

**Ohio Department of Mental Health and Addiction Services (OhioMHAS)
Community Plan Guidelines SFY 2021 and 2022**

Enter Board Name: Mental Health and Recovery Board of Erie and Ottawa Counties

The following template will help organize the required information needed to complete the SFY 2021-2022 Community Plan. This template has been organized and streamlined to assist in the creation of a forward-looking Community Plan with a focus on identifying community priorities. These community priorities should be identified via a needs assessment process and tracked to determine success in addressing the stated priorities.

Evaluating and Highlighting the Need for Services and Supports

- Describe the community needs assessment process that led to the identification of the local priorities the Board will address. Describe how the Board engaged local and regional planning and funding bodies, relevant ethnic organizations, providers and people living with or recovering from mental illness and addiction in evaluating needs, evaluating strengths and challenges and setting priorities for treatment and prevention for SFY 2021-2022. [ORC 340.03 (A)(1)(a)].

The Board hired a consultant and began strategic planning for FY 2021-2022 in February of 2020. The planning process was delayed due to the pandemic. Thus far, the Board has gathered information from 11 of 27 community stakeholders (the rest are not responding after many attempts for input), created a 100+ slide power point profiling Ottawa and Erie Counties, and video conferenced with providers and a small group of consumers. To manage logistics of gathering input through virtual means, the Board will proceed with half-day virtual planning sessions to create a draft strategic plan that will then be introduced to the community, including consumers, for input. Thereafter, the plan will be finalized and adopted.

Under the current plan, the Board completed the following:
In 2017, the MHRBEO hired a consultant to complete a strategic plan. The plan was adopted in August of 2018. Because the MHRBEO had not done an assessment, nor participated in strategic planning for several years, there were more issues to address than time or available manpower permitted for the two-year plan. Needs, strengths and challenges were identified with the help of the following activities:

1. Number of 30-45-minute consultant interviews completed with community leadership (included all six commissioners):	27
2. Focus Groups and public forum notifications:	1280
a. Number of individuals notified via email about focus groups and public forum:	
Ottawa Chamber of Commerce members	200+
Erie Chamber of Commerce members	900+
Local Churches	37
Pastor Alliance	50
Erie County Commissioners	3
Ottawa County Commissioners	3
Judges & staff	12
Superintendents Board of DD	2
Emergency Responders	22

Provider Agencies	14
MHR Board Trustees	17
Other	20
b. Newspaper and radio ads to announce focus groups	40
3. Total number of individuals participating in focus groups:	99
Consumers (Recovery and Mental Health):	64
Parents, Loved Ones, Friends	1
Educators	12
Family and Children First Councils	11
Providers	11
4. Number of individuals participating in general public forums (Many parent reps):	48

In FY18 and FY19, the MHRBEO coordinated four Sequential Intercept Mapping (SIM) exercises, two in Erie County and two in Ottawa County. The SIMS were facilitated by Ruth Simera, Director of Criminal Justice Coordinating Center of Excellence, Northwest Ohio Medical University. Consumers were invited and participated in the exercises.

- a. If the Board’s service and support needs were determined by the Board Recovery Oriented System of Care (ROSC) assessment, how will these identified service and support needs be addressed by the Board?

They were not determined by ROSC.

- 2. Considering the Board’s understanding of local needs and the strengths and challenges of the local system, please identify the Board’s unique priorities in the area provided on Page 2. Please be specific about the chosen strategies for adults, children, youth, and families and populations with health equity and diversity needs in your community. OhioMHAS is still interested in any RecoveryOhio priorities Board areas may be addressing.

Please address goals and strategies for any gaps in the Ohio Revised Code required service array identified in ORC 340.03(A)(11) and 340.033.

Identify at least one measurement indicator, and subsequent baseline data, that will be used to track progress towards meeting the identified priority(ies).

