

**BOARD OF MENTAL HEALTH AND
SUBSTANCE ABUSE SERVICES
March 30, 2023**

**Department of Mental Health
and Substance Abuse Services
Oklahoma City Oklahoma**

Board members present:

Courtney Knoblock, MPA, Chair
Kim Holland, APRN-CNP
Hossein Moini
Shannon O'Doherty
Gina Pazzaglia, Ph.D.
Kari Stomprud, M.Ed.
Tayyaba Ali, MD
Craig Henderson, LCSW

Others present:

Carrie Slatton-Hodges, Commissioner
Kelli Reid, ODMHSAS
Melissa Miller, ODMHSAS
Misty Capps, ODMHSAS
Joey Mickey, ODMHSAS
Dewayne Moore, ODMHSAS
Durand Crosby, Ph.D., ODMHSAS
Rich Edwards, ODMHSAS
Sara Barry, OKPCA
Carol Ladd, ODMHSAS
Dustin Robins, ODMHSAS
Christina Green, ODMHSAS
Ryan Berry, ODMHSAS
Melissa Shofner, GCBHS
Wendy Larsen, ODMHSAS
Emily Carmichael, Stigler Health &
Wellness Center
Jose, YST-Intern
Nisha Wilson, ODMHSAS
Heath Hayes, ODMHSAS
Julianne Leber, Healthy Minds Policy
Shawn McCarty, ODMHSAS
Brittany Hayes, Healthy Minds Policy

CALL TO ORDER

Ms. Knoblock called the meeting to order and stated that a quorum was present.

APPROVAL OF MINUTES OF THE JANUARY 26, 2023, BOARD MEETING

Mr. Moini moved to approve the January 26, 2023, minutes. Ms. O’Doherty seconded the motion.

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O’Doherty	Yes
Ms. Knoblock	Yes	Ms. Stomprud	Yes
Mr. Moini	Yes	Mr. Henderson	Yes
Dr. Gina	Yes		

Ms. Knoblock welcomed Dr. Tayyaba Ali, the newest board member. She stated Dr. Ali is a psychiatrist at St. Mary’s Physician Associates in Enid, Oklahoma.

DISCUSSION AND POSSIBLE ACTION REGARDING APPROVAL OF PROGRAM CERTIFICATION RECOMMENDATIONS

Kelli Reid, Director of Provider Compliance and Assistance, presented the programs recommended for approval listed on Attachment A as follows:

Alcohol and Drug Treatment Programs

A. Permit for Temporary Operation

Permit for temporary operation was recommended for: Stigler Health and Wellness Center, Inc., McAlester [Medically supervised withdrawal: Adult]

Ms. O’Doherty moved to approve permit for temporary operation for the above-referenced program. Mr. Moini seconded the motion.

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O’Doherty	Yes
Ms. Knoblock	Yes	Dr. Ali	Yes
Mr. Moini	Yes	Ms. Stomprud	Yes
Dr. Gina	Yes	Mr. Henderson	Yes

B. Certification with Special Distinction

Certification with special distinction was recommended for: Clay Crossing Foundation, Inc., Maud [Res, Co-Occ Res: Adult]; Rob’s Road to Recovery Ranch, L.L.C., Sayre [Res: Adult]

Ms. Knoblock noted that Clay Crossing is 100% compliant on all their standards and are eligible to receive a refund on their certification fee.

Dr. Gina moved to approve certification with special distinction for the above-referenced programs. Ms. O’Doherty seconded the motion.

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Dr. Ali	Yes
Mr. Moini	Yes	Ms. Stomprud	Yes
Dr. Gina	Yes	Mr. Henderson	Yes

C. Certification with Distinction

Certification with distinction was recommended for: A Chance to Change Foundation, Oklahoma City [OP: Adol., Adult]; Discovering You, Inc., Oklahoma City [OP: Adol., Adult]; Total Life Counseling Foundation, Oklahoma City [OP: Adult]

Ms. Holland moved to approve certification with distinction for the above-referenced program. Ms. O'Doherty seconded the motion.

