Dr
Cleveland, Ohio 44143

Attn: Danielle James
Project Manager

Re: Lorain Crisis Center
PCO 10R – Undercut building pad and replace with #304 limestone

Ms. James,

Please find the attached cost analysis for additional work that will be performed at Panzica's written direction. This cost estimate is prepared in accordance with the requirements of the contract documents. This proposed change specifically includes the following items based on the direction we were given at the on-site meeting this morning:

- Undercut approx. area of 105' x 125' to -5' deep and replace with compacted #304 limestone.
- Unsuitable material will be hauled offsite.

The totals for this proposed change amounts to a net add of **\$239,093.78**. Please issue a formal change order directive as soon as possible.

The schedule will need to be revised to reflect the delays that we have encountered on getting the building pad to an acceptable subgrade. The number of days delayed cannot be determined until we have completed the work.

If you have any questions, please contact me at (216) 485-8034.

Respectfully,
CHIEFTAIN TRUCKING & EXCAVATING, INC.

Brian Murphy
Project Manager

CHIEFTAIN TRUCKING AND EXCAVATING, INC. EXTRA WORK COST ANALYSIS

COMPANY:	Panzica Construction Company				
DATE:	March 22, 2024				
PROJECT:	Lorain Crisis Center				
DESCRIPTION:	Undercut building pad and replace with #304 limestone				
PCO #:	10R				
TICKET NUMBER:	NA				
COST CODE:	NA				
		QUANTITY	HOURS	RATE	TOTAL
LABOR	FOREMAN	1	44	\$84.78	\$3,730.32
	LABORER	1	44	\$69.78	\$3,070.32
	OPERATOR	2	44	\$83.41	\$7,340.08
	SUBTOTAL LABOR COSTS				\$14,140.72
	10% OVERHEAD				\$1,414.07
	5% PROFIT				\$777.74
	TOTAL LABOR COSTS				\$16,332.53
EQUIPMENT	CAT 325 F EXCAVATOR	1	18	\$222.81	\$4,010.58
	CAT D6N XL DOZER	1	44	\$134.25	\$5,907.00
	CAT CS-563C SEALING ROLLER	1	26	\$171.80	\$4,466.80
	MULTI-AXLE TRUCK & DRIVER	1	203	\$115.00	\$23,345.00
	SUBTOTAL EQUIPMENT COSTS				\$37,729.38
	10% OVERHEAD				\$3,772.94
5% PROFIT				\$2,075.12	
	TOTAL EQUIPMENT COSTS				\$43,577.43
MATERIAL	#304 limestone	ton	4375	\$28.50	\$124,687.50
	SUBTOTAL MATERIAL COSTS				\$124,687.50
	10% OVERHEAD				\$12,468.75
	5% PROFIT				\$6,857.81
	TOTAL MATERIAL COSTS				\$144,014.06
SUBCONTRACTOR	Dump Fees (Unsuitable Soil)	load	203	\$150.00	\$30,450.00
					\$0.00
					\$0.00
	SUBTOTAL SUBCONTRACTOR COSTS				\$30,450.00
	10% OVERHEAD				\$3,045.00
5% PROFIT				\$1,674.75	
	TOTAL SUBCONTRACTOR COSTS				\$35,169.75
	TOTAL ITEM COST:				\$239,093.78



REQUEST FOR INFORMATION

23-0021 - Lorain County Crisis Receiving Center

RFI#: 11
DATE: 02/27/2024

TO: John Walkosak
Perspectus Architecture
1300 East 9th Street Suite 910
Cleveland, Ohio 44114

FROM: Danielle James
Panzica Construction
739 Beta Drive
Mayfield Village Ohio 44143

INITIATED BY: Danielle James

SUBJECT: Site North Access Road and Building Pad Unsuitable Soils

DRAWING #:

DATE DUE: 03/05/2024

SPEC SECTION:

QUESTION

Per CTL report from 2/21/2024 and design team's directive at the north site access road & building pad, we proceeded with cutting the soil down and spreading it out to dry to re-install the existing soil and achieve compaction. The existing soil will not be able to achieve compaction to build on per site walk with CTL and design team on 3/12/2024.

Per today's site walk, the following was discussed:

1. Do we cut the unsuitable soil to red clay material and haul off unsuitable soil?
2. If we do cut the unsuitable soil, please advise what the unsuitable soil will be replaced with, team discussed compacted #304 limestone.
3. Please advise if this effects the concrete foundation and the building structure being -5ft to red clay.
4. If we have to go down to the red clay on the east side of the building pad, would we have to do the same on the west side where the existing building pad area passed the proof roll?

Please advise how to proceed with the north building pad.

RESPONSES

<u>DATE</u>	<u>FROM(FIRM)</u>	<u>FROM(CONTACT)</u>
03/18/2024	Perspectus Architecture	John Walkosak
Bring the entire building pad up to subgrade elevation, using granular material (sand or ODOT #304 stone) placed in an engineered manner, in accordance to project specifications. After that, during foundation excavations, the on-site consultant should determine in field if the required bearing capacity is achieved at indicated depth. If soft or wet soils are encountered at the footing bottom, overexcavation should then be performed and lean concrete can be utilized in order to replace the overexcavated soils, and should be placed up to bottom of footing elevation.		

Subcontractors: Please notify Panzica of any cost and/or schedule impacts within 5 days or we will assume no impact

Emily Haldi

From: John Walkosak <jwalkosak@perspectus.com>
Sent: Wednesday, March 20, 2024 1:16 PM
To: Pete Klepek
Cc: Danielle James; Emily Haldi; Todd Cooper; Turek, Daniel; Salvatore Rini; Ray Minotas
Subject: RE: Lorain County Crisis Receiving Center: Response to RFI #11 (Site North Access Road and Building Pad Unsuitable Soils)

JOHN WALKOSAK AIA
Senior Project Director

PERSPECTUS

1300 East 9th Street, Suite 910 | Cleveland, Ohio 44114
office (216) 752-1800
direct (216) 377-3703
mobile (216) 235-7654
jwalkosak@perspectus.com

perspectus.com

From: Pete Klepek <pklepek@panzica.com>
Sent: Tuesday, March 19, 2024 11:41 AM
To: John Walkosak <jwalkosak@perspectus.com>
Cc: Danielle James <djames@panzica.com>; Emily Haldi <ehaldi@panzica.com>; Todd Cooper <ToddCooper@hillintl.com>; Turek, Daniel <DanielTurek@hillintl.com>
Subject: FW: Lorain County Crisis Receiving Center: Response to RFI #11 (Site North Access Road and Building Pad Unsuitable Soils)

