

**507 Collaborative Projects Summary**

| <b>PROJECT NAME</b>                             | <b>Project Category</b> | <b>Services/Programs</b>   | <b>Outcomes/Notes</b>   | <b>Lead Board/Partners</b>   | <b>Collaborative</b> |
|---|-------------------------|--|---|--|----------------------|
| Detox Services                                  | AoD treatment           | Purchase Detoxification Services from local hospital or regional provider.   | detoxification services.  | Fairfield County ADAMH Board, Healthcare providers, BH providers, consumers, family members, local government, courts, law enforcement, schools, DD Board, CSB Board, JFS Dept., FACFC Council, Health Depts., FQHC, and other interested constituents.  | Appalachia           |
| Medication Assisted Treatment                   | AoD treatment           | Purchase Medication Assistance Treatment Capacity and a variety of medications   | Goal: Engage persons in long term treatment, reduce risk of overdose, reduce medical costs, improve client quality of life. (\$41,000 includes physician time, physician's assistant/nursing staff, office staff, client supports; \$21,500 for medication) | Fairfield County ADAMH Board, Federally Qualified Health Clinic, BH providers, consumers, family members, local government, courts, law enforcement, DD Boards, CSB Boards, JFS Depts., other interested constituents. Estimated # of participants: 60.  | Appalachia           |
| Muskingum Enhanced Addiction Treatment          | AoD treatment           | Enhance Addiction Treatment Services.  | This project will address gaps in the AOD service continuum that would otherwise be a challenge in SFY 15.  | Muskingum Area Mental Health and Recovery Services Board, MBH, Coscocton Behavioral Health, Alcohol and Drug Services of Guernsey County, Morgan Behavioral Health, Perry Behavioral Health, Noble Behavioral Health, HOPE Court (drug court) in Muskingum and Guernsey County, and Stanton Villa.   | Appalachia           |
| Regional 507 Prenatal Care                      | AoD treatment           | Implement prenatal care coordination services to engage pregnant substance abusing women in treatment and follow them throughout pregnancy and the early postnatal period. Also, educate physicians, key referral sources and the community.   | for staffing and materials  | Participating Boards: Adams-Lawrence-Scioto, Athens-Hocking-Vinton, Belmont-Harrison-Monroe, Fairfield, Gallia-Jackson-Meigs, Jefferson, Muskingum Area, and Washington; healthcare providers, BH providers, local government, courts, law enforcement, schools, DD Boards, CSB Boards, JFS Depts., FCFC Councils, Health Depts., family members, and other interested constituents. | Appalachia           |
| Residential Treatment Facility                  | AoD treatment           | Residential Treatment Operational Costs  |   | Washington County Behavioral Health Board and Signature Health   | Appalachia           |
| Alcohol, Opiate and Other Drug Treatment/CGM    | AoD treatment           | Detox (partnering w/ Southwest Collaborative bed days) purchase of vivitrol other AoD medications, and transportation to treatment, court drug testing and embedded vocational services for opiate addicted clients  | Maintain 90% bed day occupancy, develop tracking system, and engage 75% of clients post-detox treatment   | Clark = Lead + Local Providers + Southwest Collaborative for detox services  | Central              |
| Ambulatory Detox and Extended MAT Pilot Program | AoD treatment           | Pilot an Ambulatory Detox Program with short-term housing or recovery housing  | Provide MAT services to 100 clients, reduce # of re-offenders in drug court; Services up to 50 people, reduction in hospital stays by 10%   | Union + Logan-Champaign + Provider(s)  | Central              |
| Medication Assisted Treatment Expansion/DM      | AoD treatment           | Expansion of Medication Assisted Treatment (MAT)   | Increase capacity to serve opiate addicted clients by 34, extend time opiate addicted clients engage in MAT Tx. From 3 to 12 months.  | Delaware-Morrow = Lead + Criminal Justice System + Provider(s)   | Central              |
| ROSC Project                                    | AoD treatment           | ROSC Development of approach to provide coordination of treatment to AoD clients that need services from multiple providers such as Detox, MAT, Vocational Training and recovery support specialist development  | Reduced overdose deaths, improved linkages to treatment, reduced costs of treatment, plus increased community satisfaction  | Paint Valley = Lead + Local Provider(s) + Schools + Law Enforcement + Courts   | Central              |
| Prenatal Care Program                           | AoD treatment           | This project will assist in the completion of the Perinatal Health Component of the Ohio Department of Health's (ODH) Child and Family Health Services (CFHS) 2015 grant. The project will enhance the coordination and collaboration of evidence-based strategies among diverse stakeholders in women's health to address mental health and/or addiction needs for women before, during, and after pregnancy. | The Recovery Center will coordinate with the CFHS grant coordinator for the completion of all the required measures and benchmarks requested in the grant.  | Fairfield ADAMH Board, Child Protective Services, The Recovery Center, New Horizons Mental Health, The Family Adult and Children First Council, The Fairfield Health Department, Lancaster-Fairfield Community Action, Fairfield Medical Center, the Federally Qualified Health Clinic, and a local OB physician.  | Central              |

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| Alcohol and Drug Recovery Program for uninsured                   | AoD treatment           | This project aims to reach alcohol and other drug addicted clients participating in The Recovery Center outpatient treatment services (including but not limited to Intensive Outpatient Services) who do not have Medicaid or 3 <sup>rd</sup> party insurance, or who have insurance, but have a high deductible and copay, and are unable to meet the deductible and/or copays in order to access services. | The Recovery Center's Performance Improvement Team will review the project implementation and monitor to ensure the referral protocols were followed. This will be done through clinical supervision, chart review and client feedback.  | The Fairfield County ADAMH Board will be responsible for the disbursement of funds through MACSIS and report the outcomes to the state. The Recovery Center will be the service provider for the program and will make the referrals to their outpatient, intensive outpatient, and medication assisted therapy programs as needed. | Central              |
| Detox Services  | AoD treatment           | This project aims to reach alcohol and other drug addicted clients participating in The Recovery Center outpatient treatment services who do not have Medicaid or 3 <sup>rd</sup> party insurance and are currently not able to access Detoxification services. The project would allow for expansion of Detox services to this population.   | The Recovery Center's Performance Improvement Team will review the project implementation and monitor to ensure the referral protocols were followed. This will be done through clinical supervision, chart review and client feedback.  | Fairfield Board and The Recovery Center   | Central              |
| Medically Assisted Screening and Opiate Treatment                 | AoD treatment           | Wayne/Holmes will invest in Medication Assisted Treatment Services locally  | MAT with Suboxone and Vivitrol   | Wayne/Holmes, 2 local providers   | Heartland            |
| MAT/DETOX/ RESIDENTIAL TREATMENT                                  | AoD treatment           | Multiple counties will invest in establishing out-patient detox and Suboxone induction (MAT) at Quest Recovery Campus adjacent to Heartland Behavioral Health Stark campus. Some partners maintain support of detox services at CIRC until Quest services are established.  | Suboxone/Vivitrol Induction access at the HBH Campus for adults. This project includes a transportation component from other counties; immediate attempts will be made to enroll clients in Medicaid. Provides an opportunity for people to stay at facility during detox and induction. \$339,500 plus \$7,960 transportation   | Ashland, Columbiana, HBH, Medina, Portage, Stark, Tusc/Carroll, multiple local providers, Wayne/Holmes  | Heartland            |