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Dr. Ali	Yes
Mr. Moini	Yes	Ms. Stomprud	Yes
Dr. Gina	Yes	Mr. Henderson	Yes

D. Two-Year Certification

Two-year certification was recommended for: Guiding Light Behavioral, L.L.C., Oklahoma City [OP: Adol., Adult]; Jim Wallace & Associates, Inc. dba The Jetty Counseling Center, Wynnewood [OP: Adol., Adult]; Lost River Treatment Center, Wyandotte [OP: Adult]; Unity Point Counseling and Resource Center, Inc., Ada [OP: Adol., Adult]

Ms. O'Doherty moved to approve two-year certification for the above-referenced programs. Mr. Moini seconded the motion.

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Dr. Ali	Yes
Mr. Moini	Yes	Ms. Stomprud	Yes
Dr. Gina	Yes	Mr. Henderson	Yes

Comprehensive Community Addiction Recovery Center Programs

A. Certification with Special Distinction

Certification with special distinction was recommended for: Human Skills and Resources, Inc., Claremore, Sapulpa, Tulsa

Ms. O'Doherty moved to approve certification with special distinction for the above-referenced programs. Dr. Gina seconded the motion.

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Dr. Ali	Yes
Mr. Moini	Yes	Ms. Stomprud	Yes
Dr. Gina	Yes	Mr. Henderson	Yes

Opioid Substitution Treatment Programs

A. Permit for Temporary Operation

Permit for temporary operation was recommended for: HomeCare Advisors, L.L.C. dba Pinnacle Care, Enid

Ms. O'Doherty moved to approve permit for temporary operation for the above-referenced program. Mr. Moini seconded the motion.

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Dr. Ali	Yes
Mr. Moini	Yes	Ms. Stomprud	Yes
Dr. Gina	Yes	Mr. Henderson	Yes

B. Two-Year Certification

Two-year certification was recommended for: Lost River Treatment Center, Wyandotte

Dr. Gina moved to approve two-year certification for the above-referenced program. Ms. O'Doherty seconded the motion.

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Dr. Ali	Yes
Mr. Moini	Yes	Ms. Stomprud	Yes
Dr. Gina	Yes	Mr. Henderson	Yes

Outpatient Mental Health Treatment Programs

A. Permit for Temporary Operation

Permit for temporary operation was recommended for: Quest MHSA, L.L.C., Antlers

Ms. Knoblock asked how long the temporary operation permits last.

Ms. Reid answered POT is up to 6 months.

Ms. Holland moved to approve permit for temporary operation for the above-referenced programs. Mr. Moini seconded the motion.

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Dr. Ali	Yes
Mr. Moini	Yes	Ms. Stomprud	Yes
Dr. Gina	Yes	Mr. Henderson	Yes

B. Certification with Distinction

Certification with distinction was recommended for: Affinity Counseling Services, L.L.C., Edmond; Community Adolescent Rehabilitation Effort (CARE) for Change, Inc., Oklahoma City; Dedicated Outpatient Therapy Services, L.L.C., Chandler; Eastern Oklahoma Mental Health & Counseling, L.L.C., Poteau; Empowerment Community Services, L.L.C., Oklahoma City, Weatherford; Millennium Community Services, L.L.C., Duncan, Enid, Hobart, Norman, Oklahoma City, Poteau; Total Life Counseling Foundation, Oklahoma City

Ms. Knoblock congratulated CARE out of Oklahoma City for being 100% compliant.

Ms. O'Doherty moved to approve certification with distinction for the above-referenced programs. Dr. Gina seconded the motion.

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Dr. Ali	Yes
Mr. Moini	Yes	Ms. Stomprud	Yes
Dr. Gina	Yes	Mr. Henderson	Yes

C. Two-Year Certification

Two-year certification was recommended for: Guiding Light Behavioral, L.L.C., Oklahoma City; SKB Integrated Health Systems, L.L.C., Tulsa

Ms. O'Doherty moved to approve two-year certification for the above-referenced program. Mr. Moini seconded the motion.