John
Wanted to follow up on this RFI response to get clarification. We need to get all this priced out and **NEED** to have clear direction **FOR** the subcontractors to have an accurate scope for pricing. See our follow up questions below. These are the questions that were in RFI 11. I have put your answers where I think they pertain to.
Thanks
Pete

Per today's site walk, the following was discussed:

1. Do we cut the unsuitable soil to red clay material and haul off unsuitable soil? **Please confirm that we cut to the red clay and haul unsuitable soils offsite? Remove unsuitable soils to reach soils of bearing capacity**
2. If we do cut the unsuitable soil, please advise what the unsuitable soil will be replaced with, team discussed compacted #304 limestone. **Bring the entire building pad up to subgrade elevation, using granular material (sand or ODOT #304 stone) placed in an engineered manner, in accordance to project specifications. Please confirm that you mean the area that did not pass the proof roll on the eastside and not the **entire** building pad?**

In any area, remove unsuitable soils – if soils are passing tests they do not need to be removed.

3. Please advise if this effects the concrete foundation and the building structure being -5ft to red clay. After that, during foundation excavations, the on-site consultant should determine in field if the required bearing capacity is achieved at indicated depth.

4. If we have to go down to the red clay on the east side of the building pad, would we have to do the same on the west side where the existing building pad area passed the proof roll? If soft or wet soils are encountered at the footing bottom, overexcavation should then be performed and lean concrete can be utilized in order to replace the overexcavated soils, and should be placed up to bottom of footing elevation. Please confirm that the differential deflection from the westside silt sand mix and the eastside ODOT #304 stone per RFI response will not have a issue with foundations, stem walls and SOG? **Differential Settlement is not anticipated to be an issue. There should not be any differential settlements if part of the building is resting on originally deposited granular soils and part of it on engineered placed fill consisting of sand or ODOT #304 stone.**



Pete Klepek

Superintendent | M: 216-536-9704

pklepek@panzica.com

Cleveland, Ohio | 440-442-4300

Naples, Florida | 239-944-4300

panzica.com

Established in 1956, celebrating our 67th year!

Confidentiality Notice: The information in this e-mail message, and any attachment, is intended for the sole use of the individual and entity to whom it was addressed. This e-mail may contain information which is privileged and confidential and which may be protected from disclosure. If you are not the intended recipient you are hereby notified that you have received this communication in error and any review, disclosure, dissemination, distribution or copying of it, or its contents is strictly prohibited. If you think you have received this message in error please e-mail the sender and destroy all copies of this communication and any attachments.

From: John Walkosak (Perspectus Architecture) <Panzica_Construction@procoretech.com>

Sent: Monday, March 18, 2024 4:28 PM

To: Pete Klepek <pklepek@panzica.com>

Subject: Lorain County Crisis Receiving Center: Response to RFI #11 (Site North Access Road and Building Pad Unsuitable Soils)



Daily Activity Report

General

Client : MHARS Lorain County High Temp (°F) : 59
Project : Lorain County Crisis Receiving Center Low Temp (°F) : 43
Project No. : 23020066CLE Current Conditions : Clear

Time

Table with 7 columns: Date, Travel Start / Prep, Job Start, Lunch, Down Time, Job Stop, Travel Stop. Row 1: 02/21/2024, 0.00, 12:30, 0.00, 0.00, 15:00, 0.00

Project Phase

Table with 6 columns: Phase Code, Work Description, Billing Branch-Dept, Staff Type, ST, OT. Row 1: 210, Proofrolling, CLE-02, 1013, 2.50, 0.00

Expenses

Table with 2 columns: Expenses, Cost. Row 1: N/A, 0.00

Equipment/Reimbursable

Table with 3 columns: Equipment Name, Equipment Description, Quantity. Row 1: N/A, N/A, N/A

Mileage

Per Trip \$ Charge : 40.00

Project Contacts

Table with 4 columns: Name, Company, Cell Number, E-Mail Address

Safety Items

SDS Location : N/A
Hazardous Materials : N/A

Client : MHARS Lorain County
Project : Lorain County Crisis Receiving Center
Project No. : 23020066CLE
Date : 02/21/2024

Remarks

General Remarks : As requested, a representative with CTL Engineering arrived onsite at 1 pm to observe a proof roll for the North Building and access road. Chieftain is using a truck that has a gross weight of 50020 Pounds. Chieftain excavating used their roller to compact the fill area of the building foot print and the access driveway that goes around the building ready for the proof roll. Chieftain had the truck back up to the south east corner of the proposed building and drove the truck forward. The proof roll truck left ruts that approximated 8-10" in depth. Chieftain then had the truck back up again to make another pass working towards the Northeast corner of the building. The second pass the truck left 6-8" ruts. The third pass the proof roll truck left 4-6" ruts. The fourth pass the proof roll truck left 2-4" ruts. The total area that the proof roll truck left rutting is approximately 81'x 108'. After proof rolling the building foot truck the proof roll truck drove the access driveway. There was only 1 20'x40' area where the proof roll truck left 4-6" ruts.

Lexi, the inspector onsite, called the project manager Ed Isabella with CTL Engineering, to let him know the results and the next step to stabilize the areas the rutted from the proof roll. Ed advised to have Chieftain cut 2 - 3' down within the area where the proof roll failed and replace the material in 6-8" lifts, compacting each lift. Ed also stated that CTL Engineering would come back out and test for compaction on each compacted lift that Chieftain placed within the 81'x108' area. Lexi, told Bryan, the foreman with Chieftain and Pete, the project superintendent with Panzica, that Chieftain needs to cut down 2 -3' in the areas, replace the material in 6-8" lifts, and compact each lift with a roller. Lexi also stated that CTL Engineering would need to come out and test for compaction for each lift within the areas that need cut. After proof rolling, Chieftain moved over to the rutted area from the proof roll and made a single cut down to 2-3' down to investigate the soil. Chieftain started to encounter more rocks and clay when they cut down to 2-3'. Chieftain backfilled the areas where they cut and compacted the entire rutted area to prepare for the expected rain the next day.