- 3. Describe all environmental factors that influenced the identification of the chosen priorities within the Board area. Factors could include: economic, social and demographic factors, transportation, unemployment, uninsured/underinsured population, poverty rates, housing availability, incarceration rates, etc. Note: Regarding current environmental factors, Boards may describe the continuing impact of Behavioral Health Redesign including Medicaid Managed Care carve-in.

Erie and Ottawa Counties combined have a population of 118,343. In February of 2020, the unemployment rate for Erie County was 6.0% and 8.2% for Ottawa County while the state average was 4.7%. Since then, COVID has had a significant impact on employment. In 2018, Erie County’s aging population was 17% while Ottawa’s was 19%. The state average was 14%.

Qualified workforce availability is the number one factor influencing the ability to provide services. Vacancies are resulting in a significant burden on existing resources. The Board cannot stress this enough. Erie/Ottawa Counties are not urban areas and while summer hotspots, the winter is uneventful especially for younger individuals in the workforce. As a result, recruitment of employees is difficult.

Transportation continues to be a hinderance for individuals to engage in services.

COVID has resulted in a number of individuals seeking services through telehealth. Providers have reported that for those addressing mental health and addiction, telehealth is the providers' least favorable option as it is difficult to keep the consumers engaged. Nevertheless, access to services via this means will remain as it is necessary for those wanting to receive services, but apprehensive about visiting provider offices.

4. Describe any child service needs resulting from finalized dispute resolution with county Family and Children First Council(s) [340.03(A)(1)(c)].

There are none.

5. Describe how the future outpatient service needs of persons currently receiving inpatient treatment in State Regional Psychiatric Hospitals [340.03(A)(1)(c)] are identified.

The Board's contracted provider, Firelands Counseling and Recovery Services manages hospital admissions locally and at the Northwest Ohio Psychiatric Hospital. Discharge planning between the Board's local provider and NOPH or Firelands Hospital is ongoing with patients released to family, adult care facilities or group homes and reengaged with mental health services.

When discharge planning for individuals receiving inpatient treatment, three barriers prevail:

Limited workforce

Housing (other than independent housing);

The need for more guardians.

Mental Health and Recovery Board of Erie and Ottawa Counties
Board Local System Priorities (add as many rows as needed)

Priorities	Goals	Strategies	Measurement
Increase service opportunities for school age children in the areas of prevention, intervention and treatment.	Increase in school access to prevention, intervention and treatment services focused on school-age children and youth.	1. Schools complete applications for funding for services in their particular school focusing on prevention, intervention and/or treatment services. 2. Upon review and approval, Board provides funding for services based upon student population.	Measurement indicator: Number of services in the schools increased. Baseline data: 18 schools/9002 students Target: 19 schools/9100 students <i>Copy and paste above for multiple indicators.</i>
Reduce out of home placements	Prioritize services and supports to the child welfare population to mitigate long-term, out-of-home placements as a result of parental/guardian substance use disorder.	Establish a Family Dependency Treatment Court for Erie County to reduce the number of removals from home due to parental SUD.	Measurement indicator: Out of home placements reduced Baseline data: Erie County 82 Target: Erie County 78 <i>Copy and paste above for multiple indicators.</i>
Add to the community system of care for those with substance use disorders.	Increase resources to strengthen the continuum of services for individuals with substance use disorders involved in the court and incarceration systems.	Establish a drug court in Erie County	Measurement indicator: Drug court Baseline data: No drug court in Erie Co. Target: Fully implement drug court by January 2021. <i>Copy and paste above for multiple indicators.</i>
Establish services that are close to home for those with substance use disorders	Increase recovery housing beds for men that are located in Erie and Ottawa Counties.	Contract with a provider to open a recovery house for men in Erie County. Work with OhioMHAS for capital funding. Establish a per diem for recovery housing for men via a contract with a provider.	Measurement indicator: Increase in beds for men. Baseline data: 24 Target: 30 <i>Copy and paste above for multiple indicators.</i>
Increase services to those with Severe and Persistent Mental Illness	Create a community collaborative for those with SPMI focusing on treatment and intervention and reducing incarcerations and hospitalizations.	Establish an Assisted Outpatient Treatment (AOT) program in Erie County	Measurement indicator-Erie : AOT Court operational in Erie County Baseline data-Erie: No specialized dockets