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Dr. Ali	Yes
Mr. Moini	Yes	Ms. Stomprud	Yes
Dr. Gina	Yes	Mr. Henderson	Yes

Eating Disorder Treatment Programs

A. Certification with Distinction

Certification with distinction was recommended for: Living Hope Eating Disorder Treatment Center, P.L.L.C., Norman [OP]

Dr. Gina moved to approve two-year certification for the above-referenced program. Ms. Holland seconded the motion.

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Dr. Ali	Yes
Mr. Moini	Yes	Ms. Stomprud	Yes
Dr. Gina	Yes	Mr. Henderson	Yes

Community Mental Health Center Programs

A. Certification with Distinction

Certification with distinction was recommended for: Green Country Behavioral Health Services, Inc., Checotah, Muskogee

Ms. Knoblock noted this provider is also 100% compliant on all standards.

Ms. O'Doherty moved to approve certification with distinction for the above-referenced programs. Ms. Stomprud seconded the motion.

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Dr. Ali	Yes
Mr. Moini	Yes	Ms. Stomprud	Yes
Dr. Gina	Yes	Mr. Henderson	Yes

Community Residential Mental Health Programs

A. Certification with Distinction

Certification with distinction was recommended for: Chase E, Inc. dba 3C Old Fashion Boarding Home, Prague

Ms. O'Doherty moved to approve certification with distinction for the above-referenced program. Mr. Henderson seconded the motion.

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Dr. Ali	Yes
Mr. Moini	Yes	Ms. Stomprud	Yes
Dr. Gina	Yes	Mr. Henderson	Yes

B. One-Year-Certification

One-year certification was recommended for: Hav-Tap, Inc. dba The Harbor, Oklahoma City [Enhanced res]; Southeastern Oklahoma Family Services, Inc., Checotah

Mr. Moini moved to approve one-year certification for the above-referenced programs. Ms. O’Doherty seconded the motion.

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Dr. Ali	Yes
Mr. Moini	Yes	Ms. Stomprud	Yes
Dr. Gina	Yes	Mr. Henderson	Yes

DISCUSSION REGARDING REPORT FROM ADMINISTRATIVE RULES COMMITTEE

Mr. Moini presented his report as follows:

The Administrative Rules Subcommittee met Tuesday, March 7, 2023.

Ms. Melissa Miller, Sr. Director, Behavioral Health & Policy Planning, presented the rules changes to Chapters 1 through 70. The Chapters have been included in your Board book.

- This year's changes to administrative rules primarily make clarifications and clean-up edits, though some substantive changes are made. Chapter 21 and Chapter 70 have the most significant changes.
- Chapter 1. Administration: The definition of sentinel event is amended and clarified. Clarification regarding non-physical intervention training is also made.
- Chapter 15. Consumer Rights: Language regarding consumer rights to communications and social contacts is amended, and language regarding consumer rights to medication access is added.
- Chapter 17. Standards and Criteria for Community Mental Health Centers: Revisions add and clarify requirements for CMHCs/CCBHCs, including crisis services, services for individuals leaving jail, and intensive services for certain populations. Revisions also include language regarding the operation of crisis facilities within designated service areas.
- Chapter 18. Standards and Criteria for Substance Related and Addictive Disorder Treatment Services: Revisions are made to clarify required signatures on service plans.
- Chapter 21. Alcohol and Drug Substance Abuse Courses (ADSAC) and Assessments: Revisions change procedures for certification renewals for individual assessors and facilitators to align with processes for other individual certifications offered by ODMHSAS. Changes are also made to

the thresholds for institutions/organizations to align with current practice for other programs.

- Chapter 23. Standards and Criteria for Community-Based Structured Crisis Centers: Requirements regarding LPN/RN coverage and pharmacy services are added for Urgent Recovery Clinics.
- Chapter 24. Standards and Criteria for Comprehensive Community Addiction Recovery Centers: Revisions clarify medication clinic service requirements and requirements regarding service plan signatures.
- Chapter 70: Standards and Criteria for Opioid Treatment Programs: The revisions make substantial language changes to align state requirements with federal regulations for Opioid Treatment Programs. Revisions include:
 - Changing liquid only restrictions for methadone to oral only
 - Changes to drug testing frequency requirements
 - Changes to take-home dosing restrictions
 - New language addressing mobile medication units
- Effective date is September 15, 2023

The Administrative Rules Subcommittee recommends that the Board accept the changes to Chapters 1, 15, 17, 18, 21, 23, 24, and 70.