Attention Items

Client Signature : _____
Name :

CTL Signature : _____
Name : Alexis Brown

**** Confidentiality Note: **** This report is intended for use only by the individual or entity to which it is addressed and may contain information that is privileged, confidential, and exempt from disclosure under applicable law. If the reader of this message is not the intended recipient or the employee or agent responsible for delivering the message to the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited. Information stated on this report is subject to engineering review and comment by our staff.

Client : MHARS Lorain County
Project : Lorain County Crisis Receiving Center
Project No. : 23020066CLE
Date : 02/21/2024

PHOTOS



First proof roll pass

Client : MHARS Lorain County
Project : Lorain County Crisis Receiving Center
Project No. : 23020066CLE
Date : 02/21/2024

PHOTOS



Second proof roll pass

Client : MHARS Lorain County
Project : Lorain County Crisis Receiving Center
Project No. : 23020066CLE
Date : 02/21/2024

PHOTOS



Third proof roll pass

Client : MHARS Lorain County
Project : Lorain County Crisis Receiving Center
Project No. : 23020066CLE
Date : 02/21/2024

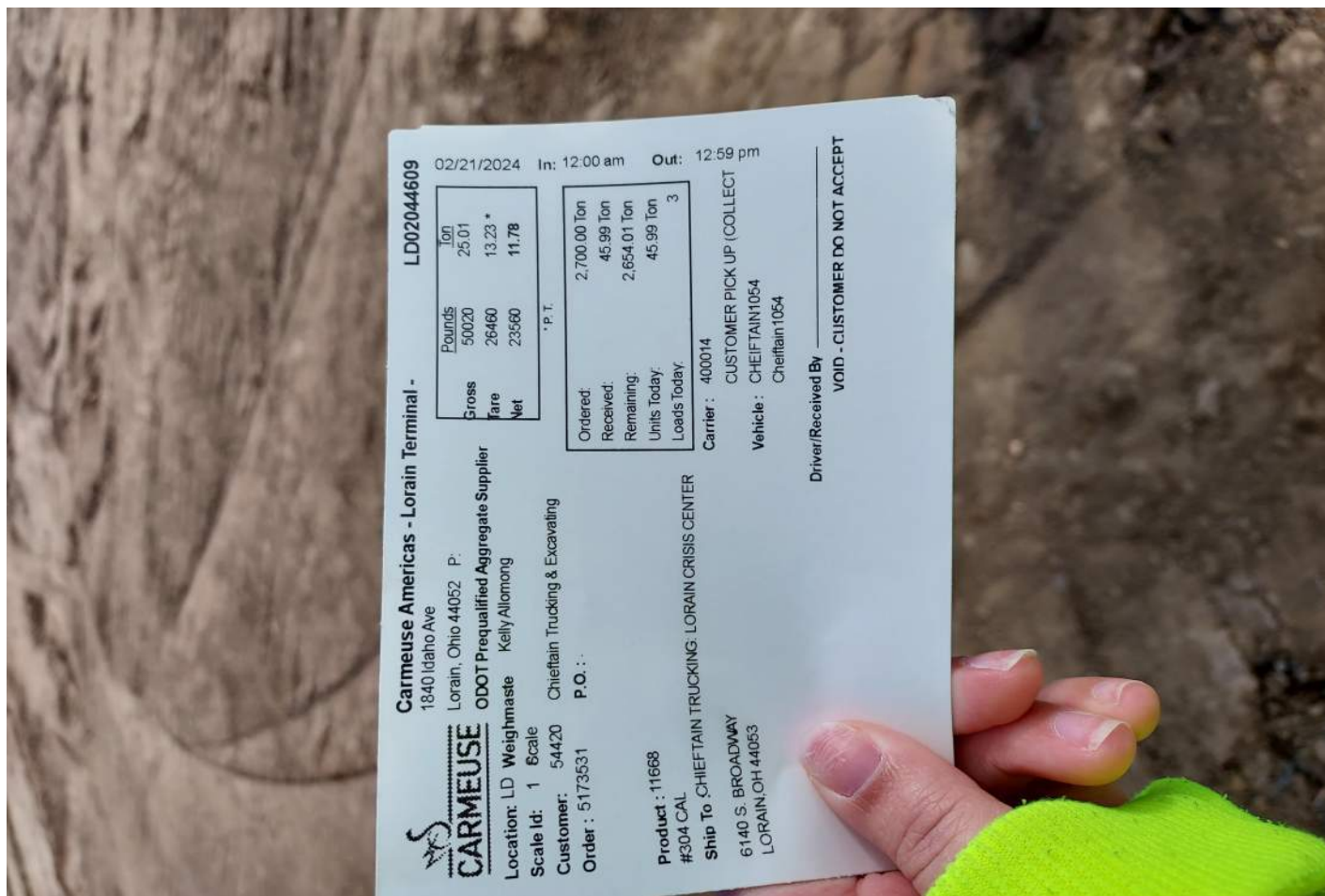
PHOTOS



Fourth proof roll pass

Client : MHARS Lorain County
Project : Lorain County Crisis Receiving Center
Project No. : 23020066CLE
Date : 02/21/2024

PHOTOS



Proof roll truck weight ticket

Client : MHARS Lorain County
Project : Lorain County Crisis Receiving Center
Project No. : 23020066CLE
Date : 02/21/2024

