



Supporting equitable and quality mental health care in Jackson County.

Board of Trustees Meeting

Thursday, May 23, 2024, at 5:15 PM

Location: CMHF Office – 1627 Main Street Suite 500 Kansas City MO 64108

AGENDA

Call to Order, Welcome: Sandra E. Jiles, Chair

Consideration of Minutes: March 23, 2024

Staff Report: Bruce Eddy

Education/Planning Committee: Dacia Moore

- a. Strategic Planning Mini Retreat June 14, 1:30 to 4:30pm
- b. Advisory Council update: Kirby Randolph
- c. Program "Small Percentage, Big Impact"

Finance/Internal Committee: Karla Williams

- a. April 2024 Financial Statements
 - b. Consider ratification: March and April 2024 bills
 - c. Consider ratification: March and April 2024 Agency Payments
 - d. Consider for motion: Human Resource Outsourcing – Lever 1 Contract (not to exceed \$20,000)
 - e. Consider for motion: Grants Management System – IGX Solutions (not to exceed \$210,000*)
- * Expense paid for from interest on CD.

Appropriations Committee: Marsha Campbell

- a) Consider for funding motion: Pilot Proposal – Sisters in Christ
- b) Ratification of Electronic Vote from April 4, 2024 to approve Innovation requests from CAPA in the amount of \$37,900 and Rose Brooks in the amount of \$52,900.
- c) Committee Meeting Tuesday June 17, 11AM to 1 PM

VBP Committee: Dr. James Walden

- a. Committee Meeting: Tuesday, June 25, 11:30AM-1:30PM
 - Review Evaluation with Jody Brook

Accountability/Compliance Committee: Rochelle Harris

- a. Site Review Summaries – Emailed on May 9th, 2024

Next Board of Trustees Meeting:

- Thurs, June 27, 2024, at 5:15PM: CMHF Office 1627 Main Street Suite 500, KCMO 64108

Public Comments, Announcements:

Adjourn



COMMUNITY MENTAL HEALTH FUND

Supporting equitable and quality mental health care in Jackson County

Board of Trustees Meeting Meeting Minutes: March 28th, 2024

Agenda Item	Person Responsible	Discussion	Motion/Second; Action Taken
Call to Order	S. Jiles	Meeting called to order at 5:15 PM CT by Board Chair, S. Jiles. Trustees present: Rochelle Harris, Sandra Jiles, Dacia Moore, James Walden, Jessica Garcia, Kirby Randolph, Alice Kitchen Via Zoom: Marsha Campbell, Suzie Post, Karla Williams. Trustees absent: Desarae Harrah Staff and guests: Lists attached.	Information
Consideration of Board Minutes		Consideration of February 2024 Minutes. Minutes were approved as presented.	R. Harris/A. Kitchen MOTION CARRIED
Staff Report	B.Eddy	B.Eddy informed the Board that he asked the Royals for a Community Benefit Agreement. The response from the Royals is that they intend to hold the CMHF harmless. Bruce requested a revenue formula in consultation with the KC Public Schools and KC Library. He will make clear that the CMHF is not endorsing or opposing the tax vote. Board Member J. Garcia asked if the Fund was asking for a specific amount of tax money from the Royals. Bruce explained the approach is a formula and stated the Royals are expected to send a letter of intent by Friday afternoon. J. Garcia asked that the Board be notified when we are in receipt of the letter. The written staff update was included in the packet for review. No other updates were presented.	Information
Education and Planning			
Presentation	D. Moore	D.Moore reported that the Education and Planning Committee will meet April 11 th , 2024 at 6:00 PM at the Board Office to discuss the outlining of the strategic plan. Staff recommend bringing Ken Carr from Open Minds to augment the local environmental scan with national trends. Several Board members will not attend the 4/25 Board meeting. S. There was consensus that the board will be in recess April 25. Karla Williams and Bruce discussed a presentation on national trends with mental health agencies in collaboration with the Children's Services Fund. He will prepare a proposal for the Board.	Information and Motion

		D. Moore moved to enter into an engagement with Open Minds, Ken Carr for an amount not to exceed \$5,500 for a consultation and training session regarding National Trends in Behavioral Health. Motion seconded by A. Kitchen. Motion carried. Staff will set a mutually workable date.	D. Moore/A. Kitchen MOTION CARRIED
Advisory Council Meeting		<p>Kirby reported that the Advisory Council met with Wayne from iBosswell as a focus group to inform the strategic plan. Kirby also reported that the AC met on 3/27/ 2024 and started discussion on the cultural competency plan requirements. Discussion will take place over the next few meetings.</p> <p>Bruce reminded the Board about the CLAS Standard training that will take place at the April AC meeting. Board members are welcome to attend. D. Moore asked the group to consider how the CMHF can leverage our influence to address racial/ equity and inclusion via the CLAS Standards.</p>	information
Finance and Internal			
February 2024 Financial Statement	K. Williams	February Financial statements were emailed to the Board on 3/25/2024. There were no questions.	Information
Consider for Ratification: February 2024		Consider ratification February bills 2024 in the amount of \$45,661.64.	K Williams/ J. Garcia MOTION CARRIED
Consider for Ratification: February and March 2024 Agency Payments		<p>Consider ratification February agency payments:</p> <p>Hope House \$51,775.00</p> <p>Burrell \$249,636</p> <p>Child Protection Center \$25,000</p> <p>De La Salle \$50,000</p> <p>Total Children and Family Payments \$1,199,371.00</p> <p>Total Safety Net Payments \$1,368,121.00</p>	<p>K. Williams/ D. Moore MOTION CARRIED</p> <p>K. Williams/J. Garcia K. Williams/J. Walden MOTION CARRIED</p>
Appropriations			
Appropriations Committee Recommendation	M. Campbell	<p>M. Campbell reported that staff will be reviewing the fee-for-service rates and will bring recommendations to the board for consideration. Staff will also review the funding category names and funding cycles and make recommendations for any changes.</p> <p>Motion was made by M. Campbell to approve the following Domestic Violence 2024 contracts:</p> <p>Hope House - \$302,000</p> <p>MOSCA - \$319,000</p> <p>NewHouse - \$209,300</p> <p>RoseBrooks - \$318,000</p> <p>R. Harris seconded the motion. Discussion by Board regarding the difference of the request by Hope House of \$351,800 and the reduced award of \$302,000. Susan explained that Hope House received an increase in 2023 to bring their award back up to their past amount. The committee</p>	Information

decided to wait and see if they can spend their award of \$302,000 before additional increased are considered. After discussion, motion carried.

Motion was made by M. Campbell to approve Special Populations 2024 contracts:

Benilde Hall \$180,200

BFMA - \$120,500

JVS - \$168,300

Reconciliation Services - \$265,300.

J. Walden seconded the motion. Motion Carried.

M. Campbell made a motion to approve Genesis to spend the remainder of their 2023 contract in the amount of \$70,900 or the remaining balance.

They will have a new 2024 contract reflecting the authorization to spend the remaining funds. J. Garcia seconded. Motion Carried.

M. Campbell made a motion to approve the Pilot Project 2024 Contracts:

Child Protection Center - \$101,000

De La Salle - \$100,000

Youth Ambassadors - \$60,000

R. Harris seconded the motion. Discussion: A. Kitchen asked if DeLaSalle was a prior agency that was returning as a Pilot. Staff clarified DeLaSalle's past history and that yes, they were returning as an agency and hoped to be back in the network after this year.

