

Stark County Board of Developmental Disabilities

May 27, 2025, Board Meeting Minutes

Call to Order

A meeting of the Stark County Board of Developmental Disabilities was held on Tuesday, May 27, 2025, at 2950 Whipple Avenue NW, Canton, Ohio, and by video teleconference. President Dr. Jessica Falvo Lang called the meeting to order at 6:01 p.m.

Roll Call:

Board Members:

Present:

President Dr. Jessica Falvo Lang
Recording Secretary Cindi Sutter
Kathy Catazaro Perry
Maria Heege
Carmelita Smith

Absent:

Vice President Jennifer Moff (excused)
Crystal Waters (Excused)

Also Attending:

Bill Green, Superintendent
Leigh Donatella, CFO/Business Manager
Lisa Parramore, Communications Manager
Connie Poulton, Director of Human Resources

In Memoriam:

A moment of silence was observed for the following: Dustin Zimmer, age 33, passed away on April 8, 2025. Dustin graduated from Southgate School, and received services from our SSA Department. Berko Givens, age 3, passed away on May 5, 2025. He was a toddler who passed away tragically. Berko previously received services from our Early Intervention department.

Minutes of the Previous Board Meeting:

President Dr. Falvo Lang requested a motion to approve the minutes from the Board Meeting held on April 22, 2025.

Kathy Catazaro Perry moved for approval. Carmelita Smith seconded. The Board duly adopted.

Public Speaks:

None.

President's Report:

Board President Dr. Jessica Falvo Lang started the meeting, hoping that everyone had a meaningful Memorial Day weekend. We continue to monitor the state and federal budget process, and as it stands today, our system does not appear to be directly affected. However, it is possible that some individuals may be affected by the proposed work requirements for Medicaid. Bill and his team will continue to monitor and make sure we are informed, especially if the federal medical assistance percentage is affected. It is here that has the potential to affect the state and us locally. As a reminder, this is the non-federal share that we pay for people who have home and community-based services waivers. As a reminder, this is the cost that makes up nearly 50% of our budget.

On Thursday, we will conclude another successful school year at Eastgate and Southgate. We wish all the students and the graduates a happy and healthy summer. This concludes my report tonight.

Committee/Department/Other Reports:

- A. Finance Committee – Minutes in Board packet
Next Meeting: May 19, 2025, at 4:00 p.m.
- B. Personnel Committee – Minutes in Board packet
Next Meeting: May 22, 2025, at 3:00 p.m.
- C. Ethics Council – Minutes in Board packet
Next Meeting: May 27, 2025, at 5:45 p.m.

Superintendent's Report

As we close out May, I would like to take a moment to reflect on the incredible achievements of the past month and share our enthusiasm for what lies ahead. This has been a month of progress, resilience, and meaningful milestones, all of which reinforce our unwavering commitment to supporting people with developmental disabilities and their families.

Every day, I am inspired by the dedication of our staff, families, and community partners. Your passion and hard work make a profound difference in the lives of so many, and together, we are shaping a future built on inclusion, support, and opportunity.

This month, we proudly highlight several extraordinary journeys—stories of perseverance, growth, and newfound independence. Raquel and Josh, two students at Southgate, have piloted assistive technology using a robotic device to increase their independence with feeding themselves—an innovation that is transforming lives. Two brothers were reunited and moved into a dedicated children's home, with two more siblings set to follow next week, alongside a person returning to our community from a developmental center. These reunifications showcase the true impact of individualized services and compassionate care. Last week, three Southgate students graduated—a milestone worth celebrating—and this Thursday, our preschoolers will take their first steps toward kindergarten, embarking on new beginnings filled with promise. Next week, our summer camp will kick off for grades K-6. Each of these stories embodies the spirit of our mission, reminding us why we do what we do.

Looking ahead, we are excited to announce that our Universal Changing Station will be traveling across Stark County this summer, expanding accessibility and ensuring that everyone has the support they need, no matter where they go. A special thank you goes to Lowell Byrd, our transportation manager, whose tireless efforts and expertise have made this project possible. His dedication exemplifies the commitment we strive for every day.

While we celebrate our successes, we recognize there is still work to be done. In the months ahead, our focus remains clear: Strengthening resources so we can serve the greatest number of people with the greatest possible impact; Increasing advocacy to ensure individuals and families have access to the support they deserve; reinforcing collaboration across Stark County to push boundaries, remove barriers, and open doors to new possibilities.