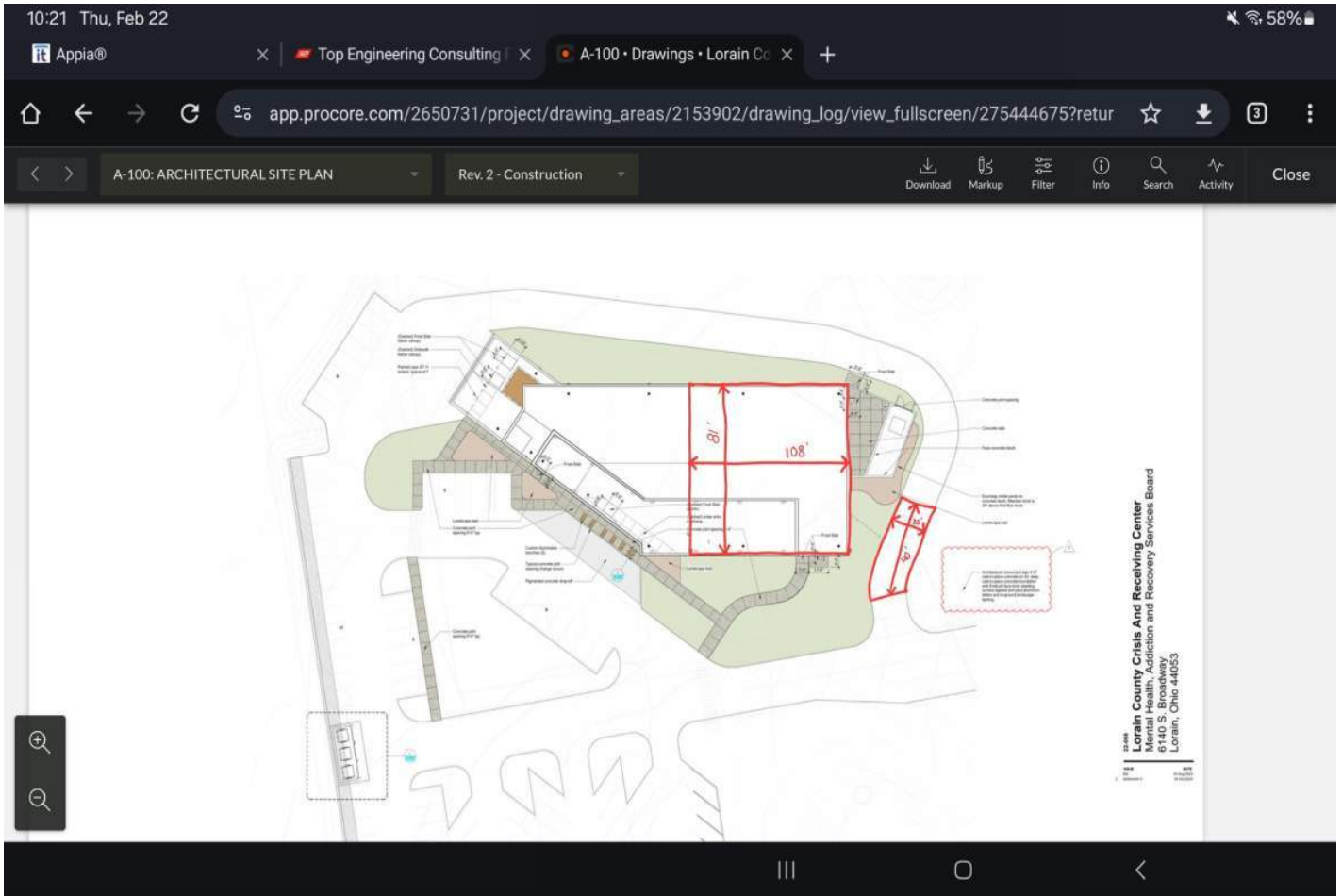
PHOTOS



Depth check for bad area determined by proof roll

Client : MHARS Lorain County
Project : Lorain County Crisis Receiving Center
Project No. : 23020066CLE
Date : 02/21/2024

PHOTOS



General area that failed the proof roll



Daily Activity Report

General

Client : MHARS Lorain County High Temp (°F) : 52
Project : Lorain County Crisis Receiving Center Low Temp (°F) : 44
Project No. : 23020066CLE Current Conditions : Clear

Time

Table with 7 columns: Date, Travel Start / Prep, Job Start, Lunch, Down Time, Job Stop, Travel Stop. Row 1: 03/11/2024, 0.00, 8:00, 0.00, 0.00, 16:00, 0.00

Project Phase

Table with 6 columns: Phase Code, Work Description, Billing Branch-Dept, Staff Type, ST, OT. Row 1: 200, Daily Activity Report, CLE-02, 1013, 8.00, 0.00

Expenses

Table with 2 columns: Expenses, Cost. Row 1: N/A, 0.00

Equipment/Reimbursable

Table with 3 columns: Equipment Name, Equipment Description, Quantity. Row 1: N/A, N/A, N/A

Mileage

Per Trip \$ Charge : 40.00

Project Contacts

Table with 4 columns: Name, Company, Cell Number, E-Mail Address

Safety Items

SDS Location : N/A
Hazardous Materials : N/A

Remarks

General Remarks : As requested, a representative with CTL Engineering arrived onsite at 8 am to observe the work performed by Chieftain Excavating. Chieftain Excavating is working on excavating the unstable soil from the building pad that was discovered during a proofroll that took place on 2/21/2024. Chieftain is using a bulldozer to cut within the area of unstable soil down to 3 feet and spreading it out so the soil can dry before placing the material back in lifts. They are cutting down to three feet because clay and rock was discovered when they did a trial cut on 2/21/2024. While Chieftain was pushing the unstable soil and spreading it out CTL Technician took the nuke gauge and tested the material for the moisture content. The nuke guge was reading back 14-15% moisture. Chieftain continued on working on cutting the unstable soil for the rest of the day and spreading out the cut material to dry it out. Chieftain cut down to 2 feet within the area by the end of the day.