		<p>Increase participation in Ottawa County AOT court</p>	<p>for those with mental illness in Erie County. Target Erie County: AOT operational by end of fiscal year.</p> <p>Measurement indicator: Increase participation in Ottawa County AOT court Baseline data: 4 Target: 8</p> <p><i>Copy and paste above for multiple indicators.</i></p>
<p>The Board is currently engaged in a strategic planning process projected to be adopted in November. This process was delayed due to COVID.</p>			

Collaboration

6. Describe the Board's planned collaborative efforts with other systems, people living with mental illness or addiction, family members, providers, and/or the general public for SFY 2021-2022 that will be needed to implement funded priorities. (Note: Highlight collaborations needed to support a full continuum of care. Are there formal or informal arrangements regarding access to services, information sharing, and facilitating continuity of care at a systems level?)

In FY 2021, the Board will establish a community collaborative for addressing the needs of individuals with mental illness. There are a number of services in Erie and Ottawa Counties but it is of the belief that more efficient, cohesive operations will ensue with regular meetings and planning by a collaborative of providers, consumers, family and others.

Specialized Docket advisory council consisting of the Mental Health and Recovery Board of Erie and Ottawa Counties, judges, treatment providers, health department, prosecutor, public defender, probation, law enforcement, peer run organizations and consumers was established in the Spring of 2020. One meeting has occurred.

Family and Children First Councils remain active and meet bimonthly.

The county HUB for substance use disorders in Ottawa County remains very active and well attended by a diverse group of individuals in this county. The Erie County HUB has not been as active but will increase in FY 2021.

NAMI consists of the Board, providers, consumers and family members. Tremendous effort has been put into NAMI member recruitment. This is a slow process as not many people are interested in becoming members. Support is being received from the Ohio NAMI and efforts will continue.

The Board participated in the Erie County Health Department and the Ottawa County Health Department Health Assessments this year. Data will be used for strategic planning.

Inpatient Hospital Management and Transition Planning

7. Describe what partnerships will be needed between the Board and the State Hospital(s), Private Hospital(s) and/or outpatient providers for the identification of needed services and supports.
- How will the Board coordinate the transition from the hospital to the community? (i.e.; discharge planning)
 - Who will be responsible for this?

Discuss any planned changes in current utilization that is expected or foreseen.

The Board contracts with Firelands Counseling and Recovery Services to coordinate screenings, evaluations, admissions to NOPH, discharges and community linkages.

The community collaborative mentioned in the Collaboration section will assist with finetuning the system of care for individuals with mental illness.

Continuum of Care Service Inventory

8. Complete the attached spreadsheet: Inventory of Facilities, Services and Supports Currently Available to Residents of the Board Area. Instructions are found on Page 10 of the Guidelines.

Continuum of Care definitions found in the Ohio Revised Code [ORC 340.03(A)(1)].

Alignment with Federal and State Priorities
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9. The following pages of this template contains a table that provides the specific federal and state priorities for: Mental Health Block Grant (MH-BG), Substance Abuse Prevention and Treatment Block Grant (SAPT-BG), SAMHSA and OhioMHAS treatment and prevention priorities. Please complete the requested information only for those federal and state priorities that are the same as the Board's priorities. For those federal and state priorities that are not selected by the board, please check one of the reasons provided or briefly describe the applicable reason in the last column.

Identify at least one measurement indicator, and subsequent baseline data, that will be used to track progress towards meeting the identified priority(ies).