To each member of our Board—thank you. Your resilience, dedication, and unwavering support drive the progress we see every day. Your leadership makes our mission possible, and your commitment empowers us all to continue shaping a future filled with opportunity. As always, we welcome your insights and feedback, and we invite you to stay engaged as we move forward together. Your voices, your ideas, and your support help shape the path ahead. Together, we are making a lasting difference.

This concluded the Superintendent's Report.

Old and New Business:

None.

Presentation – RNQA

Kristen Quicci, Director of Early Intervention and Nursing, shared a PowerPoint presentation on Registered Nurse Quality Assessment (RNQA).

She shared an overview of a story that is available on DODD's website, Alex's Story; You Are Your Brother's Keeper. She then shared a slide on Safe Medication Administration, providing an overview including that each individual must be evaluated to determine if they can safely administer their own medications. If they cannot safely do so, Medication Administration is put into their ISP and all providers are trained on the process. The presentation emphasized that all quality assessment and monitoring activities are designed to safeguard the health and safety of individuals. The rights of individuals remain a top priority throughout the process. The Board plays a vital role in supporting the entire medication administration process through SSA assessments, reporting, and education. Monitoring activities conducted by the Board focus on several key areas, including Service and Support Administrators (SSAs), provider compliance and support, investigative services, and direct service providers. These coordinated efforts help ensure safe and effective medication administration across all levels of care.

The RNQA (Registered Nurse Quality Assurance) team was introduced during the presentation, highlighting the dedicated professionals responsible for overseeing safe medication practices and nursing quality across the

organization. The team includes Ellen Bossart, RN; Holly Reed, BSN, RN; Shellee Finch-Cedeno, BSN, RN; and Cindy Swanson, RN, who serves as the Nursing Educator. Their combined expertise supports ongoing education, compliance, and quality assurance efforts related to medication administration and healthcare services.

The presentation highlighted the role of Nursing Education Services in supporting provider training and certification in Medication Administration and Health-Related Activities (HRA). This training is required for providers to safely administer medications and perform HRAs. Certification 1 is required to have Certification 2 or 3. There are three certification levels: Certification 1 covers oral and topical medications as well as HRAs; Certification 2 focuses on medication administration via G/J tubes; and Certification 3 includes injectable medications for treating metabolic glycemic disorders. These certifications are essential to ensure provider competency and the safe delivery of care.

Kristen then provided an overview of the RNQA (Registered Nurse Quality Assessment) process, which is conducted by a specialized team of nurses holding RN Trainer Certification. This certification qualifies them to perform this particular quality assessment. RNQAs are required every three years or more frequently if a location meets specific criteria. During these assessments, the team reviews providers' medication administration processes, identifies root causes of issues, assists in system development, and offers support. Most importantly, the RNQA team emphasized that their primary role is to help and support providers in delivering safe and effective care.

The presentation also included an overview of the Quality Assessment (QA) Tool used by the RNQA team to evaluate medication administration and health-related activities. The tool is comprehensive with over 150 indicators, and color-coded to cover multiple areas of provider performance, including certification and supervision, preparation, observation, documentation, coordination of care, delegation, and specialized procedures. It outlines expectations for certification tracking, medication storage and handling, proper administration steps, emergency protocols, communication, and more. This structured approach ensures consistency in evaluations and helps identify areas needing support or improvement.

The RNQA presentation concluded with a review of historical data from Nursing Services, illustrating total Quality Assessments (QAs) completed each year and the number of individuals impacted. The data shows a significant increase in both metrics from 2018 to 2019, followed by a sharp decline in 2020 due to the COVID-19 pandemic. Since then, the number of QAs and individuals affected has steadily risen, with 2024 showing 106 QAs completed and 180 individuals impacted. This upward trend reflects the RNQA team's ongoing efforts to increase oversight and support across service locations.

The final chart shared during the RNQA presentation reflected the historical growth in nursing education services, specifically the number of Provider Medication Administration and CPR certification classes offered annually. Since 2018, there has been a steady increase in both class types, with a noticeable dip in 2020 due to the COVID-19 pandemic. Following that, numbers have risen sharply, particularly for medication administration training, which reached 454 sessions in 2024—more than quadrupling the 2018 total. CPR training also peaked in 2023 at 139 sessions before slightly declining to 116 in 2024. This upward trend demonstrates the agency's ongoing commitment to expanding provider education and ensuring staff are well-prepared to deliver safe, effective care.

The RNQA team reported on the ongoing Self Administration Assessment (SAA) Audits, highlighting that over 1,700 assessments were reviewed in 2024. For 2025, they are on track to complete over 1,200 SAAs. The bar graph illustrates the percentage of assessments completed correctly by month for 2025. As of April, the accuracy rates varied, with January showing the highest accuracy at 91.6%, followed by April at 79.2%, March at 76.4%, and February at 62.9%. No data was reported yet for the months of May through December. These audits are critical in ensuring individuals are safely assessed for their ability to self-administer medications.