Client : MHARS Lorain County
Project : Lorain County Crisis Receiving Center
Project No. : 23020066CLE
Date : 03/11/2024

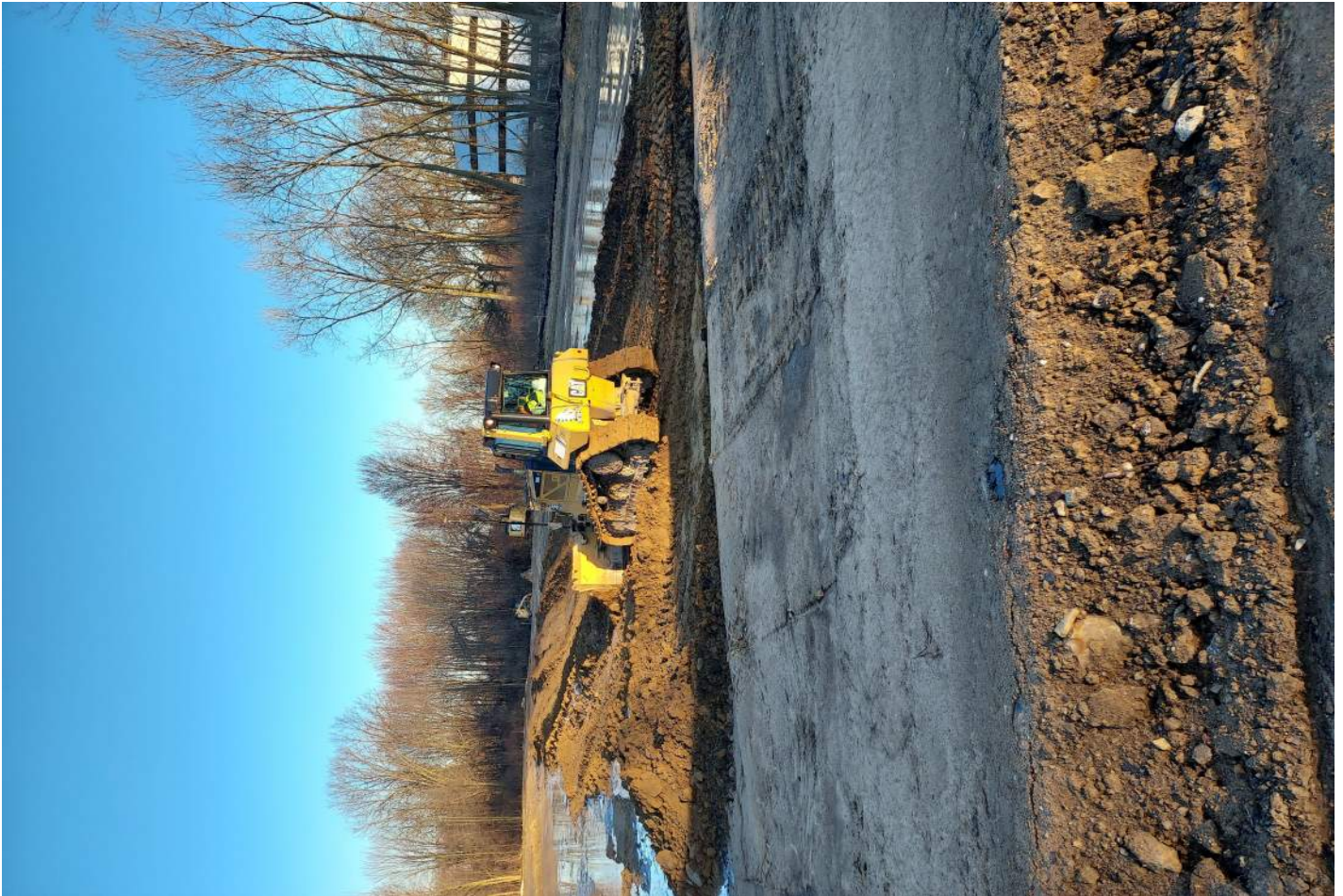
Attention Items

Client Signature : _____ CTL Signature : _____
Name : Name : Alexis Brown

** Confidentiality Note: ** This report is intended for use only by the individual or entity to which it is addressed and may contain information that is privileged, confidential, and exempt from disclosure under applicable law. If the reader of this message is not the intended recipient or the employee or agent responsible for delivering the message to the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited. Information stated on this report is subject to engineering review and comment by our staff.

Client : MHARS Lorain County
Project : Lorain County Crisis Receiving Center
Project No. : 23020066CLE
Date : 03/11/2024

PHOTOS



Cutting the unstable soil within the building pad

Client : MHARS Lorain County
Project : Lorain County Crisis Receiving Center
Project No. : 23020066CLE
Date : 03/11/2024

PHOTOS



Cutting the unstable soil within the building pad

Client : MHARS Lorain County
Project : Lorain County Crisis Receiving Center
Project No. : 23020066CLE
Date : 03/11/2024

PHOTOS



Cutting the unstable soil within the building pad

Client : MHARS Lorain County
Project : Lorain County Crisis Receiving Center
Project No. : 23020066CLE
Date : 03/11/2024

PHOTOS



Cutting the unstable soil within the building pad

Client : MHARS Lorain County
Project : Lorain County Crisis Receiving Center
Project No. : 23020066CLE
Date : 03/11/2024

PHOTOS



Cut about 1 foot down

Client : MHARS Lorain County
Project : Lorain County Crisis Receiving Center
Project No. : 23020066CLE
Date : 03/11/2024

PHOTOS



Cutting the unstable soil within the building pad

Client : MHARS Lorain County
Project : Lorain County Crisis Receiving Center
Project No. : 23020066CLE
Date : 03/11/2024

PHOTOS



Moisture content from cut material

Client : MHARS Lorain County
Project : Lorain County Crisis Receiving Center
Project No. : 23020066CLE
Date : 03/11/2024

PHOTOS



Cut about 2 feet down

Client : MHARS Lorain County
Project : Lorain County Crisis Receiving Center
Project No. : 23020066CLE
Date : 03/11/2024

PHOTOS



About 2 feet down



Daily Activity Report

General

Client : MHARS Lorain County High Temp (°F) : 50
Project : Lorain County Crisis Receiving Center Low Temp (°F) : 45
Project No. : 23020066CLE Current Conditions : Clear

Time

Table with 7 columns: Date, Travel Start / Prep, Job Start, Lunch, Down Time, Job Stop, Travel Stop. Row 1: 03/11/2024, 07:30, 08:15, 0.00, 0.00, 9:45, 10:30

Project Phase

Table with 6 columns: Phase Code, Work Description, Billing Branch-Dept, Staff Type, ST, OT. Rows: 200 Daily Activity Report CLE-02 1003 1.50 0.00; 119 Travel CLE-02 1003 1.50 0.00

Expenses

Table with 2 columns: Expenses, Cost. Row 1: N/A, 0.00

Equipment/Reimbursable

Table with 3 columns: Equipment Name, Equipment Description, Quantity. Row 1: N/A, N/A

Mileage

Per Trip \$ Charge : 40.00

Project Contacts

Table with 4 columns: Name, Company, Cell Number, E-Mail Address

Safety Items

SDS Location : N/A
Hazardous Materials : N/A

Client : MHARS Lorain County
Project : Lorain County Crisis Receiving Center
Project No. : 23020066CLE
Date : 03/11/2024

Remarks


General Remarks : CTL Project Manager Ed Isabella reported to the project site to meet with Panzica site representatives and to discuss the plan for preparing the eastern half of the building pad. The day started with confirming the plan from the previous week: Chieftan was to attempt to cut approximately two feet from the east half, spread the material out to dry, and then recompact in place.