Priorities for Mental Health and Recovery Board of Erie and Ottawa Counties

Substance Abuse & Mental Health Block Grant Priorities

Priorities	Goals	Strategies	Measurement	Reason for not selecting
SAPT-BG: Mandatory (for OhioMHAS): Persons who are intravenous/injection drug users (IDU)	Increase bed availability for those needing housing upon release from treatment for substance use disorder.	Contract with a provider to open a recovery house for men in Erie County. Work with OhioMHAS for capital funding. Establish a per diem for recovery housing for men via a contract with a provider.	Measurement indicator: Increase in beds for men. Baseline data: 24 Target: 30 <i>Copy and paste above for multiple indicators.</i>	<input type="checkbox"/> No assessed local need <input type="checkbox"/> Lack of funds <input type="checkbox"/> Workforce shortage <input type="checkbox"/> Other (describe):
SAPT-BG: Mandatory for boards: Women who are pregnant and have a substance use disorder (NOTE: ORC 5119.17 required priority)			Measurement indicator: Baseline data: Target: <i>Copy and paste above for multiple indicators.</i>	<input type="checkbox"/> No assessed local need <input type="checkbox"/> Lack of funds <input type="checkbox"/> Workforce shortage x Other (describe): This service is provided by Firelands Hospital, Firelands Counseling and Recovery Services, Magruder Hospital, Erie County Health Department and Erie County Community Health Center.
SAPT-BG: Mandatory for boards: Parents with SUDs who have dependent children (NOTE: ORC 340.03 (A)(1)(b) & 340.15 required consultation with County Commissioners and required service priority for children at risk of parental neglect/abuse due to SUDs)	To reduce the number of dependent children removed from their home due to parental substance use disorder (SUD).	Establish a Family Dependency Treatment Court for Erie County to reduce the number of removals from home due to parental SUD. Evaluate fidelity to the evidence-based model.	Measurement indicator: Number of removals due to parental SUD. Baseline data: Erie County 82 Target: 78 Measurement indicator: Regular attendance at the advisory committee meetings. Baseline data: No meetings have been scheduled to date Target: Minutes reflect review of Dependency Treatment Court practice and course corrections when necessary.	<input type="checkbox"/> No assessed local need <input type="checkbox"/> Lack of funds <input type="checkbox"/> Workforce shortage x Other (describe): Certification recently received from the Ohio Supreme Court

			<i>Copy and paste above for multiple indicators.</i>	
SAPT-BG: Mandatory (for OhioMHAS): Individuals with tuberculosis and other communicable diseases (e.g., AIDS.HIV, Hepatitis C, etc.)			Measurement indicator: Baseline data: Target: <i>Copy and paste above for multiple indicators.</i>	<input type="checkbox"/> No assessed local need <input type="checkbox"/> Lack of funds <input type="checkbox"/> Workforce shortage <input checked="" type="checkbox"/> Other (describe): Services for these diseases are provided by Firelands Regional Medical Center and Firelands Counseling and Recovery Services (under the umbrella of the hospital) Erie Health Department, and Erie County Community Health Center. McGruder Hospital and the Ottawa County Health Department work closely with Firelands Counseling and Recovery Services and Bayshore Counseling Services.
MH-BG: Mandatory (for OhioMHAS): Children with Serious Emotional Disturbances (SED)	Increase services to youth identified as SED	Establish a partnership with local job and family services directors and the courts to identify priorities for treatment for youth identified as SED and their families.	Measurement indicator: Establish two collaboratives via services and shared funding for youth identified as SED. Baseline data: Family and Children First is the entity working collaboratively with key stakeholders for youth. Target: Increase in two collaborative efforts in shared services and funding for youth identified as SED. <i>Copy and paste above for multiple indicators.</i>	<input type="checkbox"/> No assessed local need <input type="checkbox"/> Lack of funds <input type="checkbox"/> Workforce shortage <input type="checkbox"/> Other (describe):
MH-BG: Mandatory (for OhioMHAS): Adults with Serious Mental Illness (SMI)	Create a community collaborative for those with SPMI focusing on treatment and intervention and reducing incarcerations and hospitalizations.	Establish an Assisted Outpatient Treatment (AOT) program in Erie County that will have an advisory group addressing gaps in services.	Measurement indicator- Erie : AOT Court operational in Erie County Baseline data-Erie: No specialized dockets for those with mental illness in	<input type="checkbox"/> No assessed local need <input type="checkbox"/> Lack of funds <input type="checkbox"/> Workforce shortage <input type="checkbox"/> Other (describe):