| Portage County Drug/Alcohol Residential Services                  | AoD treatment           | Portage county will invest in residential services individuals in need of alcohol and other drug related treatment.   | Maintain current capacity of 10 beds for men and 12 beds for women. Women's facility is currently open to all HBH partners but the men's facility will become available for all Collaborative partners through this funding.   | Portage, All interested board partners, three local providers   | Heartland            |
| Youth Intensive Services - Adolescent Female Residential Services | AoD treatment           | Mahoning ADAS will invest in female adolescent residential treatment.   | Expand AOD treatment services for adolescent females in Mahoning County.   | Mahoning ADAS, one local providers  | Heartland            |
| Ashtabula Vivitrol Pilot  | AoD treatment           | Pilot a Vivitrol program in Ashtabula County for individuals who are struggling with opiate addiction in order to increase the rate of recovery for this population. The goal is to have the program operating and serving consumers in treatment, especially those involved with the county drug court and adult probation.  | The Board will work with a local provider to begin the process of developing and implementing a Vivitrol program. The Board will consult with the Collaborative to gain knowledge of lessons learned from those partners that already have a program in operation. This will improve access to MAT for Ashtabula County residents, especially those involved in the criminal justice system. | Ashtabula County ADAMH Board - lead; in partnership with Lake County ADAMHS Board and other members of the Collaborative that already have a program in operation, provider agency, Ashtabula County Common Pleas Court, Ashtabula County Drug Court and Ashtabula County Adult Probation.  | NE                   |
| Cuyahoga AOD Residential  | AoD treatment           | AoD Non-Medical Community Residential Treatment level of care: Population to be served are AoD (alcohol & other drug addiction) adult men requiring residential level of care and necessary aftercare. One site with 16 beds.   | Access to beds for individuals from all Boards in the Northcoast Collaborative. detailed budget will be discussed at future meeting to be scheduled.   | Cuyahoga County ADAMHS board, one AOD contract provider organization, and any Board within the Northcoast Collaborative with an interest to participate.  | NE                   |

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| Lorain ADAS – Capacity Expansion for Opiate-addicted adolescents (long-term residential, Outpatient (inclusive of, intensive outpatient and outpatient))  | AoD treatment           | Increase Board capacity for non-Medicaid/un-insured adolescents who are opiate-addicted.   | Increase opportunity for recovery from opiates through early engagement and retention into appropriate treatment; clients will leave with increased recovery capital   | ADAS Board of Lorain County, New Directions, LCADA, Lorain County Juvenile Court, Cuyahoga ADAMHS Board  | NE                   |
| Lorain ADAS – Capacity Expansion for Opiate-addicted adults (sub-acute detoxification, men's short-term residential, Outpatient (inclusive of day treatment with supportive housing, intensive outpatient and outpatient (including outpatient for co-occurring (AOD/MH). | AoD treatment           | Increase Board capacity for non-Medicaid/un-insured adults who are opiate-addicted.  | Increase opportunity for recovery from opiates through early engagement and retention into appropriate treatment; clients will leave with increased recovery capital   | ADAS Board of Lorain County, Lorain County Board of Mental Health, Cuyahoga ADAMHS Board, Stella Maris, ORCA House, LCADA, Far West Center, Firelands Counseling and Recovery Center | NE                   |
| Lorain ADAS – Medication Assisted Treatment Capacity Expansion for opiate-addicted adults (Ambulatory Detox, and Suboxone with Counseling)  | AoD treatment           | Addiction Treatment capacity expansion - MAT (Suboxone with counseling for opiate-addicted adults  | Increased opportunity to provide medication assisted treatment to clients who are stable and in sober living environments and receiving treatment services   | ADAS Board of Lorain county, LCADA, Physicians   | NE                   |
| Lorain ADAS/CMH: Crisis Support for Opiate-addicted adults  | AoD treatment           | Emergency Department/Crisis Liaison who will be available 24/7 to facilitate the anticipated increase in crisis needs of opiate-addicted adults in Lorain County   | Trained clinician on call to facilitate opiate-addicted clients who enter emergency/crisis settings in Lorain County and insure that adequate staffing is available in the 24-hour mobile crisis unit to meet the anticipated increased need.  | ADAS Board of Lorain County, Mercy Healthcare, University Hospital Elyria Medical Center, Nord Center ESS , Lorain County Board of Mental Health                                     | NE                   |
| Summit AOD Residential Treatment Capacity   | AoD treatment           | Increase Board capacity for non-Medicaid residential treatment services serving an average of 13 clients per day.  | Will increase the Board's ability to place opiate and other addicted clients into residential treatment  | Summit County ADAMHS Board, two provider agencies  | NE                   |
| Expand AoD OP Service   | AoD treatment           | • Wood Co. will start a new AoD outpatient program to address the increased service demand for addiction, particularly opiate addiction.   | Outcome: # of people served in program   |  | NW                   |
| MAT Treatment   | AoD treatment           | • The Lucas Co. Bd will partner with local jails to implement & sustain a vivatrol project for people who are incarcerated.  | <ul style="list-style-type: none"> <li>• Outcome: # of people served in program</li> <li>• Supplemented by Medicaid. Levy funds, and private insurance as appropriate and for additional community services.</li> <li>• Will address gaps in all Boards identified in their AoD service continuum that would otherwise be a challenge in SFY 15</li> </ul> |  | NW                   |
| AOD Rapid Response  | AoD treatment           | The Lucas Co. Bd. will create an AoD rapid response service.   | <p>Outcome: people will have access to AoD tx within 7 days of point of contact; will create "bed board" system where people are referred to AoD tx where there is an opening instead of being placed on waiting lists</p> <ul style="list-style-type: none"> <li>• will be managed through central access point at Rescue Crisis</li> </ul>               |  | NW                   |
| AoD Residential Treatment   | AoD treatment           | • Tri-County Bd (MDS) & Tri-County Bd (VMP) will contract with Nova BH in Montgomery Co. to purchase additional access to residential AoD treatment. The Tri-County Bd & Nova BH will partner with local provider agencies to provide appropriate outpatient services upon completion of the residential program. (Outcome: 23 people completing 28 day AoD residential program) | <ul style="list-style-type: none"> <li>• Will increase capacity/access to inpatient residential AoD treatment that would otherwise be a challenge in SFY 15</li> <li>•644 bed days of residential treatment (TCB-DMS)</li> <li>•90 bed days of residential treatment (TCB - VMP)</li> </ul>  |  | NW                   |
| AoD Residential Treatment   | AoD treatment           | • Wood County will expand access to AoD residential services through existing contracts with Compass and Devlac Hall as well as a new contract with Recovery Services of NW Ohio.  | • Will increase capacity/access to inpatient residential AoD treatment that would otherwise be a challenge in SFY 15   |  | NW                   |