Later in the day, additional soft and spongy/unstable material was encountered; however, Mr. Isabella had left the site prior to this.

Panzica requested that CTL/Mr. Isabella return to the site the morning of 3/12 for a site meeting with Perspectus and KS Associates.

Attention Items

Client Signature : _____
Name :

CTL Signature : 
Name : Edwin Isabella

** Confidentiality Note: ** This report is intended for use only by the individual or entity to which it is addressed and may contain information that is privileged, confidential, and exempt from disclosure under applicable law. If the reader of this message is not the intended recipient or the employee or agent responsible for delivering the message to the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited. Information stated on this report is subject to engineering review and comment by our staff.



Daily Activity Report

General

Client	: MHARS Lorain County	High Temp (°F)	: 50
Project	: Lorain County Crisis Receiving Center	Low Temp (°F)	: 45
Project No.	: 23020066CLE	Current Conditions	: Clear

Time

Date	Travel Start / Prep	Job Start	Lunch	Down Time	Job Stop	Travel Stop
03/12/2024	07:30	08:15	0.00	0.00	9:45	10:30

Project Phase

Phase Code	Work Description	Billing Branch-Dept	Staff Type	ST	OT
200	Daily Activity Report	CLE-02	1003	1.50	0.00
119	Travel	CLE-02	1003	1.50	0.00

Expenses

Expenses	Cost
N/A	0.00

Equipment/Reimbursable

Equipment Name	Equipment Description	Quantity
N/A	N/A	

Mileage

Per Trip \$ Charge : 40.00

Project Contacts

Name	Company	Cell Number	E-Mail Address
------	---------	-------------	----------------

Safety Items

SDS Location : N/A
Hazardous Materials : N/A

Client : MHARS Lorain County
Project : Lorain County Crisis Receiving Center
Project No. : 23020066CLE
Date : 03/12/2024

Remarks

General Remarks : On this date, CTL Project Manager Ed Isabella reported to the project site to discuss remediation of the eastern half of the building pad. During the previous day's excavation work, the exposed, silty sand was found to be well above optimum moisture and severely unstable. Ground water appeared to have leached up through the exposed soils and had pool at the most eastern end of the excavation.


Upon arrival, Mr. Isabella observed Chieftan crews began scrapping additional soil from the undercut down to 2 feet below finished subgrade. This material continued to appear soft and unstable, and so a small test pass was excavated deeper, down to the clay/weathered shale approximately 4 to 5 feet below finished subgrade. The layer of red clay/shale was more stable and appeared suitable for foundation bearing.

Following these observations, a discussion was held onsite for what to do in regards to the building pad. Chieftan and Panzica had proposed utilizing 304 to bring the pad back to finished grade; CTL believes that would stabilize the pad, but there are concerns regarding differential settlement if the eastern footings bear on aggregate, versus the western half, which potentially could bear on native soils.

For the time being, the soft, wet silty-sand was to be left in place to protect the clay/shale from breaking down due to forecasted rain. A meeting is scheduled for Thursday, 3/14, to discuss potential structural concerns with the design team.

Attention Items

Client Signature : _____
Name :


CTL Signature : _____
Name : Edwin Isabella

** Confidentiality Note: ** This report is intended for use only by the individual or entity to which it is addressed and may contain information that is privileged, confidential, and exempt from disclosure under applicable law. If the reader of this message is not the intended recipient or the employee or agent responsible for delivering the message to the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited. Information stated on this report is subject to engineering review and comment by our staff.



Daily Activity Report

General

Client : MHARS Lorain County High Temp (°F) : 65
Project : Lorain County Crisis Receiving Center Low Temp (°F) : 49
Project No. : 23020066CLE Current Conditions : Clear

Time

Table with 7 columns: Date, Travel Start / Prep, Job Start, Lunch, Down Time, Job Stop, Travel Stop. Row 1: 03/12/2024, 0.00, 8:00, 0.00, 0.00, 16:00, 0.00

Project Phase

Table with 6 columns: Phase Code, Work Description, Billing Branch-Dept, Staff Type, ST, OT. Row 1: 200, Daily Activity Report, CLE-02, 1013, 8.00, 0.00

Expenses

Table with 2 columns: Expenses, Cost. Row 1: N/A, 0.00

Equipment/Reimbursable

Table with 3 columns: Equipment Name, Equipment Description, Quantity. Row 1: N/A, N/A, N/A

Mileage

Per Trip \$ Charge : 40.00

Project Contacts

Table with 4 columns: Name, Company, Cell Number, E-Mail Address

Safety Items

SDS Location : N/A
Hazardous Materials : N/A

Client : MHARS Lorain County
Project : Lorain County Crisis Receiving Center
Project No. : 23020066CLE
Date : 03/12/2024

Remarks

General Remarks : A requested, a representative with CTL Engineering arrived onsite at 8am to observe the work being perform by Chieftain Excavating today. Today Chieftain is working on cutting the rest of the unstable soils within the building pad. They are continuing where they left off yesterday. Chieftain finished getting the unstable down to just a couple of inches to the clay layer and then started to stockpile the excavated unstable soil. Chieftain left a few inches of the unstable soil to help protect the stable soil underneath it from the potential rain until a solution is found to backfill the unstable soil area. A meeting will take place on thursday to go over the the issue with the unstable soil within the building pad.

A meeting was held this morning to go over the unstable soil area within the building pad. It was determined that using the silly sand to backfill in lifts will not work and is not suitable to build one. Meeting was held with Ed, project manager wit CTL Engineering, Pete, the project superintendent with Panzica, Brian, the onsite foreman with Chieftain 1, and the projects engineers. The plan right now that everyone agreed to it to continue cutting the unstable soil out until a plan has been established on how we are going to backfill the area and with what material. They excavated material will stay onsite until a plan is determined. It was also mentioned to have Chieftain place the filter fabric on top of the clay surface to help protect it from water. Just lie ot was done over at the south proposed driveway/ parking.