The presentation emphasized the collaborative effort required to maintain the safety of individuals supported by the Board. It highlighted that avoiding system breakdowns depends on the coordinated roles of several key areas: Service and Support Administrators (SSAs), Board Monitoring (including Investigative Agents and Provider Compliance Specialists), Providers, and the RNQA and Nursing Education teams. Each plays a critical role in safeguarding health and ensuring quality care, reinforcing that the system works best when all components are aligned and working together.

This concluded the presentation.

First Reading of Board Policies:

The Director of Human Resources, Connie Poulton, gave the first readings on the following policies. These policies will be presented during the May Board meeting for second reading and Board approval.

Policy 2.05 Public Records Requests - Revised
Policy 2.12 Supporting Safe and Healthy Lives for People Served – Revised
Policy 2.14 Abuse Awareness and Prevention - Revised
Policy 2.19 Prioritizing Use of Home and Community-Based Services - Revised
Policy 4.06 Learning Management System Training – Reviewed
Policy 4.11 Program Discipline and Corrective Action – Reviewed

Financials and Board Resolutions:

05-29-25: Operating Fund #071:

A. Two Payrolls for April	\$1,413,712.04
B. Bills for Payment in April	<u>\$8,535,537.84</u>
TOTAL:	<u>\$9,949,249.88</u>

Maria Heege moved for approval of Resolution 05-29-25. Carmelita Smith seconded.

Discussion:

Leigh Donatella, CFO/Business Manager, reported that for April 2025, total local revenue was \$272,097, total state revenue was \$269,048, and total federal revenue was \$1.19M. Therefore, the total revenue received for April was \$1.7M. For April 2025 expenditures, there were two payrolls totaling \$1.4 million, total benefits paid of \$852,064, and total other expenditures of \$7.68M, which included waiver match and administrative fees. Our expenses did exceed our revenues by about \$8.2M. Leigh noted that we received our real estate distribution in May, which is not yet reflected on this report.

For year-to-date cash, we started 2025 with \$49.9 million. We have \$0 in open 2024 purchase orders. Open 2025 purchase orders totaled \$25.85M at the end of April. With the net change in the financial position of negative \$18.48M, the month ended with unencumbered cash of \$5.6M, and with our reserve balance account in the amount of \$10 million, the actual unencumbered cash at the end of April was -\$4.4 million.

Looking at the April budget versus actual statement, focusing on year-to-date, we have received \$7.6M in revenue, 14.35% of the total revenues we expect to receive. We have spent \$26.08M, 37.99% of the total expenditures budgeted, our target is about 33%. The available budget at the end of April was \$16.72M, made up mostly of unencumbered personnel.

In reviewing prior-year encumbrances, the Board carried over \$491,856 from 2024. To date, \$367,304 of the purchase orders have been paid, \$124,551 have been canceled, and there is a remaining balance of \$0 for 2024 purchase orders. For Resolution 05-29-25, there were two April payrolls of \$1.4 million, and other non-payroll expenses of \$8.54 million.

The Board duly adopted.

05-30-25: This resolution approves additional appropriations to the General Fund Budget (071).

Maria Heege moved for approval of Resolution 05-30-25. Catazaro Perry seconded.

Discussion:

Leigh Donatella, CFO/Business Manager, explained that this resolution authorizes additional appropriations of \$983,723 to the 2025 General Fund Budget (071). The Board has passed through Capital Housing Grant funds in excess of the original budgeted amount. Due to the ongoing projects, we want the budget to accurately reflect the total amount of funds being allocated. All Capital Housing Grant funds passed through are cost-neutral to the Board.

The Board duly adopted.

Second Readings:

05-31-25: Resolution to approve the Board policies presented for second reading.

Catazaro Perry moved for approval of Resolution 05-31-25. Carmelita Smith seconded.

Connie Poulton, Director of Human Resources, gave a brief summary of the policies presented for second reading:

Policy 3.07 Transmittable Disease – Revised

Policy 4.09 Employee Reasonable Accommodation - Reviewed

Policy 6.05 IT Email – Reviewed

The Board duly adopted.

Adjournment:

President Dr. Falvo Lang requested a motion to adjourn. Maria Heege moved for approval. Carmelita Smith seconded. The Board adjourned at 6:33 p.m.

Note: The next Board meeting is scheduled for Tuesday, June 24, 2025, at 6:00 p.m. in the Ernest Cohen Room at Whipple-Dale Centre.