J. Garcia asked for clarification regarding DeLaSalle's services at the detention center. M. Campbell stated that DeLaSalle was providing services to youth and detention, but CMHF would not be used to pay for services in detention. After discussion, motion carried.

M Campbell moved to approve Technical Support and Evaluation 2024 contracts:

ReDiscover CIT Training - \$70,300

RDI CIT Evaluation - \$136,000

Kitchen seconded the motion.

Discussion: K. Randolph inquired if there are ways to do more CIT training since there is a need. She would like to have future discussion on how we can support CIT. Bruce responded that many trainees are from outside the county. He suggested CMHF could support strategic planning to help the CIT Council better manage growth and costs. After discussion the motion carried.

M. Campbell moved to approve the special disaster funding request from University Health in the amount of \$45,000 to cover support costs for staff impacted by the recent violence and shooting in the ER and Chiefs Parade.

J. Walden seconded the motion. Motion Carried.

J. Glenn, from University Health was present to offer commentary on the trauma experienced by staff and ongoing challenges. James also stated

		<p>that the Board could put in a technical request to the ATTC for more training and technical assistance regarding implementation if needed. D. Morre discussed the impacts of the shooting at the Chiefs parade and that the CMHF needs to assist with addressing the problem.</p> <p>M. Cambell made a motion to approve a \$5,000 sponsorship for the Metro Council Mental Health Council Conference. A. Kitchen seconded. Motion Carried.</p> <p>Theresa informed the Board that there are two Innovations requests coming from CAPA and Rose Brooks that will need a vote by the April meeting. Theresa will forward the requests to the Board for review.</p>	
		VBP Committee	
Data Submission: Update	J. Waldon	<p>J. Walden reported that the committee met on 3/21/2024 and did a thorough review of the VBP accomplishments to date and the performance payment formulas. J. Walden introduced staff who provided a high level overview of the VBP process. All staff presented on their roles with VBP, successes and challenges and the types of technical assistance that is being provided. Staff also shared the workflow tasks and finished the presentation with information about the 2023 performance payments.</p> <p>A motion was made by K. Randolph to approve the 2023 VBP payments in the total amount of \$969,208 (refer to VBP report for itemization) for 3rd year agencies and a total of \$71,135 (refer to VBP report for itemization) for first year agencies that are finish training. Motion seconded by J. Garcia. Motion passed.</p> <p>J. Garcia asked for information that spotlights why agencies are high performers compared to others.</p>	Information and motion
Accountability and Compliance			
Quarterly Report Summary	R Harris	R. Harris reported that staff are releasing a new Site Review report and have shared information with agencies.	Information
Public Comments	None		
Announcements	<p>Next Regular Board Meeting: April Board meeting will be in recess. Any items that come up prior to May Board meeting can be handled via an electronic vote. Next regular meeting will be May, , 2024 at 5:15pm: CMHF office at 1627 Main Street, Suite 500, KCMO 64108</p>		
Adjourn	Meeting Adjourned at 7:10 PM.		

Sandra Jiles
Chairperson

Attendees:

Board Members:	Attended?	Staff:	Attended?
Marsha Campbell	Y - Zoom	Bruce Eddy	Y
Jessie Garcia	Y	Theresa Cummings	Y
Desarae Harrah	N	Susan Jones	Y
Rochelle Harris	Y	Rochelle DePriest	Y
Sandra Jiles	Y	Taryn Lichty	Y
Alice Kitchen	Y	Jenn Clark	N
Dacia Moore	Y	Gino Serra	Y- Zoom
Suzie Post	Y - Zoom		
Kirby Randolph	Y		
James Walden	Y		
Karla Williams	Y - Zoom		

[illegible]

Strategic Goals Report



Date: May 2024

Operations Goals

Operations Goals

Activity

Responsible Staff/Committee

Maintain a highly respected, smoothly functioning, professional organization.

2024 strategic planning is proceeding. Local environmental assessment completed and reported. Presentation on national environment by Ken Carr on 5/2. Mini retreat scheduled for June 14th – 1:30 p.m. at the CMHF office. Video report from web manager demonstrates CMHF is the largest unsponsored internet mental health information source in KC, and growing.

Finance/Internal Appropriations All Staff

Ensure growth and protection of CMHF financial resources.

2024 revenue exceeds budget target despite reassessment protests. Invested funds create interest from CDs. Interest is being used to cover the cost of significant operational expenses. All board objectives can be carried out with tax revenue. ED is appointed to

Finance/Internal

Strategic Goals Report

the TIF Finance Committee; works to obtain surplus funds from completed TIFs and consistent policy for late TIF billing.

Clinical Goals

Activity

Responsible Staff/Committee

Improve access to clinical care.

Efficiencies have been established with data collection processes from agencies. Revised workbooks were rolled out to agencies on May 17th. The Team led by Dr. Jody Brooks is conducting an evaluation of VBP user experience during implementation. Findings and will be presented to the VBP Committee meeting on June 25th. A video presentation will be created for the Board.

All Staff
VBP Sub-Committee

Reduce time from initial engagement to service engagement.

Access to care is the leading performance indicator in our VBP system. All agencies receiving incentive payments are reporting access to care measures. After analysis, a dashboard of access data will highlight agency improvement and status: to be reviewed by the VBP Committee prior to publication.

All Staff
And Committees

**Increases in overall utilization of mental health resources... from all demographic and cultural sectors in the community. *(Racial Equity)

Demographics of participants, agency staff and leadership is presented on our web site. The information will be updated mid-2024. University Health is utilizing our Star Rating System (SRS), a self-assessment and planning tool for DEIBA. The Advisory Council is reviewing cultural competency questions in agency applications and will bring recommendations to the Board.

All Staff
Education and Planning
AC

Racial Equity/Social Determinants Goals

Activity

Responsible Staff/Committee

Improve Mental Health outcomes for persons disproportionately impacted by social determinants.

Possible results of the current board strategic planning process is an update and refocus of this and other measurable Goals. Challenges are altitude (strategy versus tactics); uptake and synthesis (applying data, background information, effective approaches); and prioritizing (due to a broad and divergent set of input).

All Staff



Supporting equitable and quality mental health care in Jackson County.

Strategic Goals Report

Improve the collection of SDoH information from providers.

Dr. Brooks' 2023 evaluation gathered information from agencies on SDOH and how they collect information. New baseline data on agency diversity is now on our website. AC members cautioned against adding to agencies' reporting burden.

All Staff
Education and Planning
AC

Leveraging of mental health resources to address social determinants.

The CDC model of SDOH was adopted by the Board and is used in communication with agencies. Program liaisons report nominal information from site reviews, including impacts of Care Coordination and case management in participant's access to social determinants resources. As a result, we have a significant amount of in-house data on resources leveraged from case management collected from site reviews.