Attention Items

Client Signature : _____
Name :

CTL Signature : _____
Name : Alexis Brown

** Confidentiality Note: ** This report is intended for use only by the individual or entity to which it is addressed and may contain information that is privileged, confidential, and exempt from disclosure under applicable law. If the reader of this message is not the intended recipient or the employee or agent responsible for delivering the message to the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited. Information stated on this report is subject to engineering review and comment by our staff.

Executive Director Report

April 23, 2024

Lorain County Crisis Receiving Center site visit by OhioMHAS

Chris Mazzola, from the Capital Planning and Management office at OhioMHAS, conducted a visit to the CRC construction site and met with Michael Doud (MHARS Board), Melissa Fischer and Don Schiffbauer (Nord Center) and the Panzica Construction team on Wednesday, April 10th.

MHARS Board 2024 Levy

Lorain County commissioners unanimously passed legislation at their meeting April 9 allowing the Mental Health, Addiction and Recovery Services (MHARS) Board of Lorain County to seek a levy renewal on the Nov. 5 general election ballot. If voters approve, the 1.2 mills levy would be in effect for 10 years to support the MHARS Board, according to county documents.

ODH Reporting Drug Overdose - O.A.C. 3701-3-16

Requires “dedicated emergency departments” to report drug overdoses within two business days of diagnosis using forms and formats approved by ODH. Effective 4/8/24

The OhioMHAS Bureau of Capital Planning and Management

Conducted a pre-application meeting with Road To Hope and MHARS Board on April 10th. The project will add 112 L1, L2 & L3 recovery beds in the community. More information to follow.

NBH Regional Forensic Stakeholder Meeting

The Forensic Bureau at OhioMHAS has been closely monitoring the rise in adult competency restoration needs occurring nationally and in Ohio. As part of the response to this trend in Ohio, the OhioMHAS Forensic Bureau is planning to conduct a series of regional forensic stakeholder meetings designed to help understand the scope of the adult Competency to Stand Trial (CST) needs in each region and to develop specific strategies to address the needs of adult defendants involved in the CST processes, while also identifying opportunities for collaboration on new and/or existing projects. The regions attending are the RPH hospital regions. The NBH Meeting will be April 26, 2024 Cuyahoga County Public Library Parma-Powers Branch, Parma.

Lorain County Reentry Coalition

April 17, the initiative is to help prison inmates plan for release, deal with the problems once they are out and guide them to available resources. Guests role-played at the Wednesday event, working from details that represented a person who was recently released from prison. Folders contained a name, documents and money to get started and each attempted to complete the different tasks that recently released people undertake every day after release, from visiting with their probation officer to taking drug tests, getting a job and going to the grocery store. [Lorain Salvation Army debuts incarceration reentry simulation | Chronicle Telegram](#)

The LCADA Way & The Nord Center Merger

The Nord Center and The LCADA Way have announced that their respective boards have approved an agreement for the two agencies to merge effective July 1, 2024. The two agencies have deepened their working relationship as they prepare for the launch of the new Lorain County Crisis Receiving

Executive Director Report

April 23, 2024

Center set to open in 2025. The original plan for the two agencies to run that facility jointly sparked conversations of stronger ties and the potential merger.

UPCOMING TRAININGS, OUTREACH & EVENTS

April 2024

22-26 – CIT Training at Amy Levin Center

27 – National Prescription Drug Take Back Day

27 – Out of the Darkness Suicide Prevention Walk at LCCC

MAY 2024 – National Mental Health Awareness Month

11 – Spanish MHFA Training at Amy Levin Center

27 – Office Closed in Observance of Memorial Day

31 – Disparities in Behavioral Health IDEA Fundamentals (virtual)

Strategic Planning Meeting Report

Thursday, April 18, 2024 5:30pm Conference Room

The Strategic Planning Committee is to assist the board with its responsibilities for the organization's mission, vision and strategic direction. The Committee shall evaluate recommendations and strategies related to strategic planning preparations for 2024.

Committee Members Present: Mike Babet, Dr. Hope Moon, Jim Schaeper, Earl Martin, Michele Flanagan

Committee Members Absent: Charlita Anderson-White, Robert Stipe

Staff Present: Michael Doud

I. Informational:

- Members discussed the 2021-2023 Strategic Plan developed by Brown Consulting. In addition, members were provided with the Community Assessment Plan (CAP) Scorecard approved by OhioMHAS 2023. Members agreed the scorecard is a good starting point.
- Here is some suggested follow-up work:
 1. Determine if there is useful information from the public opinion poll recently conducted that may be helpful in this process.
 2. Consider a consultant with the ability to work with small group of board members and staff with engagement feedback from community stakeholders during this process.
 3. Develop a Plan with SMART objectives that are well defined, specific and measurable. The request is to seek consultant in the range of 20-25k.

II. New Business – None at this time

Next Meeting: TBD



**Mental Health,
Addiction & Recovery
Services Board of
Lorain County**

2023-2025 Community Assessment Plan

Priority Area	Target	Most Recent Period	Baseline % Change
Priority 1: Prevention			
Number of Unintentional Drug Overdose Deaths			
Number of Deaths by suicide			

Priority Area	Target	Most Recent Period	Baseline % Change
Priority 2: Mental Health Treatment			
Number of Calls through the Navigator Line			
Number of Waitlists			

Priority Area	Target	Most Recent Period	Baseline % Change
Priority 3: Substance Use Disorder Treatment			
Number of SUD Programs and indicate their level of care and population served to ensure a full range of services are available.			