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| AoD Residential Treatment                  | AoD treatment           | <ul style="list-style-type: none"> <li>Crawford/Marion Co. Bd will expand access to AoD residential services via contract with existing provider.</li> </ul>   | <ul style="list-style-type: none"> <li>Will increase capacity/access to inpatient residential AoD treatment that would otherwise be a challenge in SFY 15</li> <li>OUTCOME: Expansion of 1 residential bed (365 days) for people leaving a CBCF in need of AoD residential treatment</li> <li>MaryHaven will be provider</li> </ul>   |                            | NW                   |
| Expand Ambulatory Detox Services Capacity: | AoD treatment           | The Allen, Auglaize, Hardin Co. ADAMHS Bd & the Tri-County Bd. (VMP) will partner to purchase 3 sub acute ambulatory detox beds at an existing crisis stabilization unit operating in Allen County   | <ul style="list-style-type: none"> <li>AAH \$40,000</li> <li>TCB (VMP) \$16,200</li> </ul>  |                            | NW                   |
| Expand AoD OP Service                      | AoD treatment           | <ul style="list-style-type: none"> <li>Putnam County MHADAR Board and Pathways Counseling Center will expand outpatient AoD treatment services. Addition treatment services including 2 treatment groups/week, one education group per week, individual counseling and case management. Treatment and/or contact with clients provided 5 days a week. Supportive employment services. Training for 2 staff members.</li> </ul> | Outcome: # of people served in program  |                            | NW                   |
| Expand Detox Services Capacity:            | AoD treatment           | <ul style="list-style-type: none"> <li>Tri-Cty Bd (MDS) &amp; Tri-County (VMP) will collaborate with the SW Regional Collaborative Board group (Montgomery Co. Bd, SW), Warren/Clinton Bd (SW), Brown Co (SW), Preble Co (SW)) to purchase detox services from Nova BH located in Montgomery Co.</li> </ul>  | <ul style="list-style-type: none"> <li>10-12 bed detox unit to be accessible by 6 board areas; unit max. capacity 28 beds</li> <li>SW collaborative will be lead in this Project</li> <li>Provider is Nova BH, Dayton OH</li> <li>TCB (DMS) purchase 375 bed days (\$101,250)</li> <li>TCB (VMP) purchase 30 bed days (\$8100)</li> </ul>   |                            | NW                   |
| Expand Detox Services Capacity:            | AoD treatment           | <ul style="list-style-type: none"> <li>Wood Co., Hancock Co, and Putnam Co. Bds. will purchase additional detox beds from existing providers in the regional collaborative.</li> </ul>   | <ul style="list-style-type: none"> <li>Subacute detox services from a provider in regional board area</li> <li>No Provider identified to date</li> <li>short term need additional providers; long term access to integrated urgent care services</li> </ul>   |                            | NW                   |
| Expand Medical Detox Services Capacity:    | AoD treatment           | <ul style="list-style-type: none"> <li>The Allen, Auglaize, Hardin Co. ADAMHS Bd &amp; the Tri-County Bd. (VMP), Huron Co, and Erie/Ottawa Bd. will partner to expand capacity to include medical detox services through a local hospital.</li> </ul>  | <ul style="list-style-type: none"> <li>Medical detox services from a provider in Allen Co.</li> <li>Tri County (VMP) Bd \$12,000</li> <li>AAH \$160,000</li> </ul>  |                            | NW                   |
| MAT Treatment                              | AoD treatment           | <ul style="list-style-type: none"> <li>Tri-County Bd (MDS) will partner with local medical doctor/practice to start a MAT service, preferably Vivatrol.</li> </ul>   | <ul style="list-style-type: none"> <li>Outcome: # of people served in program; Expect 20-30 people in FY15</li> <li>Supplemented by Medicaid. Levy funds, and private insurance as appropriate and for additional community services.</li> <li>Will address gaps in all Boards identified in their AoD service continuum that would otherwise be a challenge in SFY 15</li> </ul> |                            | NW                   |
| MAT Treatment                              | AoD treatment           | <ul style="list-style-type: none"> <li>Seneca/Sandusky/Wyandot, and Huron will partner to find provider MAT services.</li> </ul>   | <ul style="list-style-type: none"> <li>Outcome: # of people served in program</li> <li>Supplemented by Medicaid. Levy funds, and private insurance as appropriate and for additional community services.</li> <li>Will address gaps in all Boards identified in their AoD service continuum that would otherwise be a challenge in SFY 15</li> </ul>                              |                            | NW                   |

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| MAT Treatment with Criminal Justice                                    | AoD treatment           | • Marion/Crawford Bd will partner with West Central CBCF to provide re-entry MAT services to individuals returning to the community.   | <ul style="list-style-type: none"> <li>• Outcome: # of people on Vivitrol, Reduction in jail LOS</li> <li>• Supplemented by Medicaid. Levy funds, and private insurance as appropriate and for additional community services.</li> <li>• Will address gaps in all Boards identified in their AoD service continuum that would otherwise be a challenge in SFY 15</li> </ul> |   | NW                   |
| Med/Somatic Services:  | AoD treatment           | The Tri-County Bd (VMP) will sustain non-Medicaid reimbursable component of 2.0 FTE of med/somatic services.   | Partners: Tri-Cty ADAMHS Bd (VMP); Foundations Behavioral Health, and Westwood Behavioral Health  |   | NW                   |
| Treatment Services for TC Inmates:                                     | AoD treatment           | •The Lucas Co. Bd in partnership with existing treatment providers and local halfway houses will expand service capacity for those residing in local halfway houses.   |   |   | NW                   |
| Detox including transportation at NOVA                                 | AoD treatment           | Regional Detoxification has expressed interest from Central and Northwest Collaborative Boards who want to increase access to their constituents beyond Cincinnati and Columbus. A Dayton provider will be used. | Expenditures are based upon a number of bed days to estimated to be purchased for each Board, allowing the addition of Detox services closer than what are currently available.   | <b>Provider:</b> Nova Behavioral Health<br><b>Boards:</b> Central Collaborative: Clark/Greene/Madison<br>Northwest Collaborative: Mercer/VanWert/Paulding<br>Miami/Darke/Shelby   | SW                   |
| Non-Medical Detox at NOVA House and CCAT                               | AoD treatment           | Add Detoxification services to continuum of care   | Montgomery County's portion would cover core programming costs to allow other Boards to purchase bed days at Nova Behavioral where Detox would be added to their service menu.  | <b>Providers:</b> Center for Chemical Addictions Treatment; Nova Behavioral Health<br><b>Boards:</b> Brown, Clermont, Hamilton, Preble, Warren/Clinton, Montgomery  | SW                   |
| Warren Clinton Residential AOD   | AoD treatment           | Increase services for Residential Treatment  | Will address gaps in AoD RT for men and women.  | Sojourner Recovery Services; Nova Behavioral Health, Preble, Warren/Clinton, Butler ADAS, Clermont, Montgomery  | SW                   |
| Jail Crisis Services   | Criminal Justice        | Jail Crisis Services   | Increased request from jail personnel primarily MH/AOD (opiate) clients in crisis in local jails. Increase anticipated - impact of HB 43. Estimated # to be served - 97 clients.  | Gallia Jackson Meigs Board of ADAMHS, Woodland Centers, Health Recovery Services, Holzer ER, ABH, Courts, Law Enforcement, Jails, Other Certified Pre-Screen Agencies   | Appalachia           |