COMMUNITY
MENTAL HEALTH
FUND

Supporting equitable and quality mental health care in Jackson County

Education and Planning



COMMUNITY
MENTAL HEALTH
FUND

Supporting equitable and quality mental health care in Jackson County

Finance and Internal

Ratification for March 2024

March 2024 Administrative Expenses	Invoice # or Account #	Bank Confirmation #	Amount	GL Code/Description
Infinity	5282	1600	\$422.75	9660
Green Tie	IN# 8510 Internet support package	1601	\$2,500.00	9670
Quench	INV07079624	1602	\$249.68	9100
Alternatives EAP	10379	1603	\$100.00	
Allo (formerly Avid)	216572	1604	\$1,462.20	9180
Steri Cycle	In# 8006295377	1605	\$170.82	9100
Standard Parking	52181951-2403	1607	\$450.00	9400
Welch & Associates (CPA)	JAN 2024 Financials	1608	\$2,000.00	9700
US Bank Equipment Finance	523885200	1609	\$578.45	9140
First Call KC	IN# 4523	1610	\$855.00	9690
Banner Life Insurance	Annual Premium Policy# 180435186	1611	\$815.00	9215
Welch & Associates (CPA)	DEC 2023 Financials	1612	\$1,900.00	9700
First National Bank Credit Card - Business Account	Feb 2024 Billing	1613	\$7,043.65	
Mainmark	2520- April Billing	1614	\$13,184.11	9540
Blue Cross Blue Shield Kansas City	240800000055	ACH	\$8,493.94	9220
Met life	FebBilling 2023 Dental	ACH	\$214.90	9230
Met life	Feb Billing 2023 Vision	ACH	\$43.10	9235
Met life	Feb Billing 2023 Disability/life	ACH	\$322.28	9250
Farmer and Betts	172396 (Pension expense)	ACH	\$456.25	
Subtotal Administration			\$41,262.13	
Provider Initiatives				
iBosswell	AZ200115084	1606	\$4,595.00	
Integrus	#66		\$13,705.00	
Subtotal Initiatives			\$18,300.00	
Grand Total			\$59,562.13	

Sandra Jiles

Sandra Jiles (Jun 9, 2025 18:55 CDT)

Sandy Jiles, Chairperson

Ratification for April 2024

April 2024 Administrative Expenses	Invoice # or Account #	Bank Confirmation #	Amount	GL Code/ Description
Standard Parking	52319374-202404	1615	\$450.00	9400
Welch & Associates (CPA)	Prep for 1096 and 1099's	1616	\$38.76	9700
Infinity	5385	1617	\$1,110.25	9760
Alternatives EAP	10434	1618	\$100.00	
Green Tie	IN# 8510 Internet support package	1619	\$2,500.00	9670
Open Minds	IN#11222 for presentation	1620	\$4,900.00	9790
Welch & Associates (CPA)	Prep for Feb financials		\$2,000.00	9700
US Bank Equipment Finance	IN# 526273693		\$578.45	9140
Allo (formerly Avid)	IN # 218580		\$308.82	9180
First Call	INV-4435 1st Qtr Hosting and Maintenance		\$10,500.00	9690
First Call	INV-4296 KPI Data extraction		\$950.00	9690
Rochelle DePriest	Mileage reimbursement		\$84.82	9400
First National Bank Credit Card - Business Account	March 2024 Billing		\$5,609.01	
Team Office	2024-20827 Furniture		\$3,160.51	9542
KC Buisness Journal	5368536 April 2024		\$208.95	9170
A+ Conferencing	5368536		\$4.00	9180
Met life	FebBilling 2023 Dental	ACH	\$214.90	9230
Met life	Feb Billing 2023 Vision	ACH	\$43.10	9235
Met life	Feb Billing 2023 Disability/life	ACH	\$322.28	9250
Kelly Liming	#1 GMS Meetings with Redcap		\$1,215.00	9760
Blue Cross Blue Shield Kansas City	240510004179	ACH	\$8,493.94	9220
Subtotal Administration			\$42,792.79	

Provider Initiatives				
Integrus	#67		\$13,705.00	
Metro Council	Gold Sponsorship for mental health conference	1621	\$5,000.00	9310
Subtotal Initiatives			\$18,705.00	
Grand Total			\$61,497.79	

03/07/2024 Disbursements
Jackson County Community Mental Health Fund

	Distribution	Category	Initiated	Settled
Child Protection Center	25,000.00	MHFPP	03/07/2024	03/08/2024
De La Salle	50,000.00			
JCCMHF	75,000.00			Disbursed

X *Sandra Jiles*
Sandra Jiles (Jun 9, 2025 18:55 CDT)
Sandra Jiles, Chairperson

03/08/24 Disbursements
Jackson County Community Mental Health Fund

	Distribution	Category	Initiated	Settled
Sheffield Place	77,300.00	MHFCF	03/08/2024	03/11/2024
FosterAdopt Connect	109,750.00			
Operation Breakthrough	47,900.00			
Cornerstones	384,687.50			
Niles	162,500.00			
Steppingstone	124,687.50			
Crittenton	141,858.50			
CAPA	77,525.00			
Children's Place	73,162.50			
JCCMHF	1,199,371.00			Disbursed
ReDiscover	344,100.00	MHFSN	03/08/2024	03/11/2024
Family Conservancy	19,177.75			
KC Cares Clinic/RW	16,552.25			
University Health BHN-Core/NE	283,357.50			
Mattie Rhodes	59,005.00			
Burrell-Comprehensive	300,000.00			
Samuel Rodgers	32,637.50			
Swope	203,076.00			
Jewish Family Services	27,496.25			
ReStart	82,718.75			
JCCMHF	1,368,121.00			Disbursed
Grand total	2,567,492.00			

X Sandra Jiles
Sandra Jiles (Jun 9, 2025 18:55 CDT)
 Sandra Jiles, Chairperson

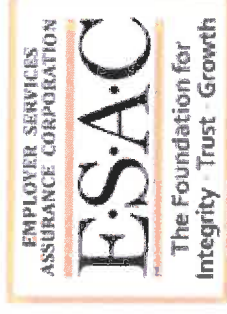
Lever1 Proposal

4.1.2024



About Lever1

- Founded in 2012 by Blue Chair, LLC in Kansas City, MO
- 26th Fastest-Growing Women-Led Company by Women Presidents' Organization – 2023
- 44th Most Successful Company in America by Inc. Magazine – 2017
- 50 Fastest-Growing Companies 2017-2021 Kansas City Business Journal
- Top 10 Small Business 2019, Kansas City Chamber of Commerce
- Lever1 provides business owners cost effective solutions to enhance HR while providing “Fortune 500” benefits
- Lever1's Net Promoter Score (NPS) is 65% higher than the industry average
- Fully accredited PEO providing resources for businesses across the country



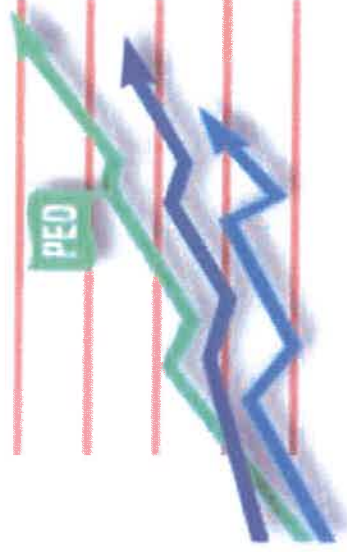
The Lever1 Difference

- White-glove service
- Full-service HR team assigned to your account
- Unique email goes to all team members
- We answer our phone and know our clients
- Weekly email recap outlining all open projects
- Shared web drive for electronic employee folders
- Anonymous 800 number hotline
- ESAC accreditation since 2014 – licensed in all 50 states
- A la carte menu options – not one size fits all
- From start up to enterprise flexibility



Lever1 PEO Advantages

1. Access to “Fortune 500” benefits
2. Attract and retain top talent
3. Cost reduction (On average, Lever1 clients save ~15-45% in benefits costs)
4. Protect your business – reduce risk
5. Access to valuable experts at a fraction of the cost
6. Implement new locations quickly
7. Full-service solution with flexibility
8. Focus on core business

