HAMILTON COUNTY DEVELOPMENTAL DISABILITIES SERVICES

Our Mission: Promote and support opportunities for people with developmental disabilities to live, work, learn and fully participate in their communities

VIRTUAL BOARD MEETING
(per provisions within House Bill 404 enacted 11/22/2020)

Tuesday, March 9, 2021

BOARD MEMBERS PRESENT: Mr. Nestor Melnyk, President
Dr. Andy Magenheim, Vice President
Mr. Stephen J. Jones, Secretary
Mr. Alan Abes
Ms. Rene Eisele
Dr. Tasha Faruqui
Ms. Deana Taylor

Mr. Melnyk called the March 9, 2021 meeting to order at 5:03 p.m.

Mr. Melnyk asked for approval of the minutes of the January 12, 2021 meeting.
Dr. Magenheim moved approval of the minutes of the January 12, 2021 meeting as presented. Ms. Taylor seconded the motion. The minutes were unanimously approved.

HEARING THE PUBLIC

Beth Luensman gave kudos to the HCDDS staff who do a fantastic job operating the vaccine clinic. She gave a special thanks to Carin Sherman, Jen Meadows, Jennie Flowers, Dawn Freudenberg, Kimi Remenyi, Leia Snyder and Ryan Braun. Staff have been going above and beyond and the families have been very appreciative.

Leia Snyder expressed her thanks and gratitude to staff for the great job they have done and continue to do at the clinic. She also outlined the duties, roles and important work done by staff to make the clinic a success in her report.

SUPERINTENDENT’S REPORT – Reported by Ms. Snyder

A. DD Awareness Month
March is recognized nationally as DD Awareness Month, with the goal of promoting inclusion and equal opportunity for people with intellectual and developmental disabilities. Although we strive to focus on DD awareness every day of the year, we also participate in this national month of recognition. Throughout March, we'll highlight stories of people we support, their families, and our community partnerships on our social media channels, website and newsletters.

B. COVID-19 Hamilton County Data (as of 02/24/2021)
Total Positive COVID-19 Cases: 404
- 62% of all positive results are males (249)
- 38% of all positive results are females (155)
• Average age of individuals testing positive is 43
• 20% of positive cases hospitalized (82)
• 1% of cases with subsequent death (15 - 12 confirmed COVID related, 1 presumed, 1 unknown, 1 not COVID related)

C. COVID-19 Vaccine Distribution

Through coordination with Hamilton County Public Health, we have been able to offer a vaccine clinic at our Kingsley location. We are excited to report that we have been able to vaccinate more than 1,600 people through our point of distribution. In addition, we worked with Cincinnati Children’s Hospital, who vaccinated nearly 400 Hamilton County residents. The feedback from individuals, families and partner agencies has been overwhelmingly positive. People are extremely grateful for the work we are doing to ensure access. We are also happy to report that we are going to be able to offer vaccines to caregivers who meet other eligibility guidelines such as age.

As you can imagine, this effort has taken significant effort and coordination across the organization, and at times it has felt all-encompassing. I wanted to give you a glimpse of the work people are doing behind the scenes, as well as at the clinic directly.

In order to operate the vaccine clinics, HCDDS staff members have:
• Organized the layout and process for vaccine clinics
• Planned for vaccine storage and temperature monitoring
• Provided regular communications regarding vaccine eligibility
• Arranged and met HCPH personnel to pick up vaccines
• Scheduled personnel to work the vaccine clinics
• Scheduled appointments for individuals and DSPs
• Assisted with transportation needs
• Called individuals, family members and providers to communicate vaccine availability
• Fielded phone calls, emails and questions regarding vaccines
• Evaluated eligibility to receive the vaccine for people not currently connected to our services

On the day of each clinic, we have staff completing the following duties:
• Meeting people in the parking lot, checking paperwork and taking temperatures
• Checking people in and directing them to the area to be vaccinated
• Assigning people to nurses, including to nurses who can provide car vaccines
• Providing behavior supports to help people who need additional support
• Administering vaccines (our nurses and nurses from provider agencies)
• Observing people following vaccination to ensure no allergic reactions
• Entering extensive data required for each vaccine given

Throughout the process, we have had many employees spend countless hours at the clinics, work nights and weekends, adapt to changes at a moment’s notice, and brave freezing cold temperatures for hours at a time. I want to acknowledge and share my appreciation for all the work they are doing.

We continue to receive vaccines and are able to offer them to individuals who may have changed their mind and now want the vaccine. We can also provide the vaccine to caregivers and our staff members who meet the criteria (either due to age or medical condition).