Ms. Miller will now explain each Chapter Rule change and answer any questions the Board may have.

CHAPTER 1: ADMINISTRATION

SUMMARY: The proposed rule revision to Chapter 1 was an update to the definition of sentinel event and clarifies requirements regarding nonphysical intervention trainings.

Dr. Ali asked for the new definition of sentinel event; Ms. Miller answered that there was added clarification that includes staff members and visitors, along with clarification that an occurrence that takes place at the facility and/or during the delivery of services as well as suicide and unintentional drug overdose deaths that occur at any time while an outpatient consumer is an active consumer and within 72 hours of discharge from inpatient and residential setting including sites certified under Chapter 23 of this Title.

Mr. Moini moved to approve Chapter 1 Rule change. Ms. O'Doherty seconded the motion.

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Dr. Ali	Yes
Mr. Moini	Yes	Ms. Stomprud	Yes
Dr. Gina	Yes	Mr. Henderson	Yes

CHAPTER 15: CONSUMER RIGHTS

SUMMARY: The proposed rule revision to Chapter 15 makes clarifications and amendments to language regarding consumer rights to communication and social contact. Revisions also add language regarding consumer rights to access to medications. Definitions are also added.

Mr. Moini moved to approve Chapter 15 Rule change. Mr. Henderson seconded the motion.

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Dr. Ali	Yes
Mr. Moini	Yes	Ms. Stomprud	Yes
Dr. Gina	Yes	Mr. Henderson	Yes

CHAPTER 17: STANDARDS AND CRITERIA FOR COMMUNITY MENTAL HEALTH CENTERS

SUMMARY: The proposed rule revisions to Chapter 17 add new language and make clarifications regarding requirements for Community Mental Health Centers and Certified Community Behavioral Health Clinics. Revisions also include language regarding the operation of crisis facilities within designated service areas.

Mr. Moini moved to approve Chapter 17 Rule change. Dr. Gina seconded the motion.

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Dr. Ali	Yes
Mr. Moini	Yes	Ms. Stomprud	Yes
Dr. Gina	Yes	Mr. Henderson	Yes

CHAPTER 18: STANDARDS AND CRITERIA FOR SUBSTANCE-RELATED AND ADDICTIVE DISORDER TREATMENT SERVICES

SUMMARY: The proposed rule revisions to Chapter 18, clarify requirements regarding signatures on service plans.

Ms. Knoblock asked regarding whose signature it was referring to, the consumer's or the provider's.

Ms. Miller stated in this case, it is clarifying when minors are consumers. They

also discussed the effective date of the rule change and that is September 15.

Mr. Moini moved to approve the Chapter 18 changes. Mr. Henderson seconded.

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Dr. Ali	Yes
Mr. Moini	Yes	Ms. Stomprud	Yes
Dr. Gina	Yes	Mr. Henderson	Yes

CHAPTER 21: ALCOHOL AND DRUG SUBSTANCE ABUSE COURSE (ADSAC) AND ASSESSMENTS

SUMMARY: The proposed rule revisions to Chapter 21 make changes to renewal requirements for ADSAC facilitators and assessors. Revisions also make changes to required certification thresholds for ADSAC institutions/organizations. Changes include amendments and clarifications regarding ASAM overrides, critical incident reporting, release of information requirements, and evaluation instruments. Other reorganization and clean-up are also included, and definitions are amended.

Mr. Moini moved to approve Chapter 21. Ms. O'Doherty seconded.

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Dr. Ali	Yes
Mr. Moini	Yes	Ms. Stomprud	Yes
Dr. Gina	Yes	Mr. Henderson	Yes

CHAPTER 23: STANDARDS AND CRITERIA FOR COMMUNITY-BASED STRUCTURED CRISIS CENTER

SUMMARY: The proposed rule revisions to Chapter 23, add requirements regarding nursing staff and pharmacy services for Urgent Recovery Clinics. Language regarding discharge planning for facility-based crisis stabilization is added and amended. Definitions are added and other clean-up changes are also made including removal of language that is duplicative or otherwise unnecessary.