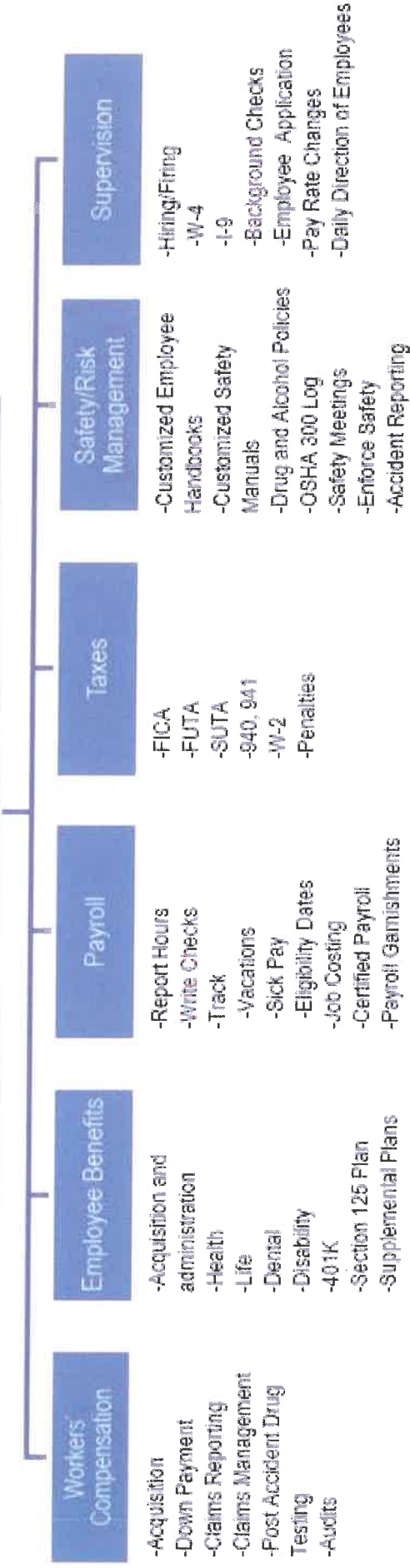


THEY GROW 7 TO 9% FASTER

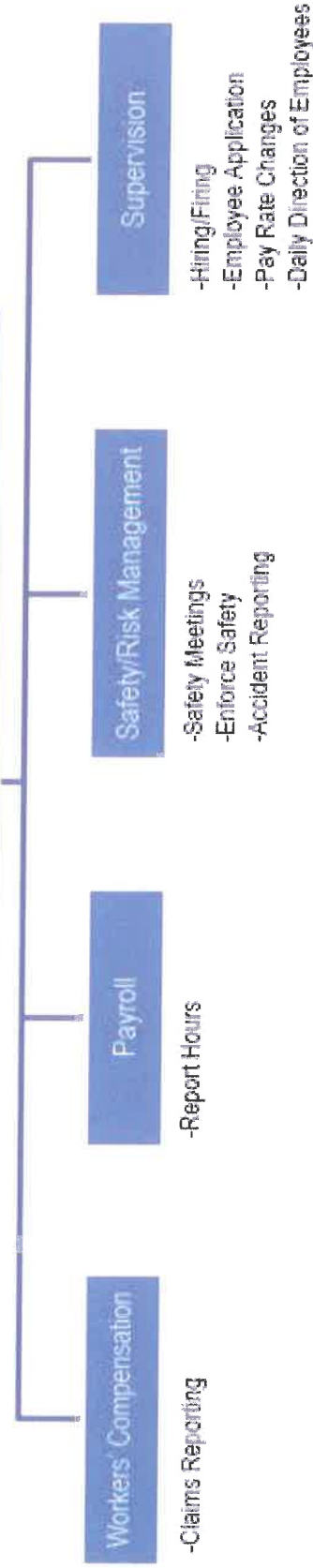
Since December 2004, employment at small businesses using a PEO has grown more than 7 percent faster than at small businesses overall, according to the Intuit Small Business Employment Index.

The Lever1 Difference

Responsibilities Before Lever1 Outsourcing



Responsibilities After Lever1 Outsourcing



Management Fee Includes

Human Resources - Proactive monthly wheel of service and on call HR support as needed to include:

- Draft, review and issue employee manuals
- Process all new hire paperwork
- Personnel file management
- Performance review documents and job descriptions
- Draft and implement discipline process and terminations
- Draft safety and risk management programs
- Troubleshoot day to day employee relations issues
- Review best hiring practices, applications and job postings
- Review and conduct pre-employment screening
- Draft and conduct annual anti-harassment training
- Process EEOC tracking and reporting
- Provide COVID related policies and resources
- Provide guidance on state-by-state compliance issues
- Effectively interprets and administers all leave-of-absence requests and paperwork; FMLA and ADA implications
- Conducting workplace investigations



Management Fee Includes

Benefits

- Administer group health and major medical benefits
- Administer dental insurance benefits
- Administer supplemental benefits, such as short-term disability and life insurance
- Administer health savings accounts and flexible spending programs
- Administer legal planning benefits
- Administer pet insurance benefits
- Administer identity and fraud protection benefits
- Handle COBRA compliance and administration for participants
- Reconcile monthly benefit invoices (applicable to Lever1 sponsored plans only)
- Remit group medical premium payments for clients (applicable to Lever1 sponsored plans only)
- Conduct audits annually
- Process Affordable Care Act tax notices annually
- Monitor Affordable Care Act compliance requirements and report as requested



Management Fee Includes

Payroll

- Process payroll, including job cost and multiple departments
- Maintain and administer Lever1 time and attendance software
- Print and prepare paychecks and direct deposit vouchers
- Maintain employee and client records
- Set up and maintain online payroll systems and interface for clients
- Issue year-end W-2 forms for employees
- Handle applicable wage garnishments and payments to appropriate agencies
- File consolidated 940's and 941's for all PEO client employees
- Process employment verifications
- Set up client payroll for additional locations
- Wage & Hour Compliance



Management Fee Includes

Unemployment

- Handle state unemployment tax filings for employees
- Manage unemployment claims
- Attend unemployment hearings with clients by phone
- Process employment verification inquiries for employees
- Process eVerify on all employees



Management Fee Includes

Time and Attendance

- Access to proprietary web-based software
- Mobile Optimized
- Customizable reports including job costing
- Clock in/out with multi levels of controls
- Paid Time Off (PTO), vacation and sick pay accruals
- Manager and Administrator access rights
- Multi location or entity tracking



Management Fee Includes

Workers' Compensation

- Issue Workers' Compensation certificates (Lever1 sponsored plan only)
- File statutory Workers' Compensation Notice of Injury Reports
- Direct Medical Treatment
- Prepare End of the Year OSHA 300 Reports
- 24-hour reporting of Catastrophic and/or Death Claims to OSHA
- Distribution of Workers' Compensation posters (state and federal)
- Provide Panel Physicians where required by state law
- Conduct loss control surveys
- Review and handle Workers' Compensation claims
- Provide return to work policies and light duty accommodation reviews
- Review and revise state issued policies and class codes
- Conduct annual audit (Lever1 sponsored plan only)



Annual Membership Fee Includes

HRIS

- Initial set up of HRIS software
- Initial set up of time and attendance
- New hire processing
- Employee terminations
- Standard and customized reporting tools

Lever1 sponsored 401(k) plan only:

- Initial set up of plan
- Annual audit
- Annual 5500 tax return
- Fidelity bond to cover assets

EPLI – Employment practice liability insurance for all covered employees



Financial Summary

Service fees are based on gross wages reported per payroll.