Ms. Snyder thanked Hamilton County Public Health for being so supportive and great to work with during this entire process.

It is also important to note that we have not wasted a single dose of the vaccine. Every drop has been used which is something we are very proud of.

D. Software Transition
We recently entered into a contract with IT vendor Brittco and will be transitioning to the new software over the next 18 months. Brittco will become the primary IT platform for managing data related to individuals supported by the board and specifics of service provision. We decided to move to this system after representatives from IT, SSA, Intake, EI and others who use the software evaluated and viewed demonstrations. This product would be more user-friendly and allow additional functions we do not currently have. We also spoke to others currently using Brittco and received positive feedback on their experiences.

Currently, we are one-third of the way through the discovery phase. This phase involves evaluating features and functions offered by Brittco and determining any gaps. Behind the scenes, our IT department is working with Brittco to plan for the data migration, run tests and receive training on the administrative functions. We will also use this transition as an opportunity to review and streamline processes. Meetings within and across departments are occurring to ensure we plan for factors that could impact this transition. Our planning and timing could also be impacted by the anticipated roll-out of the new statewide individual service plan (ISP). The Ohio ISP will standardize service plan formats across the state, and all counties will be required to implement this format when these changes go into effect later this year. Although the transition to Brittco will be a significant undertaking, it will result in improved efficiency and a better user experience.
E. Intake & Waiting List Data January and February 2021

Ms. Snyder plans to share key data points with the board periodically. If there are other data points the board would like to receive, please let her know and she will include them.

<table>
<thead>
<tr>
<th>Intake and Eligibility Data</th>
<th>Jan</th>
<th>Feb</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Referrals to Eligibility</td>
<td>67</td>
<td>61</td>
</tr>
<tr>
<td>Total Eligible</td>
<td>46</td>
<td>18</td>
</tr>
<tr>
<td>Total Ineligible</td>
<td>4</td>
<td>10</td>
</tr>
<tr>
<td>Requests for SSA</td>
<td>27</td>
<td>14</td>
</tr>
<tr>
<td>CITE Referrals</td>
<td>7</td>
<td>9</td>
</tr>
<tr>
<td>Referred to other agencies</td>
<td>20</td>
<td>16</td>
</tr>
<tr>
<td>FSSP Referrals</td>
<td>146</td>
<td>49</td>
</tr>
<tr>
<td>Planned Respite Referrals</td>
<td>177</td>
<td>34</td>
</tr>
<tr>
<td>Covid-19 Related Referrals</td>
<td>48</td>
<td>17</td>
</tr>
</tbody>
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<table>
<thead>
<tr>
<th>Waiting List Data</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td># of Wait List Assessments Completed</td>
<td>16</td>
<td>12</td>
</tr>
<tr>
<td># added to current need wait list</td>
<td>2</td>
<td>6</td>
</tr>
<tr>
<td># added to Immediate Need wait list</td>
<td>11</td>
<td>6</td>
</tr>
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</table>

F. EI Referral Data as of January 2021

<table>
<thead>
<tr>
<th>Early Intervention (EI) Total Receiving Services</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Early Intervention (EI) Program Referrals</td>
<td>518</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>January EI Referrals by Referral Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>County Board DD</td>
</tr>
<tr>
<td>State Health Dept</td>
</tr>
<tr>
<td>WIC</td>
</tr>
<tr>
<td>Physician</td>
</tr>
<tr>
<td>PCSA Form (HEA 8021)</td>
</tr>
<tr>
<td>Parent</td>
</tr>
<tr>
<td>Nonprofit Community Provider</td>
</tr>
<tr>
<td>Local Health Department</td>
</tr>
<tr>
<td>Hospital Child Find Specialist</td>
</tr>
<tr>
<td>Hospital</td>
</tr>
<tr>
<td>EI 8045</td>
</tr>
<tr>
<td>Childcare</td>
</tr>
</tbody>
</table>
G. SSA Data February 2021

<table>
<thead>
<tr>
<th>SSA Caseload Data</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Current Number of SSAs</td>
<td>123</td>
</tr>
<tr>
<td>Vacant SSA Positions</td>
<td>7</td>
</tr>
<tr>
<td>Number of Individuals Receiving SSA Services</td>
<td>4331</td>
</tr>
<tr>
<td>Average Number of Individuals on SSA Caseload</td>
<td>35</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Waiver Data</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>IO Waiver</td>
<td>1954</td>
</tr>
<tr>
<td>Level One Waiver</td>
<td>830</td>
</tr>
<tr>
<td>SELF Waiver</td>
<td>178</td>
</tr>
<tr>
<td>Supported Living No Waiver</td>
<td>23</td>
</tr>
<tr>
<td>Community</td>
<td>1346</td>
</tr>
</tbody>
</table>

H. State Budget

We are following the progress on the state budget closely. Overall, the budget appears to be positive. We do not expect to see significant cuts. The gains in Early Intervention Funding received during the last biennium we expect to remain stable. Additional funding for multi-system youth is something we believe may happen. The budget is still subject to change but we are hopeful it will remain positive from what we have seen.