		Increase participation in Ottawa County AOT program.	Erie County. Target Erie County: AOT operational by end of fiscal year. Measurement indicator: Increase participation in Ottawa County AOT court Baseline data: 4 Target: 8	
MH-Treatment: Homeless persons and persons with mental illness and/or addiction in need of supportive housing			Measurement indicator: Baseline data: Target: <i>Copy and paste above for multiple indicators.</i>	<input type="checkbox"/> No assessed local need <input type="checkbox"/> Lack of funds <input checked="" type="checkbox"/> Workforce shortage <input checked="" type="checkbox"/> Other (describe): Volunteers of America operates the homeless shelter in Erie County; In addition, they have 68 beds in apartment settings for individuals who are homeless; Homeless individuals have access to mental health and addiction services with the Firelands and Bayshore-both contracted providers of the MHRBEO.
MH-Treatment: Older Adults			Measurement indicator: Baseline data: Target: <i>Copy and paste above for multiple indicators.</i>	<input type="checkbox"/> No assessed local need <input type="checkbox"/> Lack of funds <input checked="" type="checkbox"/> Workforce shortage <input checked="" type="checkbox"/> Other (describe) The MHRBEO will increase partnerships with those serving older adults. Because this focus has just begun, no goals have been established.

Additional Priorities Consistent with SAMHSA Strategic Plan and Reported in Block Grant

Priorities	Goals	Strategies	Measurement	Reason for not selecting
MH/SUD Treatment in Criminal Justice system –in jails, prisons, courts, assisted outpatient treatment	1.Increase resources to strengthen the continuum of services for individuals with substance use disorders involved in the court and incarceration systems.	1.Establish a drug court in Erie County 2. Establish a Family Dependency Treatment Court for Erie County to reduce the number of removals from home due to parental SUD.	1.Measurement indicator: Drug Court Established Baseline data: Awaiting certification from the Ohio Supreme Court Target: Drug Court operational with municipal and common pleas court collaboration 2. Measurement indicator: Out of home placements reduced Baseline data: Erie County 82 Target: Erie County 78	<input type="checkbox"/> No assessed local need <input type="checkbox"/> Lack of funds <input type="checkbox"/> Workforce shortage <input type="checkbox"/> Other (describe)
Integration of behavioral health and primary care services			Measurement indicator: Baseline data: Target: <i>Copy and paste above for multiple indicators.</i>	<input type="checkbox"/> No assessed local need <input type="checkbox"/> Lack of funds <input checked="" type="checkbox"/> Workforce shortage <input checked="" type="checkbox"/> Other (describe): Multiple other priorities; Erie County has two FQHCs.
Recovery support services for individuals with mental illness or substance use disorders; (e.g. housing, employment, peer support, transportation)	Increase recovery housing beds for men that are located in Erie and Ottawa Counties	Contract with a provider to open a recovery house for men in Erie County. Work with OhioMHAS for capital funding. Establish a per diem for recovery housing for men via a contract with a provider.	Measurement indicator: Increase in beds for men. Baseline data: 24 Target: 30	<input type="checkbox"/> No assessed local need <input type="checkbox"/> Lack of funds <input type="checkbox"/> Workforce shortage <input type="checkbox"/> Other (describe):
Promote health equity and reduce disparities across populations (e.g. racial, ethnic & linguistic minorities, LGBT)			Measurement indicator: Baseline data: Target: <i>Copy and paste above for multiple indicators.</i>	<input type="checkbox"/> No assessed local need <input type="checkbox"/> Lack of funds <input type="checkbox"/> Workforce shortage <input checked="" type="checkbox"/> Other (describe): Erie County has two FQHDs serving individuals in Erie County. The