Mr. Moini moved to approve Chapter 23 changes. Dr. Gina seconded the motion.

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Dr. Ali	Yes
Mr. Moini	Yes	Ms. Stomprud	Yes
Dr. Gina	Yes	Mr. Henderson	Yes

CHAPTER 24: STANDARDS AND CRITERIA FOR COMPREHENSIVE COMMUNITY ADDICTION RECOVERY CENTER

SUMMARY: The proposed rule revisions to Chapter 24 clarify medication clinic service requirements and requirements regarding service plan signatures. Other clean-up changes were also made including reorganization and removal of language that is duplicative or otherwise unnecessary.

Mr. Moini moved to approve Chapter 24 changes. Dr. Ali seconded the motion.

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Dr. Ali	Yes
Mr. Moini	Yes	Ms. Stomprud	Yes
Dr. Gina	Yes	Mr. Henderson	Yes

CHAPTER 70: STANDARDS AND CRITERIA FOR OPIOID TREATMENT PROGRAMS

SUMMARY: The proposed rule revisions to Chapter 70 remove requirements regarding identification for consumers and restrictions regarding liquid only forms of methadone. Changes also include amendments to drug testing frequency and requirements, clarification regarding agents allowed to administer and dispense medications, clarification regarding service plan signature and consent requirements, removal of requirements regarding frequency of attendance for consumers with dual enrollment, amendments to and reorganization of requirements regarding take-home dosing, revision to language regarding HIV/STD/AIDS service requirements, and the addition of a new section with requirements for mobile medication units. Language regarding service phases is also amended as well as language regarding case management and peer recovery support service requirements. Other clean-up changes were also made including updating terminology, adding definitions, reorganizing sections, and removing language that is duplicative or otherwise unnecessary.

Ms. Miller stated the Agency is making significant changes for many of these state certification requirements to follow with the federal regulations in place for opioid treatment programs.

Mr. Moini moved to approve Chapter 70 changes. Mr. Henderson seconded the motion.

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Dr. Ali	Yes
Mr. Moini	Yes	Ms. Stomprud	Yes
Dr. Gina	Yes	Mr. Henderson	Yes

DISCUSSION REGARDING REPORT FROM COMMISSIONER SLATTON-HODGES

Commissioner Slatton-Hodges presented her report as follows:

Commissioner Slatton-Hodges stated she met with Dr. Joe Parks, the medical director for the National Council on Mental Wellbeing. Dr. Parks is also a board member for The Joint Commission. She stated she had known Dr. Parks for a long time.

Commissioner Slatton-Hodges mentioned meeting with Kana Enomoto, who served as the SAMHSA director, a federal partner. She stated Ms. Enomoto works for the McKinsey Health Institute; the Agency is in discussions with them about doing an overall look at ODMHSAS services and systems in the State of Oklahoma, comparing those with a whole host of national rankings to see where ODMHSAS ranks on hundreds of initiatives.

Commissioner Slatton-Hodges did an interview for the NASMHPD 2023 Crisis Workforce Report. She did a pre-tape interview to air locally before the Super Bowl. She also did interviews with the Mike Brose Podcast and at KOTV Studio in Tulsa.

Commissioner Slatton-Hodges presented a two-part webinar series for SAMHSA around innovative uses of technology in crisis response, service coordination, and transport.

Commissioner Slatton-Hodges stated she was invited to present at the Tulsa Housing, Homeless, and Mental Health Task Force that the City of Tulsa held last week. She also spoke at the Funder's Roundtable panel in Oklahoma City, where philanthropic organizations come together around a specific topic; this time the topic was mental health.

Commissioner Slatton-Hodges discussed visiting with several state representatives, including those handling ARPA funds appropriations.