There is also a push to look at increasing wages for DSPs. We do not know if this will happen but we plan to continue to monitor this closely as the budget continues to develop.

COMMITTEE REPORTS

Dr. Faruqui reported the Program Committee met on February 25.

School Updates

<table>
<thead>
<tr>
<th>Enrollment</th>
<th>Positive COVID Cases</th>
<th>1st Dose of Vaccine</th>
<th>Graduates</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>the entire school year</td>
<td>(aged 16+ can get Pfizer)</td>
<td></td>
</tr>
<tr>
<td>Rost</td>
<td>32 students 7 remote 35 DDS staff</td>
<td>8 staff, 1 student</td>
<td>Staff - 61% or 27/44 Students - 10</td>
</tr>
<tr>
<td>Fairfax</td>
<td>29 students 7 remote 29 DDS staff</td>
<td>5 staff, 1 student</td>
<td>Staff - 58% or 26/45 Students - 5</td>
</tr>
</tbody>
</table>

Roughly 10% of students are able to wear masks and social distance.

Two staff had brief COVID hospitalizations. Both recovered and are back to work. Currently there are no positives or exposures at either school.

Some staff chose not to be vaccinated. One staff person was unable to get the vaccine because she had COVID.
Students 18 and older, and those living in congregate care, are eligible to receive the vaccine. Trials are ongoing for youth 12 and older with the hope to have it approved by spring. CCHMC will begin a vaccine trial in March for children aged 5-11. They hope to get approval for the fall.

1. Community Partnerships/Resources

Launch Formal partnership with CCHMC’s psychiatrist, nurse, social worker team so people served who are most impacted by mental health and medical concerns will have fewer crisis care needs.

Matt reported we are still at the contracting stage. We proposed two changes to the contract that are under review. As needs arise, we continue to work together until a formal contract is in place.

Equip community-based pediatricians with practical resources so they identify DD needs early for all children, as key questions about future planning, and link isolated families to social supports. Partner with existing mental health initiative imbedded in pediatrician’s offices to assure active referral follow-up.

We developed a partnership with Beech Acres Parent Connext Program. Sessions were held with Parent Connext coordinators, Early Intervention, Itinerant Support and Children’s Team SSA manager to cross train. We now understand each other’s roles, goals, how to make referrals and who are the point people in our organizations. Our plan is to have quarterly training consultations on complex situations and to discuss/identify service gaps. We are sharing our materials and are exploring a possible innovation grant.

COVID Response:

- Engage at least 5 new community partners to share HCDDS services and survey for support gaps:

  Dawn highlighted two partners in this area - Health Collaborative who took a tour of our vaccine clinic and Hamilton County Health Department.

- Strengthen partnership with other DD providers so newly identified support gaps are addressed.

  - Easter Seals Tri-state is providing transportation to our clinic.
  - We have provider nurses volunteering their time at our clinic to give the vaccine.
  - Brightstar Nursing is a partnership we have engaged in to run our Nurse Consultation line.
  - The DSAGC African American Family Network reached out to us. Our family engagement coordinator is working with them.

- Assure access to PPE, testing and other resources for providers of those most vulnerable to COVID

HCDDS has been successfully operating a COVID-19 vaccination clinic and PPE distribution center from our Kingsley location. We operated 12 first dose clinics with 1554 people getting vaccinated. The clinic sizes ranged from 77-187 vaccinations a day. We used both Moderna and Pfizer vaccines.
Our clinic is unique

- Our Behavior Support Team offers additional support to individuals and caregivers at our clinic
- We offer vaccinations in your vehicle
- Additional waiting areas are available for those who cannot wear a mask or need another accommodation
- EasterSeals provides accessible transportation for individuals to the clinic
- We do outreach by phone, newsletter and email to ensure all who are eligible can get the vaccine

Our second dose clinics have a 98% return rate and recently, the Health Department agreed to allocate 100 doses a week to us so we can vaccinate caregivers who meet the age criteria.