\$1,500.00

2.50%

Annual membership fee

Management fee – per month with a \$500.00 minimum.

7.65%

FICA tax services

1.50%

FUTA tax services

2.50%

MO SUTA tax services

0.34%

MO8742 workers' compensation services

0.19%

MO8810 workers' compensation services

Benefits will be selected by client and charged at a pass-through rate.

This proposal is valid for 30 days from today April 1, 2024.



Financial Summary

While our fees are intended to be all inclusive, Lever1 has the resources to provide additional services that may be purchased as needed or as add on services to this proposal.

Additional Services (not included)

- Recruitment, staffing and executive search
- Background checks and drug testing hard costs
- Third-party I-9 verification services for remote employees
- Union payroll, prevailing wage, certified payroll
- Remitting payments to non sponsored benefit plans
- Employee coaching programs
- Client specific HR training programs such as leadership development
- 401(k) roll over and participation fee minimums
- Historical years' payroll audits, tax clean up or reconciliations relating to periods prior to joining Lever1
- Bookkeeping and accounting services
- 1099 payment processing
- Compensation analysis
- Stay Interview process
- Merger/Acquisition guidance



Grants Management System (GMS)



Objectives:

- Streamline grant making, monitoring and site review processes.
- Reduce or eliminate duplicate entries, improve quality and accuracy.
- Share information across workflows, more user-friendly for Board.
- Enable dashboards for staff, board, grantees with information from proposals, budget, site reviews and VBP data.

Recommendation	<p>IGX Intelligrants not to exceed \$210K for Implementation year.</p> <ul style="list-style-type: none"> • Source of funding: Interest income from CD's <p>Board approval will enable us to enter into a contract with a final scope of work.</p> <p>Annual support (post Year 1) approximately \$33k for support and hosting. (Included in administrative budget starting 2025)</p> <p>Will continue with Community CareLink (current vendor @ \$42K+ per year) until changeover and submission of final CCL fee-for-service and demographic data tables.</p> <p>VBP data is still being developed. Separate projects and systems for the near future, cost to be determined.</p>
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Steps Leading to Recommendation

Analysis and Background	<ul style="list-style-type: none"> • Board approval of concept of replacing 10-year-old CCL system. • Extensive search for GMS-capable firms with US office. • Thirteen companies identified. Reviewed: Web site, demo, interrogatives, review against CMHF RFP, functional requirements and workflows
RFP and Proposal Review	<ul style="list-style-type: none"> • RFP replies reviewed from Amplifund, Community CareLink (declined), IGX Intelligrants, SmartSimple, HTC Global • Finalists: SmartSimple and IGX Intelligrants were responsive and have <i>current</i> capacity.
Clarification and Demo	<ul style="list-style-type: none"> • Reviewed cost, workflows, dashboard, financial data, minimal data migration, and VBP data capacity with finalists.
Separate VBP	<ul style="list-style-type: none"> • Decision not to include VBP. Do not custom-build something still in development. • Separate due diligence process: meetings with finalists, proof of concept to setup a separate system.
Best and Final Offer	<p>Best and Final Offers from both Smart Simple and IGX.</p> <ul style="list-style-type: none"> • IGX – Extensive features, data sharing with external VBP data base. Training manual and user documentation. Negotiated best and final proposal with reduced budget.



COMMUNITY
MENTAL HEALTH
FUND

Supporting equitable and quality mental health care in Jackson County

Appropriations



COMMUNITY MENTAL HEALTH FUND

Supporting equitable and quality mental health care in Jackson County.

Pilot Project Proposal

Agency Name:	Sisters In Christ
Amount Requested:	\$75,000 (Budget is attached)
Is request for a New Program in agency:	Yes No X
Is request for an Existing Program in agency:	Yes X No
Submission Date:	May 10, 2024
Name, Title and email of person submitting request:	Carolyn Whitney, CEO, cwhitney@sistersinchristkc.org

Program/Services Narrative

1. Provide a brief overview of the project you are proposing.

Sisters In Christ's Mental Health Services Program provides case support and culturally sensitive psychotherapy and psychoeducation to minority women, youth and children living in Jackson County, Missouri impacted by trauma, anxiety, depression, co-occurring disorders, and other mental health disorders. Through its Mental Health Services Program, Sisters In Christ partners with four Black-led and minority-serving clinical psychotherapists to offer evidenced-based interventions including Trauma-Focused Cognitive Behavioral Therapy, Eye Movement Desensitization Reprocessing, and Child Parent Psychotherapy. **Sisters In Christ requests funds from the Jackson County Community Mental Health Fund to pay the costs of case support, individual therapy, and psycho-educational groups for women, youth, and children residing in Jackson County without insurance.**

2. Explain how this project aligns with your agency's mission and existing programs and services.

Sisters In Christ's mission is to assist in the transformation of people by creating and weaving together a cohesive set of resources that promote their physical, emotional, financial, and spiritual wholeness. Sisters In Christ serves as a resource conduit, personal advocate, and supporter for those we serve.

Sisters In Christ's Mental Health Services Program aligns with the agency's mission because it offers access to equitable mental health care which promotes physical and emotional wellness for community members. This project also aligns with Sisters In Christ existing programs and services; prospective clients of all Sisters In Christ's programs are screened for mental health needs and referred to its Mental Health Services Program.

3. Explain the population you are targeting for this program. (Include demographics, mental health status, trauma history, other relevant factors.)

Sisters In Christ's Mental Health Services Program targets women, youth, and children in the Jackson County community, with a particular emphasis on Black and minority residents of Raytown, who have been impacted by mental illness, food insecurity, academic instability, violence, and other traumas.

Of the Raytown families that have been served through Sisters In Christ's Mental Health Services Program, 100 percent of families have been identified by the Raytown C-2 School District and/or Raytown Police Department to be at-risk for violence perpetration or victimization. Individuals and families referred to the Mental Health Services Program experience at least one, but usually two or three of the following risk factors: mental illness, food insecurity, academic instability, violence, and other traumas.

Individuals and families are referred to Sisters In Christ by the Raytown C-2 School District and/or Raytown Police Department for mental health services and other wraparound supports. In fact, Sisters In Christ is the only Black-led community organization in Raytown that maintains a presence within the Raytown C-2 School District. Sisters In Christ's Community Resource Professionals maintain regular office hours at each of Raytown School District's three middle schools. The Community Resource Professionals provide case support to at-risk middle school students and their families who are identified and referred by the school's administrative or counseling staff in order to meet their mental health, housing, academic, employment, food, and physical health needs. **All of Sisters In Christ's locations are located in Jackson County, MO.**

4. What if any unmet needs will your proposed project meet or address within the target population described.

The proposed project aims to address several unmet needs within the target population, particularly focusing on increased access to culturally competent mental health services for people of color. By partnering with four Black-led and minority-serving therapy providers in Jackson County, including Authentic Talk LLC, A Life's Journey LLC, Haven of Hope LLC, and Clear Counseling LLC, Sisters In Christ's seeks to bridge the gap in mental health support by offering services tailored to the unique cultural backgrounds and experiences of individuals within the community. **The treatment providers will also make Sisters In Christ's treatment records available to the Community Health Mental Fund.** This initiative not only enhances accessibility to essential mental health resources but also fosters a supportive environment where individuals can receive care that acknowledges and respects their cultural identities.