| Project Dawn   | Criminal Justice        | Establish Project DAWN programs in each of the 21 counties of the southeastern collaborative in partnership with city/county public health departments and local law enforcement agencies.                       | All 21 counties in the southeast collaborative will have Project DAWN sites serving their local communities no later than the end of April 2015. for Project DAWN kits, promotional ad campaign, materials and training activities serving 21 counties.   | Participating Boards: Adams-Lawrence-Scioto, Athens-Hocking-Vinton, Belmont-Harrison-Monroe, Fairfield, Gallia-Jackson-Meigs, Jefferson, Muskingum Area, and Washington; 21 city/county public health departments and local law enforcement agencies. | Appalachia           |
| Criminal Justice Programming/Licking Knox                              | Criminal Justice        | Add a Criminal Justice Specialist to provide reentry planning and linkage to services  | offenders assessed in jail will continue to engage in treatment when released   | Licking-Knox (Lead) Court System and Criminal Justice System + Local Provider(s)  | Central              |
| Jail-Based Mental Health Professional/DM                               | Criminal Justice        | Fund a full-time jail counselor in funding partnership w/ County Sheriff to provide therapy and interventions  | Reduce episodes of crises and hospitalizations from jail and to increase linkage services prior to release.   | Delaware-Morrow = Lead + Criminal Justice System + Local Provider(s)  | Central              |
| Logan Champaign Project for Targeted Supportive Employment             | Criminal Justice        | Supported Employment Project targeting clients involved in the criminal justice system (Criminal Justice/Mental Health Linkage Grant) and others involved in Family Court  | Serve 75 individuals with goal of employing 20 individuals within 6 months  | Champaign-Logan = Lead + Criminal Justice System  | Central              |
| Jail Services  | Criminal Justice        | Richland will invest in an expansion of criminal justice services to include residents from Collaborative Partner communities.   | Expand jail services to include individuals from additional counties and eliminate the restriction of services to include Richland County residents only.   | Richland, local providers, collaborative partners with residents placed there   | Heartland            |
| Stark Regional Community Corrections Center (SRCCC) Transition Program | Criminal Justice        | Stark will invest in Increasing MH/AoD services to Stark Regional Community Correction Center (SRCCC) and the Stark County Jail  | The project will start individuals on medication-assisted treatment as they transition from the facility back to their home communities; also allows for expansion of MH and AoD services while incarcerated.   | Stark, Stark County Jail, Stark Regional Community Correction Center, multiple local providers  | Heartland            |

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| Tusc-Carroll Re-entry Coordinator.                 | Criminal Justice        | Tusc-Carroll will invest in creating a jail based Re-Entry Coordinator to assist with individuals return to the community following incarceration.  | Liaison between inmates to community and regionally funded projects to ensure connection to continuum of care and ongoing resources to maintain stability.  | Tusc/Carroll, HBH, local providers, local courts, local law enforcement   | Heartland            |
| Initial Psych Assessments/Incarceration Transition | Criminal Justice        | Putnam Board will purchase additional outpatient services in the form of initial psychiatric assessments for identified inmates from local correctional facilities prior to discharge to improve transition from jail to the local cmhc services.   | Will be supplemented by Medicaid as appropriate   |   | NW                   |
| Re-Entry Services                                  | Criminal Justice        | The Tri-County Bd (MDS) will expand local re-entry/in reach services to include people being discharged from county jails who are identified as in need of addiction services. The Seneca/Sandusky/Wyandot Bd. will sustain the re-entry program in Sandusky co. and expand re-entry services into Seneca/Wyandot Cos.  | OUTCOME: Increase existing FTE by .30 (new ttl .50 FTE) with expectation to serve 30 people from county jails through re-entry services<br>•These services will be provided by same agency who is providing re-entry services to state prisons via the OHMHAS Re-entry grant. The same guidelines and identified in the grant will be used for expansion of this project. |   | NW                   |
|  |                         |   |   |   |                      |
| Athens Aftercare                                   | Crisis                  | Aftercare Transitions Coordinator -- Establish a dedicated staff person to provide intensive in-home supportive services for persons discharged from inpatient psychiatric care and those seen by crisis team with community safety plan to increase community stability and decrease 30 day re-admissions. Persons at risk when discharged from the psychiatric hospital would transition from inpatient care to intensive supportive services to traditional case management. | Hopewell will require \$47,000 (net of any Medicaid reimbursements) for one new case manager to provide the aftercare intensive supportive services.  | Athens-Hocking-Vinton 317 Board, Hopewell Health Centers, Appalachian Behavioral Healthcare.  | Appalachia           |
| Athens Second Shift Clinician                      | Crisis                  | Second Shift Clinician -- Increased numbers of persons in crisis are presenting with more complex and challenging issues at our local Emergency Department. An additional full time after-hours crisis intervention clinician is needed in order to meet this increased demand to provide timely, comprehensive supports for persons in crisis.   | Hopewell will require \$40,000 (net of any Medicaid reimbursements) for one new crisis worker for after-hours coverage.   | Athens-Hocking-Vinton 317 Board, Hopewell Health Centers, community partners—emergency rooms, law enforcement, children services agencies.  | Appalachia           |
| Crisis   | Crisis                  | Crisis Intervention Services  |   | Washington County Behavioral Health Board and L&P Services  | Appalachia           |
| Crisis and Detox                                   | Crisis                  | Maintain Crisis Stabilization and Detox Beds for adults to provide diversion from the State Hospital and step-down to the community   | Necessary to assist in managing State Hospital utilization, reduce emergency room visits and local hospitalizations, and maintain consumers safely in the community. \$250,000-Adams, \$194,389-Gallia Jackson Meigs for unit serving 200 clients annually \$64,000-Jefferson-232 bed days at \$250 per day \$57,000-Muskingum MHRBS                                      | Participating Boards: Adams, Lawrence, Scioto, Belmont Harrison Monroe, Gallia Jackson Meigs, Jefferson, Muskingum Area; The Counseling Center AOD/MH Crisis Center, Trinity Health System, Jefferson Behavioral Health System, Southeast, Inc., Woodland Centers, Health Recovery Services, Six County, Inc., Shawnee Family Health Center, Hidden Springs Crisis Stabilization Center, Genesis Healthcare, ERs, ABH, Courts, Law Enforcement, and Jails | Appalachia           |
| Crisis Services and Housing                        | Crisis                  | Provide Crisis and Housing services essential to maintaining consumers in the community   | Necessary to assist in managing State Hospital utilization, insure reasonable access to general treatment services, and address potential gaps in service continuum that would otherwise be a challenge in SFY15.   | Belmont Harrison Monroe Mental Health and Recovery Board, Southeast Inc., Tri-County Help Center, Crossroads Counseling and ABH   | Appalachia           |
| Enhanced Emergency Services Capacity               | Crisis                  | Two case managers to provide short term day, evening, and weekend coverage, in conjunction with local emergency services, to high risk and post discharge psychiatrically hospitalized clients in Fairfield County Board area. Expanded capacity at local 211 to make needed referrals 24/7.  | Goal: Reduce psychiatric hospital recidivism, reduce psychiatric hospitalization, reduce law enforcement involvement, improve client quality of life. (includes salary, fringe, travel, materials, supplies, and other related costs.)  | Fairfield County ADAMH Board, Local Community Medical Hospital, BH providers, consumers, family members, local government, courts, law enforcement, DD Boards, CSB Boards, JFS Depts., other interested constituents. Estimated # of participants: 60.  | Appalachia           |