Mr. Abes echoed comments made earlier in the meeting about what a wonderful job the agency and staff have done operating the vaccine clinic.

Mr. Abes also had a question about the vaccination rate of school staff. To the extent possible, have we had follow-up discussions to encourage staff to get the vaccine? Mr. Zinn reported we have not. Staff have been afforded the opportunity to get vaccinated however no follow-up discussions have occurred.

Ms. Taylor recommended the agency contact Closing the Health Gap to see if they would be willing to offer virtual information sessions for staff. Her employer offered information sessions and it was well received by employees.

Ms. Snyder committed to looking into providing more information to staff. If we have employees who have change their mind and want to get the vaccine, we will work them into our clinic.

**FINANCIAL REPORT – Reported by Mr. Townsend**

Mr. Townsend reviewed the financial reports for January and February 2021.

Approval was requested for actual operating expenses of $26,577,289 for the month of January 2021 as confirmed by the Hamilton County Cash Disbursement Journal.

*Dr. Magenheim moved that the Board approve the actual operating expenses for the month of January 2021. Mr. Abes seconded the motion and it passed unanimously.*

Approval was requested for actual operating expenses of $2,931,884 for the month of February 2021, with cumulative totals amounting to $29,518,462 as confirmed by the Hamilton County Cash Disbursement Journal.

*Mr. Jones moved that the Board approve the actual operating expenses for the month of February 2021. Mr. Abes seconded the motion and it passed unanimously.*

Approval was requested for estimated operating expenses of $4,515,283 for the month of April 2021, subject to final approval by the Board upon confirmation by the Hamilton County Cash Disbursement Journal.

*Mr. Jones moved that the Board approve the tentative operating expenses for the month of April 2021. Mr. Abes seconded the motion and it passed unanimously.*
UNFINISHED BUSINESS

Board Graduations

Dr. Magenheim will speak at the Rost outdoor celebration on Friday, May 21.

Ms. Taylor will speak at the Fairfax graduation on Wednesday, June 2.

NEW BUSINESS

1. Announcements

   • Mr. Abes reported that the sunset date for virtual meetings is July 2021.

   • Dr. Magenheim thanked everyone for the terrific job performed over this past year. He also gave recognition for how smooth and really well the superintendent transition has gone.

   • Ms. Snyder recently took a tour of both Bramble and Alice’s House. These two developments are coming together nicely and will be a tremendous benefit for individuals and the community. As we get closer, we plan to share pictures and more information with the board.

   • Tuesday, Mar. 23 is the virtual board retreat. Information will be sent in advance.

INSERVICE-DD AWARENESS MONTH

March is DD Awareness Month. Promoting awareness and advocacy is what we do so we have lots of efforts and different methods going on throughout the year.

Ryan Braun shared the various ways we promote awareness via social media such using hashtags and engaging with other organizations both on a local and national level. Things we plan to do this month include

1. *Future is Now* story with a family who had a great experience.
2. A story of an individual who has autism and wrote his own book.
3. Short stories and photos on social media.
4. Social media posts in Spanish on locally funded planned respite.
5. We plan to launch a magazine this year. Our print magazine will be targeted to the people we serve and it will be issued 4 times a year. Most people want something in writing that is in plain language with content relevant to them. The first edition will be out late summer-early fall.

Eric Metzger shared that after years of crucial policy advocacy, we at HCDDS are making advocacy very human, very personal and accessible.

Our advocacy plan is meeting people where they are, helping them find their voice and by letting them decide how and if they want to advocate. We want everyone to have the opportunity to know what advocacy is and to be able to make some of their own choices on a daily basis.

Our goal and our work is to become expert facilitators of advocacy and to work to make sure individuals are aware of their contributions, their rights and opportunities.
Advocacy starts with the individual, wherever that individual is at. Advocacy is helping them share their unique gifts and talents.

Some other advocacy efforts we are working on include

- Planning an Advocacy Summit
- We are involved in the Tech Alliance and Digital Divide
- Diana Mairose continues to be the point person on work with SABE and Voting
- Extra Mile Team-Professionals outside of HCDDS designing safe spaces for conversations

Finding no further business, Mr. Melnyk asked for a motion to adjourn the meeting. Dr. Magenheim so moved. Ms. Taylor seconded the motion and Mr. Melnyk declared the meeting adjourned at 6:01 p.m.

Respectfully,

Mr. Nestor Melnyk
President

Mr. Stephen J. Jones
Secretary