Furthermore, Sisters In Christ aims to increase access to equitable mental health services and meet the emergency and ongoing mental health needs of disadvantaged minority women, youth, and children in Jackson County. By providing free mental health services, including case support, individual/family therapy, and psycho-educational groups, the organization strives to empower community members to engage in preventative care practices and screenings, thereby reducing emergency room or hospital visits for unaddressed mental health issues. Additionally, Sisters In Christ covers transportation expenses for clients who prefer appointments at the provider's office location, ensuring access to care without financial barriers.

5. Explain your agency's overarching practice, model, or approach for services. If this is a new program, explain the components needed to implement the program.

Sisters In Christ's overarching practice is to create a trauma- sensitive environment and involve a gender-responsive approach to mental health services. Sisters In Christ's Mental Health Services Program employs a trauma-sensitive approach and embraces a gender-responsive model to cater to the unique needs of women diagnosed with co-occurring disorders. By aligning with SAMSHA's Center for Substance Abuse and Treatment (CSAT) guidelines, our agency ensures comprehensive support that addresses the specific sociodemographic, criminal justice, environmental, and relational factors outlined by CSAT as pivotal for effective treatment retention among women. Our services encompass tailored interventions targeting relationships, parenting concerns, and prevalent co-occurring disorders such as anxiety, mood disorders, and disordered eating. Furthermore, we emphasize trauma-informed care and integrated treatment strategies to address trauma-related symptoms, fostering a safe and supportive environment conducive to healing and recovery. (Data retrieved from [ncbi.nlm.nih.gov](https://www.ncbi.nlm.nih.gov))

6. How does your agency assure fidelity to the model (i.e., that the approach is being used according to appropriate standards)? **As the CEO of Sisters In Christ, ensuring the highest standard of care and fidelity to our mission is paramount.**

While we currently do not have a formal process in place to address all gender-specific factors identified by SAMSHA's CSAT, we recognize the importance of aligning our practices with evidence-based standards. To this end, we actively seek the technical assistance of the Jackson County Community Mental Health Fund to develop a robust process for assuring fidelity to our model.

Regarding therapeutic interventions, our contracted therapists undergo professional training to proficiently implement evidenced-based and trauma-focused modalities, in line with the standards of our Mental Health Services Program. We prioritize contracting licensed therapists in the state of Missouri, ensuring their compliance with state regulations and ongoing commitment to professional development. By requiring therapists to provide annual copies of their licenses and engage in accredited continuing education, we maintain a culture of accountability and quality assurance.

In terms of client engagement and turnover with clinical staff, our goal is to foster long-term relationships that facilitate healing and growth. While the length of engagement may vary depending on individual needs, we strive to provide consistent support throughout each client's journey. Our commitment to quality care extends beyond clinical interventions to encompass the overall experience of our clients, ensuring that they feel supported and empowered throughout their engagement with Sisters In Christ.

7. Do you have a formal quality improvement (QI) plan? If yes, attach plan/policy. If no formal plan, briefly explain QI procedures.

No, Sisters In Christ does not have a formal quality improvement (QI) plan for its Mental Health Services Program.

Procedurally, Sisters In Christ's Mental Health Services Program follows a specific client service protocol designed to ensure quality assurance from the point of program intake to program completion. After an individual is referred to Sisters In Christ for mental health services, the individual is contacted within 2 days by the Intake Coordinator.

During the initial intake session, the Case Manager collects basic demographic information about the individual and schedules another date and time to administer the Arizona Self-Sufficiency and Basic Needs Assessments to the individual. The Arizona Self-Sufficiency Assessment determines the individual's self-sufficiency levels for 19 life domains including shelter/housing, employment, income, food/nutrition, childcare, children's education, adult education, healthcare, life skills, family relations/social support, transportation/mobility, community involvement, parenting skills, legal, mental health, substance abuse, safety, disability, and financial management.

The five self-sufficiency levels are: 1) in crisis, 2) vulnerable, 3) safe, 4) building capacity and 5) empowered. The Basic Needs Assessment determines if the individual and their family are experiencing any basic need disparities such as food shortages, utility, or housing needs, etc. If the individual demonstrates any mental health challenges according to these assessments, the Case Manager then connects the individual to Sisters In Christ's Mental Health Services Program and recommends one of its four contracted therapy providers.

Once an individual is connected to the Mental Health Services Program through a warm hand-off, the recommended therapist will schedule a time with the individual to conduct a Mental Health Services Program intake. Once accepted into the Mental Health Services Program, the contracted therapist maintains session notes and tracks the client's progress in therapy and outcomes achieved. The therapy outcomes are reviewed by the Sisters In Christ's CEO to evaluate effectiveness.

Sisters In Christ also administers a client feedback survey to collect information about clients' experiences before, during, and upon discharge in the Mental Health Services Program in order to make adjustments and improvements to the program.

8. Who is the individual responsible for overseeing the QI process? Provide Name, Title and contact information for this individual.

Currently, Carolyn Whitney, CEO of Sisters In Christ, is responsible for overseeing the Quality Improvement (QI) process as a contractual condition. You can reach her at cwhitney@sistersinchristkc.org. However, in 2024, Sisters In Christ has included in their 3-year strategic plans to hire a Clinical Director to take over this responsibility.

9. Do you track outcomes for the proposed program? **Yes** or No

10. If tracking outcomes, list the main outcomes for proposed programs or services and how they are measured.

In 2023, Sisters In Christ has served approximately 77 women and 3 youth/children out of the 12 that were referred due to our partnership/relationship with Swope Health Services through its Mental Health Services Program (Prapare System). **Of these 80 individuals, 40 individuals received case support and participated in individual/family therapy while the other 40 individuals received case support and participated in psycho-educational groups.**

Service or Program	Intended Outcome	Method of Measurement	Most recent outcome data collected if available
	Early Outcomes		
Mental Health Services Program: Case Support	Client has a stable and well-managed mental health care plan supported by health insurance or other public health care assistance including Medicaid.	Indicator/Metric: Client has a completed mental health care plan and has insurance or public assistance including Medicaid. Measure/Tool/Collection Method: Self-report Who collects data? Certified Peer Specialists, Community Resource Professionals, Therapists (internal) First Year Threshold: 80% of clients Who is measured? Clients What is being measured? Presence of a care plan and enrollment in health care insurance or public assistance including Medicaid How often and when? Every 30 days	<p>In 2023, 80 individuals received case support services.</p> <p>2024 program year outcome data under collection</p>
Mental Health Services Program: Psychotherapy and Psychoeducation	Client accesses appropriate counseling and therapeutic supports as indicated through completed assessments.	Indicator/Metric: Client attends counseling and therapeutic sessions. Measure/Tool/Collection Method: Self-report of their attendance Who collects data? Therapists and Case Managers (internal) First Year Threshold: 80% of clients attend all sessions Who is measured? Clients What is being measured? Client behavior of attendance at counseling and therapeutic sessions How often and when? Every 30 days	<p>In 2023, 40 individuals received mental health diagnoses from Sisters In Christ contracted therapists and participated in individual/family therapy sessions as indicated through attendance records.</p> <p>2024 program year outcome data under collection</p>
	Intermediate Outcomes		
Mental Health Services Program: Psychotherapy and Psychoeducation	Client's mental health and emotions have stabilized (reduction of symptoms; implement self-care practices; treatment process)	Indicator/Metric: Measures – PHQ9, GAD7, and BTQ Measure/Tool/Collection Method: Assess SA, Assess Trauma HX, medication needs; PHQ9 measure; GAD7 measure; treatment team process; progress notes Who collects data? Therapists, Certified Peer Specialists, Case	In 2023, an estimated 80% of clients demonstrated improved psychological health and decreased symptomology as a