| Jefferson County Basic MH and AOD Services         | Crisis                  | Mental Health Service - Individual Counseling and Alcohol/Drug Services - Intensive Outpatient Services, MAT, Individual and Group Counseling and Lab Analysis. Necessary to prevent a crisis from occurring  | Funding is necessary to provide basic MH and AOD services to indigent non Medicaid population including those individuals currently not enrolled  | Jefferson County Prevention and Recovery Board and Jefferson Behavioral Health System   | Appalachia           |

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| Transportation  | Crisis                  | Transportation to Appalachia Behavioral Health   |  | Washington County Behavioral Health Board, Marietta City Police Dept. and Belpre City Police Dept   | Appalachia           |
| Crisis Services Support/Licking Knox                                | Crisis                  | Expansion of Staff & Support for Crisis Services   | Decrease time from initial contact to when first seen for crisis   | Licking Knox = Lead + Also Local Provider(s)  | Central              |
| Crisis Services/Franklin  | Crisis                  | Funds used for Netcare's Crisis Services Unit. Services include additional stabilization services who don't need crisis LOC but are not ready for discharge or referral elsewhere.   | To provide observation and holdover services to approximately 3,100 clients at Netcare thereby reducing admissions to TVBH.  | Franklin = Lead + Netcare   | Central              |
| Mental Health First Aid   | Crisis                  | Columbiana will invest in mental health first aid strategies to aid individuals in working directly with crisis.   | Teach mental health first aid to people who interact with people with serious mental illnesses.  | Columbiana, NAMI, Shining Reflections, Mental Health First Aid  | Heartland            |
| Crisis and Crisis Aversion Cross-County Access Collaborative (CCAC) | Crisis                  | Multiple counties will invest in increasing crisis bed capacity at Crisis Intervention and Recovery Center (CIRC) by 2 beds  | Increased capacity will allow other boards to contract to utilize empty beds when needed.  | Stark, Columbiana, Wayne/Holmes, Tusc/Carroll   | Heartland            |
| Crisis Management Step Up/Step Down Coordinator                     | Crisis                  | Wayne county and multiple local partners will invest in a Crisis Management Step Down Coordinator.   | Working with collaborative locally to manage crisis to Recovery environments. Residential crisis stabilization for persons who can be diverted from hospital based care or persons who can be discharged from the hospital to this level of care prior to returning home                       | Wayne/Holmes, multiple local providers  | Heartland            |
| Enhance Psychiatric Services  | Crisis                  | Stark county and numerous health care providers will collaborate to retain psychiatric services to provide youth and adult services to people exiting hospitalization in Stark County  | Will retain valuable psychiatric services in community; will recover cost savings that otherwise cannot be recouped; a dedicated person will be assigned to seeing people leaving crisis services, both children and adult.  | Stark, Local provider agencies Akron Children's Hospital, Aultman Hospital, Mercy Medical Center Akron General Hospital Summa Multi-County Attention System | Heartland            |
| Heartland Regional Hospital Diversion Project                       | Crisis                  | Multiple counties will invest in enhancing and expanding regional crisis step down services at both Turning Point and Riverbend Centers.   | Enhancement of clinical and medical services so as to expand admission criteria and include more acute clients and to offer services and medication management and/or adjustment. \$274,860 plus \$7,960 transportation  | Ashland, Columbiana, Mahoning MH, Trumbull  | Heartland            |
| Medina County Crisis Stabilization and Aversion Services            | Crisis                  | Medina will invest in Crisis Stabilization and Aversion Services (including a new private/public inpatient to local system Connector initiative). Also includes group home support.  | Service supports and group home placements are primarily targeted for Medina County residents however; they would be available to other Collaborative partners. Funding would be utilized to develop new Connector initiative and to sustain/augment services that would otherwise be at risk. | Medina, Public/Private Adult/Child Inpatient Facilities   | Heartland            |
| Portage Crisis Care and Stabilization to Reduce Hospitalizations    | Crisis                  | Portage will invest in step down services from a hospital as well as step up services to prevent hospitalization.  | Maintain current capacity of 11 beds and study the need for expansion of capacity to 16 beds.  | Possible partners include: Trumbull, other local providers  | Heartland            |
| Portage Crisis Outreach Case Manager                                | Crisis                  | Portage will invest in a crisis case manager to provide on the street outreach to homeless and individuals in need of services in downtown Ravenna.  | Development of a new position to help manage an increase of individuals and families coming to Ravenna, the Portage county seat, often in need of housing, food, and mental health and recovery services.  | Portage, local providers, city government, safety personnel   | Heartland            |
| Richland County Crisis Expansion                                    | Crisis                  | Richland will invest in expanding crisis services to include additional beds, which are available to Collaborative Partners.   | Expand existing services by one bed per day; increase 220 units of crisis intervention in the community.   | All interested Board partners   | Heartland            |
| Cuyahoga Youth Mobile Crisis  | Crisis                  | Propose to fill a current gap of lack of assessment capacity for youth in crisis by ensuring the availability of a specialized Children's Mobile Crisis Team and securing a critical-care stabilization unit that diverts admission to the hospitals in Cuyahoga County. Child-specific crisis services will be available to all children regardless of a current linkage with a primary child-serving provider. |  | Cuyahoga Board and Family and Children First Council in partnership with FrontLine Services, Inc. and Bellefaire JCB  | NE                   |

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| <b>PROJECT NAME</b>  | <b>Project Category</b> | <b>Services/Programs</b>   | <b>Outcomes/Notes</b>  | <b>Lead Board/Partners</b>  | <b>Collaborative</b> |
|--|-------------------------|--|--|---|----------------------|
| Geauga County Crisis beds  | Crisis                  | Provide crisis beds for up to 100 adults with severe and persistent mental illness in lieu of psychiatric hospitalization. This 24/7 crisis service will stabilize clients from the region for up to 14 days, reducing state hospitalization.  | Through facility renovations, the program increased from 2 crisis beds in SFY 2013 to flexibility for up to 5 beds during the last fiscal year. The crisis beds are currently fully operational.   | Geauga County Board and contract agency providers. Counties within the northeast Ohio collaborative area.   | NE                   |
| Lake Crisis Intervention   | Crisis                  | Emergency Department-based crisis intervention services, addressing in particular the increase in opiate-addicted individuals presenting in the emergency departments. Rapid diversion from inpatient care via access to community-based crisis resources, including ambulatory detox program created jointly by community ada provider and hospital.  | Will reduce utilization of inpatient care, expedite linkage to outpatient treatment. Will address increased demand for crisis intervention services, particularly related to opiate treatment.   | Lake County ADAMHS Board, in partnership Lake Health (local hospital system), 2 provider agencies. Accessible to Geauga, Ashtabula and Cuyahoga ADAMHS systems.   | NE                   |