DISCUSSION REGARDING THE REPORT FROM CORPORATE ACCOUNTABILITY SUBCOMMITTEE

The Corporate Accountability Subcommittee met Wednesday, May 17th, 2023.

DISCUSSION AND POSSIBLE ACTION REGARDING THE INTERNAL AUDITOR’S REPORT

Durand Crosby presented the Internal Audit report and updated the committee on the status of ongoing audits being conducted by the division. (The report has been included in your Board book.)

There were no questions regarding the Internal Auditor’s report.

Dr. Crosby is present and available to answer any questions regarding her report.

The Corporate Accountability subcommittee recommends that the Board accept the Internal Auditor’s report.

Ms. O’Doherty made a motion to approve the Internal Auditor’s report. Ms. Stomprud seconded the motion.

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O’Doherty	Yes
Ms. Knoblock	Yes	Dr. Ali	Yes
Mr. Moini	Yes	Ms. Stomprud	Yes
Dr. Gina	Yes	Mr. Henderson	Yes

DISCUSSION AND POSSIBLE ACTION REGARDING THE ADVOCATE GENERAL’S REPORT

Mr. Mickey presented the Advocate General’s report to the Subcommittee and updated the committee on the work being conducted by his division. (The report has been included in your Board book.)

There were no questions regarding the Advocate General’s report.

Mr. Mickey is present and available to answer any questions regarding his report.

The Corporate Accountability subcommittee recommends that the Board accept the Advocate General’s report.

Ms. O’Doherty made a motion to approve the Advocate General’s report. Ms. Stomprud seconded the motion.

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O’Doherty	Yes
Ms. Knoblock	Yes	Dr. Ali	Yes
Mr. Moini	Yes	Ms. Stomprud	Yes
Dr. Gina	Yes	Mr. Henderson	Yes

DISCUSSION AND POSSIBLE ACTION REGARDING THE INSPECTOR GENERAL'S REPORT

The Department's Inspector General, Dewayne Moore, presented the Inspector General's report to the Subcommittee. The Inspector General's report was reviewed by the Subcommittee. (The report has been included in your Board book.)

There were no questions regarding the Inspector General's report.

Mr. Moore is present and available to answer any questions regarding his report.

The Corporate Accountability Subcommittee recommends that the Board accept the Inspector General's report.

Ms. O'Doherty made a motion to approve the Inspector General's report. Ms. Stomprud seconded the motion.

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Dr. Ali	Yes
Mr. Moini	Yes	Ms. Stomprud	Yes
Dr. Gina	Yes	Mr. Henderson	Yes

DISCUSSION AND POSSIBLE ACTION REGARDING THE LEGAL REPORT

Dr. Crosby presented the Legal report. (The report has been included in your Board book.)

There were no questions regarding the Legal report.

Dr. Crosby is present and available to answer any questions regarding his report.

The Corporate Accountability subcommittee recommends that the Board accept the Legal report.

Ms. O'Doherty made a motion to approve the Legal report. Ms. Stomprud seconded the motion.

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Dr. Ali	Yes
Mr. Moini	Yes	Ms. Stomprud	Yes
Dr. Gina	Yes	Mr. Henderson	Yes

DISCUSSION REGARDING THE REPORT FROM THE PERFORMANCE IMPROVEMENT COMMITTEE

Mr. Moini presented the Performance Improvement (PI) Committee report.

Mr. Moini stated the Performance Improvement Committee met on March 23, 2023 via Zoom. He stated there were 2 presentations for the March meeting.

A summary of their presentation is as follows:

The review included data, providing a summary of the treatment contracts, amendments, and requests for proposals completed; invoices processed; and grants awarded and closed. Some of the FY22 data included the following:

- ODMHSAS contracted with 310 treatment providers
- Contracts staff processed 11 RFPs
- 8,898 non-fee-for-service invoices were processed and paid (a 23% increase from FY20)
- 27 grants were awarded
- ODMHSAS had 70 active grants in FY22

Wendy also noted that the non-fee-for-service invoices were printed and ink signed prior to the electronic invoice system's launch in 2019; six months before COVID. Moving to an electronic system occurred timely and sped up payments to providers. On average, provider invoices are paid in less than 14 days (this includes counting weekend days).