**Mental Health,
Addiction & Recovery
Services Board of
Lorain County**

2023-2025 Community Assessment Plan

Priority Area	Target	Most Recent Period	Baseline % Change
Priority 4: Medication-Assisted Treatment			
Number of Providers that offer 24/7 MAT induction and link to clients to community programming for follow-up and continued care			
Total # MAT Providers			

Priority Area	Target	Most Recent Period	Baseline % Change
Priority 5: Crisis Services			
MRSS Number of Referrals			
Number of Emergency Departments visits – Children			
MRSS Number Assessed			

Priority Area	Target	Most Recent Period	Baseline % Change
Priority 6: Harm Reduction			
Number of persons accessing services			



**Mental Health,
Addiction & Recovery
Services Board of
Lorain County**

2023-2025 Community Assessment Plan

Priority Area	Target	Most Recent Period	Baseline % Change
Priority 7: Recovery Supports			
Number of Individuals Trained			
Percentage of those trained attaining certification			
Number of Recovery Supports developed			

Priority Area	Target	Most Recent Period	Baseline % Change
Priority 8: Pregnant Women with Substance Use Disorder:			
Number of Pregnant Clients			
Number of those linked to maternal peer support and the pre and post measures of those clients			

Priority Area	Target	Most Recent Period	Baseline % Change
Priority 9: Parents with Substance Use Disorder with Dependent Children			
Number of Ohio START Steering Committee Members			



**Mental Health,
Addiction & Recovery
Services Board of
Lorain County**

2023-2025 Community Assessment Plan

2024 STRATEGIC INITIATIVES

- STRENGTHENING SERVICE DELIVERY SYSTEM
- MEASURING IMPACT
- MAXIMIZE FUNDING
- COMMUNICATIONS

GOAL: PROMOTE AND MAINTAIN HIGH QUALITY, COST EFFECTIVE AND ACCESSIBLE BEHAVIORAL HEALTH PROGRAMS AND SERVICES THAT ARE RESPONSIVE TO THE DIVERSE NEEDS OF ALL CLIENTS AND RESIDENTS OF LORAIN COUNTY

- ENSURE THAT BEHAVIORAL HEALTH PROGRAMS/SERVICES PRIORITIES AND INITIATIVES ARE CONSISTENT WITH STATE AND LOCAL PLANNING NEEDS
- ADDRESS ACCESS BARRIERS TO BEHAVIORAL HEALTHCARE IN LORAIN COUNTY
- IDENTIFY, PRIORITIZE AND PROVIDE SUPPORT FOR EVIDENCE-BASED PRACTICE STANDARDS FOR SYSTEM PROGRAMS/SERVICES
- PARTNER WITH STAKEHOLDERS TO IMPROVE LORAIN COUNTY'S CRISIS CONTINUUM TO PROVIDE APPROPRIATE AND TIMELY RESPONSES TO CRISES
- PARTNER WITH STAKEHOLDERS TO IMPROVE LORAIN COUNTY'S HOUSING CAPACITY (RECOVERY, PERMANENT, SHORT-TERM)
- INCREASE SYSTEM CAPACITY FOR PREVENTION SERVICES

GOAL: CREATE A SYSTEM-WIDE MODEL OF PERFORMANCE IMPROVEMENT (PI) / INFORMATION TECHNOLOGY THAT EMPLOYS DATA-INFORMED DECISION-MAKING REGARDING SYSTEM PERFORMANCE, EFFECTIVENESS OF CLIENT OUTCOMES, ACCOUNTABILITY AND OVERSIGHT.

- ENSURE THE COMPLETION OF CULTURE OF QUALITY (COQ) CERTIFICATION



**Mental Health,
Addiction & Recovery
Services Board of
Lorain County**

2023-2025 Community Assessment Plan

GOAL: ENSURE THAT COMMUNITY MEMBERS KNOW THAT SERVICES EXIST, HOW TO CONNECT TO THEM, AND THAT SERVICES ARE PLANNED, FUNDED AND MONITORED BY A KNOWLEDGEABLE AUTHORITY.

- INCREASE THE VISIBILITY AND COMMUNITY'S UNDERSTANDING OF THE MHARS BOARD OF LORAIN COUNTY.

GOAL: ENSURE A LEADERSHIP CULTURE WHICH WILL ENABLE MHARS TO ACHIEVE ITS MISSION/VISION AND BE THE RECOGNIZED LEADER IN INTEGRATED BEHAVIORAL HEALTH SERVICES

- RECRUIT AND ENGAGE A DIVERSE BOARD OF DIRECTORS TO EFFECTIVELY ADVANCE THE MHARS BOARD'S MISSION AND VISION.
- EMPOWER BOARD MEMBERS' KNOWLEDGE AND UNDERSTANDING OF COMMUNITY NEEDS, SERVICE PROVIDER PROGRAM EFFECTIVENESS AND THE BOARD'S GOVERNANCE RESPONSIBILITIES
- COMPLETE A MHARS BOARD OF DIRECTOR'S SELF EVALUATION OF PERFORMANCE.
- ENSURE PREPARATION AND PASSAGE OF LORAIN COUNTY LEVIES SUPPORTING BEHAVIORAL HEALTH (LANGUAGE, RENEWAL AND TIMING).



BOARD MEETING – CONSENT AGENDA – April 23, 2024
RESOLUTION No. 24-04-02

Once the motion has been received to approve the consent agenda the chairman opens the floor for any questions from the board members. During this time, board members may ask questions or request items be removed from the consent agenda for further discussion. If any items were removed from the consent agenda the chairman will determine where on the agenda those items will be discussed.

Executive Committee:

1. Recommendation – Approval of Change Order #3 for the LCCRC Project in the amount not to exceed \$278,625.00. **RESOLUTION No. 24-04-03 C**

Finance Committee:

1. Recommendation – Approval of the MHARS Board FY24 Financial Statements through March 2024 **RESOLUTION No. 24-04-04 C**
2. Recommendation – Approval of the MHARS Board Listing of Expenses for March totaling \$1,979,618.08 **RESOLUTION No. 24-04-05 C**
3. Recommendation – Approval of the MHARS Board FY24 budget revisions **RESOLUTION No. 24-04-06 C**
4. Recommendation – Approval of *Contracts to be Authorized by the MHARS Board of Directors.* **RESOLUTION No. 24-04-07 C**

Nominating Committee:

1. Recommendation – Approval to submit application of Wanda Ewing to OhioMHAS to fill the current vacant seat term expiring 6/30/2026. **RESOLUTION No. 24-04-08 C**

© = Consent Agenda by the Board Chair

C = Consent Agenda by the Committee Chair