| Crisis Services  | Crisis                  | <ul style="list-style-type: none"> <li>• Collaboration 1: The 4 County Bd, Huron, Erie/Ottawa, and Seneca/Sandusky/Wyandot Bd. will sustain crisis services capacity through a new partnership with an existing agency in Lucas County for crisis services including but not limited to detox, crisis stabilization, and inpatient services.</li> </ul>  | <ul style="list-style-type: none"> <li>• Partnership between Lucas Co. provider</li> </ul>   |   | NW                   |
| Crisis Services  | Crisis                  | <ul style="list-style-type: none"> <li>• Collaboration 2: Huron, Erie/Ottawa, and Seneca/Sandusky/Wyandot Bd. will sustain crisis services capacity through a new partnership to operate a crisis stabilization unit.</li> </ul>   | <ul style="list-style-type: none"> <li>• Partnership between Lucas Co. provider</li> </ul>   |   | NW                   |
| Medication Mgmt Svcs:  | Crisis                  | <ul style="list-style-type: none"> <li>•Putnam County MHADAR Board will partner with Pathways Counseling Center to increase capacity to serve those in need of medication management and drug screenings services.</li> </ul>  | Requires cooperation with clients' physicians. Will be supplemented by Medicaid as appropriate   |   | NW                   |
| Peer Run Respite   | Crisis                  | Lucas Co. Bd & Putnam Co. Bd will partner with a local provider to implement & operate a peer run respite service.   | OUTCOME: 3-5 room facility for voluntary, peer run respite   |   | NW                   |
| Butler and Warren Clinton Crisis Services and Hamilton Mobile Crisis | Crisis                  | Enhanced Crisis Hotline Services 365 days per year 24 hours at the Community Counseling & Crisis Center with linkage to Mobile Crisis Team including county toll free numbers & improved hotline outcome tracking software. Approximately 700 crisis calls a month fielded and dispositioned with about 5-6% referred to mobile crisis team for 24 hour response). Crisis Services Hotline - The Mobile Crisis Unit at Central Clinic provides emergency psychiatric intervention within the community, day and night, 365 days per year. Mobile Crisis staff work closely with the police and the University of Cincinnati Medical Center to facilitate care for those experiencing psychiatric crisis. | If enhancements not funded county residents will suffer reductions in hotline service coverage, missed crisis calls, longer phone hold times, and less staffing. Could translate into increased hospital bed day usage. Loss of toll free numbers and new "state of art" outcome tracking software which provides valid evidence of service need. Other Boards can partner with BCMHB/provider for hotline services too.   | <b>Providers:</b> St. Aloysius - Community Counseling & Crisis Center, Oxford, OH. Solutions Community Counseling & Recovery Centers, Talbert House dba Brown County Recovery Services, Central Clinic <b>Boards:</b> Butler Mental Health Board & Warren-Clinton, Hamilton | SW                   |
| Butler MH Alternatives to State Hospital                             | Crisis                  | Greater Miami Services, Hamilton, OH. Summit State Hospital Diversion Program/Step Down/Step Up Facility -15 Bed Facility. Continued Program Service Enhancements from SFY14 which reduced BC State Hospital Bed Days by approximately 1,345 beds - 3rd Largest Total Reduction in the state savings to ODMHAS or \$706,000 in SFY14 vs. county 3 year average).   | Loss of this facility would negatively impact Butler County's State Hospital Diversion Programming in a significant way resulting in substantial hospital bed day overages vs. current substantial underages. Loss Estimates: 1,700 Bed Overage or \$1.5 million in additional cost to ODMHAS annually. ODMHAS's State Hospital Incentive program discontinued for SFY15 & beyond too. ***If beds not filled by individuals from Butler County, other SW Collaborative Boards could contract with BCMHB/provider for bed days. | <b>Board:</b> Butler County Mental Health Board, <b>Provider:</b> Community Behavioral Health.  | SW                   |

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|--|-------------------------|--|--|--|----------------------|
| Hamilton and Warren-Clinton In-Patient Care and Support          | Crisis                  | Inpatient Care and Support - MH/AoD Sustain the Community Oriented Accelerated Care Unit at University Hospital serving acutely, severely mentally ill individuals requiring inpatient stabilization and linkage with outpatient treatment resources. Addressing individuals' needs in this immediate, intensive, though brief, manner results in their ability to reintegrate within their community with the least disruption for the individual. Individuals receiving this type of care are typically able to return to their communities following hospitalizations that average 7 -8 days. |  | <b>Provider:</b> University of Cincinnati <b>Boards:</b> Hamilton, Brown, Clermont, Warren/Clinton   | SW                   |
| Athens Blue Line Permanent Support Housing                       | Housing                 | Blue Line/Union Permanent Supportive Housing -- Provide on-site supportive services during business, after hours and weekends for 12 households living at Blue Line (newly opened) and Union Street (existing and adjacent) PSAH apartment projects for persons with most disabling SMD who would have increased community stability with more intensive supportive services. Existing office space at the apartment complex will be used to station Hopewell case managers on site during work hours, evenings and weekends.  | If beds not filled by Athens, Hocking, Vinton citizens, other Boards could contract for use. Hopewell will require \$70,000 (net of any Medicaid reimbursements) for two new positions to complete the staffing requirements for after hours and weekends totaling 1.6 FTE's.  | Athens-Hocking-Vinton 317 Board, Hopewell Health Centers, Athens Metropolitan Housing Authority.   | Appalachia           |
| Housing Supports   | Housing                 | Housing Supports   | More intensive need clients with prior failed attempts at independent living to acquire and sustain appropriate supervised housing. Estimated # to be served - 3 clients.  | Gallia Jackson Meigs Board of ADAMHS, Woodland Centers, Health Recovery Services, Supervised Living Facilities, Area Agency on Aging, SS Admin., JFS | Appalachia           |
| Muskingum Residential  | Housing                 | Expand residential services at Thompkins Treatment, Inc.   | The project will serve transition age youth that are not currently prepared to live independently in the community. Local Juvenile Courts and Children Services will contribute dollars as well.   | Muskingum Area Mental Health and Recovery Services Board, Thompkins Treatment, Six County, Inc., Children Services, and Juvenile Court.              | Appalachia           |
| Transitional Housing – Washington County Behavioral Health Board | Housing                 | Transitional Housing   |  | Washington County Behavioral Health Board and Community Action   | Appalachia           |
| Housing Recovery/Supportive Housing/CGM                          | Housing                 | Supportive Housing for mentally ill offenders including dual disorder treatment  | Identify 4 unit enriched housing setting; track jail bookings and incarceration  | Clark = Lead + Law Enforcement + Local Provider(s)   | Central              |
| Scattered Site Transitional Housing/Licking Knox                 | Housing                 | Provide transitional housing including short-term assistance to homeless for persons coming out of jail and hospitals  | To provide vouchers for transitional housing   | Licking-Knox = Lead + Local Provider(s)  | Central              |