Using this data, Wendy's team is analyzing the processes for additional efficiencies and automation to enhance contracts, amendments, RFPs, invoicing, and grant processes for both internal and external partners.

Lavanda Aponte, Director of Financial Services, presented Accounts Payable Process Improvements.

A summary of their presentation is as follows:

Ms. Aponte has implemented several improvements over the past three years, including:

- Streamlining Processes
- Building a rapport with divisions and vendors
- Ensuring all jobs have a backup person
- Holding biweekly meetings to communicate issues with staff
- Consolidating various facility purchase orders to Central Office
- Running reports to track performance
- Going paperless
- Creating training manuals
- Utilizing LinkedIn Training
- Creating email groups

Accounts payable will continue to improve processes. Accounts receivable has started the improvement process within Central Office and other agency facilities.

DISCUSSION AND POSSIBLE ACTION REGARDING THE CRITICAL INCIDENT REPORT

Mr. Moini stated Dr. Crosby reviewed the Critical Incident report summaries and circumstances surrounding these incidents.

Mr. Moini moved to approve the Critical Incident Report. Ms. Stomprud seconded the motion.

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Dr. Ali	Yes
Mr. Moini	Yes	Ms. Stomprud	Yes
Dr. Gina	Yes	Mr. Henderson	Yes

DISCUSSION REGARDING THE REPORT FROM THE FINANCE COMMITTEE

Ms. O'Doherty stated that the Finance Committee met on Wednesday, March 22, 2023.

DISCUSSION AND POSSIBLE ACTION REGARDING THE MONTHLY FINANCIAL REPORT

Rich Edwards presented the FY-23 finance report for the month ending February 2023. He presented the budget to actual comparison report as follows:

For FY-23 revenue collections are trending below projections by 4.7% or \$28.3 Million, some under spending in federal grants led to lower than projected revenues. Expenditures are trending under budget by 7% or \$43 million due to contracts being set up for the newly awarded grants. The year-to-date net variance for the agency is a positive 2.6% or \$15.5 M.

The Finance Committee recommended approval of the FY-23 February Financial Report.

Ms. O'Doherty moved to approve the financial report. Ms. Stomprud seconded the motion.

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Dr. Ali	Yes
Mr. Moini	Yes	Ms. Stomprud	Yes
Dr. Gina	Yes	Mr. Henderson	Yes

DISCUSSION AND POSSIBLE ACTION REGARDING BUDGET REVISIONS

Ms. O'Doherty continued the report from the Finance Subcommittee as follows:

FY-2023 Budget Revisions

Mr. Edwards presented revisions #5,6 & 7 to the FY-23 budget work program. The revision added additional budget for the ARPA funds appropriated to the agency for the construction of the two new psychiatric hospitals. The revisions also added additional budget for some newly awarded federal and non-federal grant awards. In total the revisions increased the capital budget by \$125 million and FY-23 operating budget by \$3,005,218.

Ms. Knoblock clarified that the Finance department will pull the capital money out of the main budget and track it separately to avoid confusion.

Ms. O'Doherty moved to approve budget revisions #5, 6, and 7. Ms. Stomprud seconded the motion.

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Dr. Ali	Yes
Mr. Moini	Yes	Ms. Stomprud	Yes
Dr. Gina	Yes	Mr. Henderson	Yes

NEW BUSINESS

There was no further business discussed.

ADJOURNMENT

Mr. Moini moved to adjourn. Ms. Stomprud seconded the motion.

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Dr. Ali	Yes
Mr. Moini	Yes	Ms. Stomprud	Yes
Dr. Gina	Yes	Mr. Henderson	Yes

The next ODMHSAS Board meeting is scheduled for May 25, 2023, at 9 a.m. back at the usual location of ODMHSAS Central Office.

Kim Holland, APRN-CNP

Gina Pazzaglia, Ph.D.

Craig Henderson, LCSW

Hossein Moini

Kari Stomprud, M.Ed.

Shannon O'Doherty

Courtney Latta Knoblock, MPA

Tayyaba Ali, MD