				Board's two contract providers, in addition to others, serve on the Minority Task Force. Firelands Counseling and Recovery services has an active group for LGBT.
Prevention and/or decrease of opiate overdoses and/or deaths	<p>Increase bed availability for those needing housing upon release from treatment for substance use disorder.</p> <p>Increase resources to strengthen the continuum of services for individuals with substance use disorders involved in the court and incarceration systems.</p>	<p>Contract with a provider to open a recovery house for men in Erie County. Work with OhioMHAS for capital funding. Establish a per diem for recovery housing for men via a contract with a provider.</p> <p>1.Establish a drug court in Erie County</p>	<p>Measurement indicator: Increase in beds for men. Baseline data: 24 Target: 30</p> <p>1.Measurement indicator: Drug Court Established Baseline data: Awaiting certification from the Ohio Supreme Court Target: Drug Court operational with municipal and common pleas court collaboration</p> <p><i>Copy and paste above for multiple indicators.</i></p>	<p><input type="checkbox"/> No assessed local need <input type="checkbox"/> Lack of funds <input type="checkbox"/> Workforce shortage <input type="checkbox"/> Other (describe</p>
Promote Trauma Informed Care approach			<p>Measurement indicator: Baseline data: Target:</p> <p><i>Copy and paste above for multiple indicators.</i></p>	<p><input type="checkbox"/> No assessed local need <input type="checkbox"/> Lack of funds <input type="checkbox"/> Workforce shortage x Other (describe The Boards two certified providers practice trauma informed care with their consumers.</p>

OhioMHAS Prevention Priorities				
Priorities	Goals	Strategies	Measurement	Reason for not selecting

<p>Prevention: Ensure prevention services are available across the lifespan</p>			<p>Measurement indicator: Baseline data: Target:</p> <p><i>Copy and paste above for multiple indicators.</i></p>	<p><input type="checkbox"/> No assessed local need <input type="checkbox"/> Lack of funds <input checked="" type="checkbox"/> Workforce shortage <input checked="" type="checkbox"/> Other (describe): An inordinate amount of prevention services are provided in the local schools. Providers enroll consumers in a number of prevention services provided via contract. The Board is participating in the K-12 prevention initiative. Thirteen schools are eligible with nine schools participating.</p>
<p>Prevention: Increase access to evidence-based prevention</p>	<p>Increase in school access to prevention, intervention and/or treatment services focused on school-age children and youth.</p>	<p>1.Schools complete applications for funding for services in their particular school focusing on prevention, intervention and/or treatment services. 3. Upon review and approval, Board provides funding for services based upon student population.</p> <p>2.Participate in the K-12 initiative</p>	<p>Measurement indicator: Number of services in the schools increased. Baseline data: 18 schools/9002 students Target: 19 schools/9100 students</p> <p>Measurement indicator: Number of schools participating Baseline data: 9 schools have completed the assessment Target: Engage those schools who have completed the assessment in the next phase of planning and see the initiative to completion.</p> <p><i>Copy and paste above for multiple indicators.</i></p>	<p><input type="checkbox"/> No assessed local need <input type="checkbox"/> Lack of funds <input type="checkbox"/> Workforce shortage <input type="checkbox"/> Other (describe):</p>

<p>Recovery Ohio and Prevention: Suicide prevention</p>	<p>Increase awareness activities for suicide prevention</p>	<p>Establish specific suicide prevention goals in the Strategic Plan for FY 2020-2021 focusing on Erie and Ottawa Counties only; Reference document to be used is the Ohio Suicide Prevention Plan</p>	<p>Measurement indicator: Baseline data: One event per year occurs community-wide; QPR training done in the schools; Hotline exists for Erie and Ottawa Counties; Target: Increase community awareness events by 5 such as newspaper articles, training, etc.</p> <p><i>Copy and paste above for multiple indicators.</i></p>	<p><input type="checkbox"/> No assessed local need <input type="checkbox"/> Lack of funds <input type="checkbox"/> Workforce shortage <input type="checkbox"/> Other (describe):</p>
<p>Prevention: Integrate Problem Gambling Prevention & Screening Strategies in Community and Healthcare Organizations</p>			<p>Measurement indicator: Baseline data: Target:</p> <p><i>Copy and paste above for multiple indicators.</i></p>	<p><input type="checkbox"/> No assessed local need <input type="checkbox"/> Lack of funds <input type="checkbox"/> Workforce shortage <input checked="" type="checkbox"/> Other (describe): This is already being done by the Board's two major providers. Meetings will occur with local health departments for prevention and screening.</p>