		<p>Managers (internal)</p> <p>First Year Threshold: 100% of clients who remain in the program</p> <p>Who is measured? Clients who remain in the program at least 1 year</p> <p>What is being measured? Client mental health</p> <p>How often and when? Client and therapeutic necessity</p>	<p>result of the therapeutic services provided.</p> <p>In 2023, an estimated 80% of clients developed positive coping skills to manage post-traumatic stress, depression, and anxiety.</p> <p>In 2023, 100% of clients who participated in Trauma-Focused Cognitive Behavioral Therapy reduced their levels of traumatic stress, depression and/or anxiety symptoms as measured the Beck Anxiety and Depression Inventory and through patient health questionnaire PHQ-9.</p> <p>2024 program year outcome data under collection</p>
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11. Do you currently diagnose participants of service? If yes, and data is available, please complete the table below:

Yes, clients of the Mental Health Services program are diagnosed by Sisters In Christ's four contracted therapists.

Calendar year (2023) program data:

Diagnosis	# Agency
Depressive Disorders	28
Bipolar and Related Disorders	3
Schizophrenia Spectrum and other Psychotic Disorders	
Trauma and Stressor-Related Disorders	35
Anxiety Disorders	29
Obsessive-Compulsive and Related Disorders	
Disruptive, Impulse Control and Conduct Disorders	
Substance-related and addictive disorders co-occurring with mental illness	30
Neurodevelopmental disorders co-occurring with mental illness	
Total Participants	40

12. If you do not diagnose participants of service, explain typical characteristics related to mental health history or symptoms or the target population.

Not applicable. Sisters In Christ's contracted therapists diagnose participants of service.

13. Indicate if hiring or start-up time are needed before the project can begin. Provide a description of the activities in the timeline.

Sisters In Christ's Mental Health Services Program is an existing program. There is not any hiring or start-up time needed before the proposed project can begin. The proposed project can begin immediately.

In 2021 and 2022, the Health Forward Foundation provided dedicated program funding support for Sisters In Christ's Mental Health Services Program. However, in 2023 and 2024 Health Forward Foundation has shifted to providing general operating support to Sisters In Christ. Because of this change in funding as well as an increase in demand for referrals to Sisters In Christ for mental health services for women/youth/children, **Sisters In Christ requests funds from the Jackson County Community Mental Health Fund to pay the costs of case support, individual/family therapy, and psycho-educational groups for women, youth, and children residing in Jackson County without insurance who are in need of mental health services.**

Agency Documentation

14. Do you track participants who drop out of service? **Yes** or No

Yes, Sisters In Christ tracks in its Community Care Link (CCL) database which clients miss scheduled therapy appointments as well as which clients drop out of the Mental Health Services Program after completing the initial intake and referral process for therapeutic services. Sisters In Christ's Case Managers and MO DMH and Substance Abuse Certified Peer Specialists follow up with clients who miss scheduled therapy appointments to find out the reason why they have missed appointments and to help clients develop a plan to stay engaged in service. Case Managers and MO DMH and Substance Abuse Certified Peer Specialists also follow up with former clients who have dropped out of service to find out the reason(s) contributing to dropping out of service. Depending on the circumstances contributing to dropping out of service, Sisters In Christ's Case Managers and MO DMH and Substance Abuse Certified Peer Specialists will develop a plan with former clients, if they are interested, to re-engage former clients back into service.

15. Is there a formal policy/procedure in place for keeping participants engaged in service? Yes or No? If yes, attach policy

No, Sisters In Christ does not have a formal written policy/procedure in place for keeping participants engaged in services. Sisters In Christ is interested in developing such a policy in 2024.

16. List top five sources of revenue for current agency operations.

Payer	Past FY\$ Amount	Use of funding
Jackson County COMBAT	\$588,559 total	Three grants total: 1) Substance Abuse Treatment 2) Substance Abuse Prevention 3) STRIVIN' (Violence Prevention)
Chick-fil-A, Inc.	\$175,000	General Operations
Health Forward Foundation	\$75,000	Mental Health Services Program
REACH Healthcare Foundation	\$75,000 total	Two grants: 1) Safe Zone Neighborhood Hub: Case Manager 2) Capacity Building: Strategic Planning and Board Development
Chesley Brown International	\$38,297	Workforce Development / Employment Skills Training

*****The financial data listed above is for fiscal year 2022 (January 1 through December 31, 2022). Some of the funders listed below (Jackson County COMBAT, Health Forward Foundation and REACH Healthcare Foundation) have continued to support Sisters In Christ in the current fiscal year 2023 at increased amounts.**

17. List major partnerships for addressing participants' basic social determinants needs.

Agency / Partner Name	Social Determinant
<i>Sisters In Christ Transitional Supportive Housing,</i> Swope Health Imani House, Healing House, Sheffield Place	Housing
<i>Sisters In Christ Dahomey Training Center,</i> Full Employment Council, Pawsperity, Chesley Brown International, HS Interiors LLC, The Recon Center, Connections to Success	Employment
Swope Health Services, University Health, ReDiscover, Harvesters Community Food Network	Health
<i>Sisters In Christ Transitional Supportive Housing and Safe Zone Neighborhood Hub,</i> Center for Conflict Resolution, Raytown church community, Hope Network Raytown	Social Supports
<i>Sisters In Christ's Safe Zone Neighborhood Hub,</i> Raytown C-2 School District, MINDDRIVE, Exceeds Expectations, Inc.	Education

18. Who will be your agency's key collaborators?

Key program implementation collaborators specific to Sisters In Christ's Mental Health Services Program include the following women/minority operated therapy providers:

- **Authentic Talk LLC (located in Grandview, MO):** This provider specializes in trauma and anxiety interventions and is led by Melissa Vaughns-Guein LCSW, LSCSW CCTP, CCATP, CTMH, MAADC II. In her work with clients, she mostly utilizes Trauma Focused Cognitive Behavior Therapy (TF-CBT), an evidence-based treatment for children and adolescents impacted by trauma and their parents or caregivers.
- **A Life's Journey LLC (located in Kansas City, MO):** This provider specializes in evidenced-based trauma interventions including EMDR (Eye Movement Desensitization Reprocessing) and empirically-validated. Staff members include Alicia Taylor , LPC, Certified EMDR Consultant and Therapist and Kortney Carr, LCSW, CCTP, both of whom are trained clinical trauma professionals and are trained EMDR therapists.
- **Haven of Hope LLC (located in Blue Springs, MO):** This provider is led by Sharee N. Mims, LSCSW, LCSW. She specializes in treating anxiety, depression, grief and loss, life transitions, relationship issues and trauma through Cognitive Behavioral Therapy.
- **Clear Counseling LLC (located in Raytown, MO):** This provider is led by Kenya Anthony-Hicks, LCSW, LSCSW. Ms. Hicks is certified in Trauma and Child Parent Psychotherapy (CPP) which is an evidence-based intervention designed "to support and strengthen the relationship between a child and his or her caregiver as a vehicle for restoring the child's cognitive, behavioral, and social functioning." (nctsn.org)

19. What procedures are in place to address a participant in need of psychiatric care?

Sisters In Christ does not provide psychiatric services. Clients of Sisters In Christ's Mental Health Services Program who demonstrate a need for psychiatric care will be referred to healthcare agencies including University Health, Swope Health Services, and ReDiscover for further psychiatric evaluation and psychiatric services. Sisters In Christ's Case Manager will engage with clients in setting up this initial psychiatric evaluation appointment as well as follow up with clients to address and challenges or barriers they are experiencing to accessing psychiatric care.