| Tenant-based Housing Subsidy & Tenant Support                    | Housing                 | Provide tenant-based housing subsidies and tenant support to severe and persistent mental illness  | To increase the number of housing units by 14 units  | Delaware-Morrow = Lead + Local Provider(s)   | Central              |
| Columbiana Housing   | Housing                 | Columbiana County will invest in supportive housing services for adults with SPMI who may have co-occurring addictions and persons recovering with addictions.   | 24 hour awake staff/monitoring "hard to house" complex; startup costs (project due to be completed January 2015); rental subsidy and start-up costs for individuals living in privately owned or agency owned housing; boarding home subsidy; funding of last resort for recovery coach working with adult men in recovery housing | Columbiana, The Counseling Center, Family Recovery Center, Metropolitan Housing, Local boarding homes, private landlords                             | Heartland            |

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|---|-------------------------|--|--|--|----------------------|
| Hard to House/CJ/ HBH Re-Entry                              | Housing                 | Medina will invest in housing with supportive services for individuals diagnosed SMI who are discharging from state hospital, homeless, and/or are experiencing circumstances that complicate typical housing environments. Activities will impact avoid/reduce hospital days.   | Services are for primarily targeted for Medina County residents however, they would be available to other collaborative partners. Available 507 funding would be utilized to sustain/augment services that would otherwise be at risk.   | Medina, two local providers, metropolitan housing  | Heartland            |
| Horizon House Narrative                                     | Housing                 | Multiple Counties will invest in "Hard to House" services at Horizon House in Mahoning County  | 8 bed facility to help increase access to longer-term residential and supportive housing for hard to place adults who tend to cycle through regional hospitals and jail. These individuals have not been able to maintain stability and wellness over a period of time in a lower level of care or community based living. \$525,678 plus \$7,960 transportation   | Mahoning ADAS, Mahoning MH, Trumbull, Tusc/Carroll   | Heartland            |
| Housing Subsidy   | Housing                 | Richland will invest to expand housing options for hard to house individuals through housing subsidies which can be utilized within Richland County  | Provide subsidy for Richland County behavioral health residents, which will eliminate barriers to obtain stable housing and thereby decreasing the potential for crisis and hospitalization.   | Richland, local boarding homes, community landlords, metropolitan housing, local providers   | Heartland            |
| Recovery Housing and Peer Support for CJ population         | Housing                 | Wayne/Holmes will invest in methods to connect correction and HBH discharges with recovery housing and peer supports.  | Working with Corrections and HBH discharges to connect to recovery housing and peer supports.  | Wayne/Holmes, HBH, Corrections, Metropolitan Housing   | Heartland            |
| Tusc-Carroll P.A.T.H. Project                               | Housing                 | Tusc/Carroll will invest in creating emergency and non-emergency housing to assist homeless residents in addition to residents returning to the community from longer-term behavioral health and recovery settings.  | Service supports and ACF placements are primarily targeted for Tusc/Carroll County residents however, they would be available to other collaborative partners. GH/ACF; reentry housing, housing vouchers, recovery housing, potential development of local MH ACF.   | Tusc/Carroll, all interested board partners, metropolitan housing, local providers, HBH  | Heartland            |
| Cuyahoga Recovery Housing Sober Beds Program                | Housing                 | Recovery Housing/Sober Beds: Coordination of sober beds to serve about 75-100 individuals per month. Beds to adhere to quality measures, including, but not limited to National, State and/or Local recovery housing review or certification; adherence to serving Residency Support Levels 1, 2, or 3 defined by the National Association of Recovery Residences (NARR).  | Access to beds for individuals from all Boards in the Northcoast Collaborative. detailed budget will be discussed at a future meeting to be scheduled.   | Cuyahoga County ADAMHS Board, provider organizations and any Board within the Northcoast Collaborative with an interest to participate.          | NE                   |
| Lake Supportive Housing                                     | Housing                 | Supportive housing program for pregnant women and women with young children dealing with addiction to opiates and/or other drugs. Incorporates dual diagnosis treatment, IOP, parenting skills, independent living skills. Referrals from community, drug court, probation.  | Will facilitate more residential treatment accessibility to both Lake and Geauga Counties. Will decrease potential incarceration of pregnant women with opiate addiction.  | Lake County ADAMHS Board, in partnership with Geauga County MRHS, provider agency, Mentor Municipal Drug Court, Lake County Sheriff's Department | NE                   |
| Recovery Housing & Recovery Coach Services                  | Housing                 | <ul style="list-style-type: none"> <li>The AAH &amp; TCB (MDS) Boards will partner together on a workforce development project to expand permanent supportive recovery housing (PSH) capacity that includes access to recovery coaches for the 6 local counties served &amp; scattered sight housing. Policies and procedures, job descriptions, lease agreements, and scattered site, subsidized PSH, and apartment subsidies and employment of recovery coaches will be included.</li> </ul> | <ul style="list-style-type: none"> <li>AAH scattered site housing with recovery coaches</li> <li>TCB scattered site housing with recovery coaches</li> <li>Develop a peer specialist/recovery coaching service</li> <li>Outcome: Additional 4-6 recovery housing subsidies per board area, # of people trained as recovery specialists/peer specialists</li> </ul> |  | NW                   |
| Housing for SPMI  | Housing                 | Sustain long-term housing to meet the needs of SMD and dual diagnosis individuals.   |  | <u>Provider:</u> Excel Development Hamilton <u>Board:</u>  | SW                   |
| Warren Clinton Recovery Housing                             | Housing                 | Add Recovery Housing to spectrum of care   | Warren/Clinton, Clermont, Brown  | Warren/Clinton, Clermont, Brown  | SW                   |
| Muskingum Recovery Coach/Coalition Coordinator and Training | Peer Support            | Recovery Coach/Peer Support/Healthier Drug Free Muskingum Coalition Coordinator and Recovery Coach/Peer Support Training   | In SFY 14 two RC/PS trainings were held resulting in 24 State Certified RC/PS individuals. The goal is implement services to consumers and provide one additional training. The Coalition is currently addressing service gaps and needs.  | Muskingum Area Mental Health and Recovery Services Board, Muskingum Behavioral Health, Six County, and Ohio Empowerment Coalition.               | Appalachia           |

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|--|-------------------------|--|--|---|----------------------|
| Crisis: Certified Peer Support/CGM             | Peer Support            | Recruit, train and develop Certified Peer Supporters in partnership w/ NAMI & local providers  | Recruit and train 5 Peer Supporters, increase natural supports for clients and reduce demand for crisis intervention   | Clark = Lead + NAMI+Consumers   | Central              |
| Peer Support/Respite Program                   | Peer Support            | Crisis Peer Support staffed respite/step down unit   | To reduce hospitalizations and incidence of crisis   | Union = Lead + Local Provider(s) + Consumers  | Central              |