Community Plan Appendix 1: Alcohol & Other Drugs Waivers

A. Waiver Request for Ambulatory Detoxification or Medication-Assisted Treatment

ORC 340.033 allows for a process to request a time-limited waiver under section 5119.221 for the Revised Code for ambulatory detoxification and medication-assisted treatment. As stated in ORC 5119.221, the director may provide a time-limited waiver if both of the following apply:

- The board seeking the waiver has made reasonable efforts to make ambulatory detoxification and medication-assisted treatment available within the borders of the board’s service district;
- Ambulatory detoxification and medication-assisted treatment can be made available through a contract with one or more providers located not more than thirty (30) miles from your board’s service area.

To complete your waiver request for review, please include below, a brief overview of your board’s “reasonable efforts” to provide ambulatory detoxification or medication-assisted treatment and attach a copy of the contract(s) with the identified provider(s) that has agreed to provide this service to your area. This information will be forwarded to the director as part of the waiver review and approval process.

B. Waiver Request for Inpatient Hospital Rehabilitation Services

Funds disbursed by or through OhioMHAS may not be used to fund inpatient hospital rehabilitation services. Under circumstances where rehabilitation services cannot be adequately or cost-efficiently produced, either to the population at large such as rural settings, or to specific populations, such as those with special needs, a board may request a waiver from this policy for the use of state funds.

To request a waiver, please complete this form providing a brief explanation of services to be provided and a justification. Medicaid-eligible recipients receiving services from hospital-based programs are exempted from this waiver as this waiver is intended for service expenditure of state general revenue and federal block funds.

A. HOSPITAL	Identifier Number	ALLOCATION

C. Request for Generic Services

Generic services such as hotlines, urgent crisis response, referral and information that are not part of a funded alcohol and other drug program may not be funded with OhioMHAS funds without a waiver from the department. Each ADAMHS/ADAS board requesting this waiver must complete this form and provide a brief explanation of the services to be provided.

B. AGENCY	Identifier Number	SERVICE	ALLOCATION

Instructions for “SFY 2021 -2022 Community Plan Essential Services Inventory”

Attached is the SFY 2021-2022 Community Plan Essential Services Inventory. **Each Board’s completed SFY 2019-2020 form will be sent in separate email should the board want to use it to update information.**

The Essential Services Inventory form included with this Community Plan requires the listing of services for which the board may not contract. This element is necessary due to current Ohio Revised Code to detail the behavioral health (BH) continuum of care in each board area.

Some additional Continuum of Care (CoC) information resources have been provided below to assist in this process, but board knowledge is vitally important given the limitations of these included CoC resources. For example, the attached resources may not address BH services provided by Children Service Boards and other key providers within the local behavioral healthcare system.

Instructions for the Essential Services Inventory

The goal is to provide a complete listing of all BH providers in the board area. However, at a minimum, at least one entity must be identified for each essential service category identified in Column A of the form.

In addition to the identification of the Essential Service Category, the spreadsheet identifies the treatment focus (Column B) and Service Location (Column C) of the service as required in Ohio Revised Code. The fourth column (Column D) provides a list of the Medicaid and Non-Medicaid services associated with each of the Essential Service Categories.

In Column E, please identify the Names and Addresses of providers who deliver the Column D Medicaid/Non-Medicaid payable services associated with each Essential Service Category and in Column F indicate by “Y” or “N” whether the Board has a contract with this agency to provide the services.

Additional Sources of CoC Information

1. SAMHSA Treatment Locator <https://www.findtreatment.gov/>