20. Does your agency have a policy or procedure that requires screening for benefits eligibility such as Medicaid? **Yes or No**

Yes, Sisters In Christ has an agency-wide procedure in place that requires screening for benefits eligibility including Medicaid. As part of the intake screening and assessment process for all of Sisters In Christ's programs, individuals are walked through the enrollment process for benefits eligibility including Medicaid; Medicare; Women, Infants and Children (WIC) program; Temporary Assistance for Needy Families (TANF), and Supplemental Nutrition Assistance Program (SNAP). All prospective clients of Sisters In Christ Mental Health Services Program are walked through the enrollment process for benefits eligibility including Medicaid prior to starting therapy services.

21. Is your agency accredited? If yes, by what body and what is the current term?

Sisters In Christ has been accredited by the National Alliance for Recovery Residences (NARR) since 2019. The current term is September 24, 2023 through September 24, 2025.

Sisters In Christ has been certified by the Missouri Department of Mental Health (DMH) as a Recovery Housing facility since 2022. The current term is December 2023 to December 2024.

22. Will electronic health records (EHRs) be used for data collection? **Yes or No**

Yes, Sisters In Christ utilizes Community Care Link (CCL), a HIPAA-compliant database to track client demographics and needs. In addition, Sisters In Christ's four contracted therapists utilize electronic health records (EHRs) to track client information, diagnoses information and progress notes. EHRs software utilized by the four contracted therapists include Simple Practice, Therapy Appointment Scheduling and Therapy Notes. Aggregate data is shared with Sisters In Christ staff, as requested, to track progress toward the Mental Health Services Program's early and intermediate outcomes.

23. Does your agency have a Cultural Competency plan? **Yes or No**

Sisters In Christ is a black-led and minority-serving organization. Our leadership team and decision makers are comprised of 100% Black, Indigenous and People of Color (BIPOC) – individuals from historically disadvantaged communities. While Sisters In Christ has made great strides in prioritizing cultural competency at the governance, operational, and program/service delivery levels, our leadership understands and recognizes there is always room for continued growth and improvement especially as we seek to serve a Raytown community with increasing diversity. To this end, in 2024, Sisters In Christ intends to seek capacity building grant funding in order to engage a Diversity, Equity and Inclusion (DEI) consultant to facilitate even deeper conversations at both the board and staff levels surrounding cultural competency and to assist Sisters In Christ leadership in capturing its cultural competency priorities into a written Cultural Competency Plan. The Cultural Competency Plan will be available upon request.

24. Does your agency have a Language Access plan? **Yes or No**

Sisters In Christ has implemented a language access protocol for Limited English Proficient Spanish-speaking clients. In fact, Sisters In Christ employs one on-call staff member, Jorge Bravo, to provide phone, virtual, and in-person translation for community members and clients whose primary spoken language is Spanish. In addition to his on-call interpreter position, Jorge also provides Spanish tutoring services for Sisters In Christ's Safe Zone Neighborhood Hub's Youth Life Link Program.

Sisters In Christ is working on further developing its language access protocol to include a more consistent interpretation translation protocols for all non-English languages beyond just the Spanish language. Once developed, the language access protocol will be captured into a written Language Access Plan. The Language Access Plan will be available upon request.

25. Do you have documents translated in other languages? If so, list the languages.

Currently, Sisters In Christ has three documents translated into a non-English language:

1. Safe Zone Neighborhood Hub: STRIVIN' COMBAT Brochure – **Spanish**
2. Safe Zone Neighborhood Hub: Personal Information Form – **Spanish**
3. Transitional Supportive Housing: Residential Intake Form – **Spanish**

26. What interpreter services are used in the delivery of services?

Currently, if a community member or client needs language interpretation other than Spanish, Sisters In Christ is able to use Google Translate. Because Google Translate is accessible by phone and is able to capture audio/speech-to-text, Sisters In Christ has been able to use it for language interpretation for community members seeking services through its Raytown Safe Zone Neighborhood Hub. In addition, Sisters In Christ is beginning to explore other language interpretation and translation services. For instance, Sisters In Christ is exploring Propio Language Services, which is a comprehensive language access service headquartered in Greater Kansas City specializing in healthcare interpretation and translation and provides phone, virtual, and in-person services.

Propio Language Services is utilized by a wide range of health, government, and social service agencies in the Greater Kansas City community. Propio Language Services comes highly recommended by one of Sisters In Christ's partners.

27. Has your agency received Trauma-Informed training or technical assistance? **Yes** or No

All of Sisters In Christ's staff members are required to receive trauma-informed care training annually. This has been a policy of Sisters In Christ since 2020. For the past three years, Alicia Taylor, LPC, has provided trauma awareness training for all staff members. As a Licensed Professional Counselor and a clinical trauma professional, Alicia has made a personal commitment to the mental wellness of her community. In addition, during Sisters In Christ's Fall 2023 Board and Staff Retreat, Alicia provided further on-going training to board and staff members focused on self-care and burnout prevention through a trauma-informed approach.



COMMUNITY MENTAL HEALTH FUND

Supporting equitable and quality mental health care in Jackson County.

Electronic Vote Form

Provider	Date Request Emailed to Board	Summary of Project	\$ Amount Requested
CAPA	4-Apr-2024	Strengthening Equity and Inclusion in Service Delivery. CAPA has completed the training and strategic planning phase of their DEIB efforts. This request is to support the operationalization of equity into all their programs and policies. CAPA will continue to work with Sophic Solutions during the remaining phases of this project with the overall goal to strengthen the capacity to deliver high-quality care and services to diverse populations of Jackson County.	\$37,900
Rose Brooks	4-Apr-2024	Equity and Inclusion Phase 2. Rose Brooks has completed Phase 1 of their DEIB efforts which included building awareness within the agency of how white supremacy culture has impacted the agency and to build action steps to address them. This work focused on agency leadership, including Board of Directors, Care Coordination within agency services and building a community pipeline to increase the representation of BIPOC (Black, Indigenous, and People of Color) employees and volunteers. This request is to support Phase 2, continue working with their consultant to deepen their work and continue to diversify staff, Board Members and volunteers to be reflective of the populations they are serving.	\$52,900

Board Member	'YES' Vote	'NO' Vote	No Response	Comment(s)
Sandra Jiles	X			
James Walden	X			
Dacia Moore	X			
Marsha Campbell	X			
Desarae Harrah	X			
Rochelle Harris	X			
Jessica Garcia	X			
Karla Williams	X			
Alice Kitchen	X			
Kirby Randolph			X	
Suzie Post			X	

Ratified by the Board on

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Date

Signature



COMMUNITY
MENTAL HEALTH
FUND

Supporting equitable and quality mental health care in Jackson County

Value Based Payment



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FUND

Supporting equitable and quality mental health care in Jackson County

Accountability and Compliance



May 2024 Board Packet

Final Audit Report

2025-06-09

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By:	Jenn Clark (finance@jacksoncountycare.org)
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