| Consumer/Peer Support and Supported Employment | Peer Support            | Multiple counties will invest in methods to build/sustain peer capacity for adults. Increase peer-led respite services from 3 to 6 beds at Foundations and increase mentorship to peer-operated services across the Heartland collaborative region.  | Increases capacity for peer-led respite by 100%. \$228,140 plus \$7,960 transportation   | Ashland, Columbiana, Mahoning, Medina, Portage, Richland, Stark, Trumbull, Tusc/Carroll, Wayne/Holmes   | Heartland            |
| TIP Enhancement                                | Peer Support            | Columbiana County will invest in increasing peer support capacity through the expansion of TIP services to include a peer mentor.  | Peer mentor added to Transition to Independence Project - young adults with spmi.  | Columbiana and one local provider   | Heartland            |
| Ashtabula Substance Abuse Recovery Coaches     | Peer Support            | Recovery Coaches for individuals in recovery from an addiction. The goal is to have at least two part-time recovery coaches at least one substance abuse treatment provider by the end of the state fiscal year.   | The Board will work with Ohio Citizen Advocates to gain access to local training for recovery coaches and offer the training to other county Board areas. Two part-time recovery coaches will be hired and begin working first with the Drug Court participants and then move the program out to other individuals in recovery as the program grows. Recovery Coaches have proven to increase the rate of recovery for individuals in treatment. this will also fill a gap in the continuum of care. | Ashtabula County ADAMH Board, in partnership with Northcoast Collaborative partners interested in training, provider agency, Ashtabula County Common Pleas Court, Ashtabula County Drug Court, Ashtabula County Adult Probation and Ohio Citizen Advocates.   | NE                   |
| Lorain ADAS Recovery Coaches                   | Peer Support            | Recovery Coaches for individuals in recovery from an addiction. The goal is to have at least two part-time recovery coaches available for county-adult probationers and within the county-wide re-entry coalition  | Provide an opportunity for criminally justice involved substance addicted (opiate) clients to receive the peer supports to navigate through recovery.  | ADAS Board of Lorain County, Peer Recovery Coaches, Lorain County Adult Probation Department, Lorain County Re-Entry Coalition, Citizen Circle  | NE                   |
| Hamilton and Warren/Clinton Peer Support       | Peer Support            | Hire trained consumers to enhance peer led services for adult consumers as well as a Family Peer Support program designed to help support families in crisis with school-age children who are experiencing behavioral difficulties and/or need support in managing services and resources for their child or family. |  | <b>Providers:</b> Talbert House Hope Community Center, Mental Health America, Solutions Community Counseling & Recovery Centers, <b>Boards:</b> Hamilton, Warren/Clinton County, Clermont County Board  | SW                   |
| Reovery Outcomes Model Training                | Recovery Supports       | Regional trainings on recovery management framework. Based on the large geographic size of the region, two trainings will be held; one on the north end & one on the southern end to enhance access and increased participation of community partners (reduced travel & costs, etc.)                                 | A nationally recognized expert will be hired to conduct the training. Goals are to increase participants knowledge & awareness of their role in a recovery outcome driven model. for speaker fees, facility rental, resource materials for distribution, promotion and advertising, workshop coordination and other related costs.   | Participating Boards: Adams-Lawnece-Scioto, Athens-Hocking-Vinton, Belmont-Harrison-Monroe, Fairfield, Gallia-Jackson-Meigs, Jefferson, Muskingum Area, and Washington; Consumers, family members, healthcare providers, BH providers, local government, courts, law enforcement, schools, DD Boards, CSB Boards, JFS Depts., FCFC Councils, Health Depts., other interested constituents. Estimated # of participants: 100/training - Total - 200. | Appalachia           |
| Recovery Housing & Recovery Coach Services:    | Recovery Supports       | • Hancock County ADAMHS & Focus on Friends Peer Support Center will expand services to include a recovery support center and recovery coaching.  | • 35 - 50 Recovery Coaches<br>• Develop infrastructure to train & deploy recovery coaches/peer coaching system   |   | NW                   |

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|--|-------------------------|---|--|--|----------------------|
| Recovery Housing & Recovery Coach Services:  | Recovery Supports       | •Erie/Ottawa and Huron Co. will partner together to implement recovery housing & coaching in their combined board area.   | • Develop policies & procedures for peer support services<br>•OUTCOME: 8 recovery coaches/peer specialists   |  | NW                   |
| Enhanced Supported Employment Services       | Supported Employment    | Expand Supported Employment Services  | CORE employs two FTE Employment Specialists and a FTE Employment Team Leader to serve emotionally challenged adult consumers in a six county service area.   | Muskingum Area Mental Health and Recovery Services Board, Six County, Inc./CORE Supported Employment Services, and local businesses.   | Appalachia           |
| Supported Employment - The Counseling Center | Supported Employment    | Wayne/Holmes will invest in Supported Employment Services locally   | Supportive Employment for MI transition aged youth, and adults   | Wayne/Holmes, 1 local provider   | Heartland            |
| Ashtabula Mental Health Supported Employment | Supported Employment    | Mental Health Supported Employment Program to engage consumers in work in order to decrease unemployment, dependence upon public systems of care, symptoms of mental illness, hospitalizations and stigma while striving to help consumers improve their self-esteem, self-management of mental health symptoms, independent living and autonomy. Consumers involved in pro-social activities like employment are less likely to experience a mental health crisis. | Will increase recovery for consumers and move them from a place of just getting by to a position where the behavioral health system as given them the tools, confidence and support to get ahead and move out of poverty. This will also fill a gap in the continuum of care.  | Ashtabula County ADAMH Board, in partnership with Lake County ADAMHS Board, Center of Excellence for Evidence-based Practices at Case Western Reserve, provider agency, local businesses | NE                   |
| Employment Services: Hancock Co.,            | Supported Employment    | Putnam Co., and Allen, Auglaize, Hardin Co. ADAMHS Bds. will partner together to develop additional employment services.  | • OUTCOME: Mobilization of community partners working together to identify pathways to employment for "hard to employ" including those with substance abuse, criminal justice, SMI, and DD histories; funding will assist with hiring a staff person to coordinate the consortium & develop partnerships with temporary agencies |  | NW                   |
| Clermont Vocational                          | Supported Employment    | Provide supportive employment to AoD clients (primarily opiate addicts)   | Replacement for OOD recovery to work program   | LifePoint Solutions aka Greater Cincinnati Behavioral Health   | SW                   |
| Athens Motivational Interviewing Training    | Workforce               | Motivational Interviewing Training -- Work with Case Western Reserve to provide front line and supervisory training in Motivational Interviewing to increase skills and culture of engagement and stages of change best practices at Hopewell Health Centers.   | for trainers and agency costs.   | Athens-Hocking-Vinton 317 Board, Hopewell Health Centers, Case Western Reserve.  | Appalachia           |
| Clermont Workforce Development               | Workforce               | Recruitment, retainment and staff development of professional workforce to incentivize employment in rural counties (healthcare workforce shortage areas)   |  | Brown, Clermont  | SW                   |