



**State of Ohio Chapter
Recovery Services Agency Professional Committee Meeting
December 19, 2024**

Union:

Geoff Davies, 1199 Coordinator, State of Ohio Division
Amanda Fletcher, CPC, Richland Correctional Institution
Stacey Adams, CPC, Noble Correctional Institution
Michael Dray, CPC, Chillicothe Correctional Institution
Matthew Baker, CPC, Warren Correctional Institution

Management:

John Sexten, Director of Recovery Services
Todd Viars, Labor Relations Officer
Josh Copper, Labor Relations Officer
Tina Heindel, Regional Supervisor

AGENDA

1. Noble Correctional Institution – Therapeutic Communities

Biggest complaint is space. Have 130 full. Getting and other 110 in next six months.
Biggest TC with best outcomes, but least staff.
Farkas and Supervisor going to GCI, no help for TC at NCI.
3 positions open, 1 for a year.

John Sexton: We've had them posted and interviewed. Not getting any. The ones we get we interviewed and not been successful. Landscape and BH workforce is dry.

We did offer AOD 1 vacancy and posting Mr. Keiths position.

Lag time off app to offer is a burden.

We can talk to HR to find out what hold ups are. Some of it may be background check and drug testing and applicant not responding.

Opening:

20098469	69323	Correctional Program Coord	
20098473	69341	Alcohol & Drug Counselor 1	OFFERED
20091409	69323	Correctional Program Coord	

Mr. [REDACTED]'s CPC is open and posted. This is the one waiting to be posted. Posting is out of our control, how long it gets done.

Sexten: 2 openings. One is being offered right now and the other is Mr. [REDACTED]. In TC.

Capacity and increase:

Tina: Alumni and orientation list in the ride in row. Expectation of institutions to have it full so they're using it for alumni and cadres. They're not necessarily in the program. They're pre-treatment, not yet in. Clinical supervisor also carrying a caseload. No-one is going past 1:20.

Stacey: You guy wanted that. We can utilize that space for our programming.

Tina: as far as structure is a self-help mutual help program. They're meant to be giving each other feedback and holding each other accountable and can write each up but staff has oversight, rational authority. It's not being addressed without staff knowledge and direction. Observation, encounter.

Concern has been raised in others, about a lack of protocols and policies specific to the TCs.

Tina: watch is specific to each institution. Each has the structure of the modality but specific to their unique program. Major and cardinal rules the same but their handbook says what they're following. Inmates and staff.

Copper: there are workplace protocols. But for the operation of the TC is a joint venture, but there are institutional and departmental policies.

Tina: they're nothing in the program the inmates don't know about, they have to know. And staff are expected to follow that too.

Inconsistency between institutions is essentially intentional. The modality is the same, but each institution may have difference.

Sexten on NCI TC Staffing: It is sufficient and will increase only if the program can grow and also space, which is down to the institution.

NCI staffing TC at Noble

3 AOD

3 CPC

Ops Manager

110 more people won't be on their caseload – alumni, cadre, and waitlist. Until they get in that's when they'll see AOD1.

Current caseload still to high though even when filled.

IOP case limit is 15. With TC is 20. SAMI its 12. 20 is a lot though.

- Farkas and Supervisor going to GCI, no help for TC at NCI.

Tina: one will subside with Teams, but Farkas will continue two times a week to assist.

Issue is supervisor is out on leave. The whole Noble team was going up to assist with training.

Sexten: we in process of hiring operations manager for Grafton. We do have applications.

Interviews tomorrow. Checks are done after the offer is made.

2. Educational Recognition

Follow up from contract negotiations proposal.

Recovery Services management said they would have to explore further but were in principle in agreement with the idea. Was not agreed to in the final contract but would be followed up on.

We were told we'd get this in September and haven't yet. Why the delay?

Copper: we're still favorable. We're just waiting on info and answers. In the same place.

Stacey: nothing has moved since September then?

Was this a ploy? We were told we'd get this letter in September, from DAS.

Dray: what info are you gathering?

Copper: Vacancies, where they are, it's a moving target also info keeps changing. End of the year things have got slow and other things going on that are pulling our resources.

Sexten: any employees attained any qualifying degree in this time period?

Stacey: no but we have people with degrees who are doing more but are getting paid the same.

Sexten: degree is not directly related to the diagnosing it's the certification. Yes, you have to advance a degree to get advanced licensing.

Yes, we have people going from AOD to CPC

Amanda: also, it was amongst current staff also, bumps to everyone who has it not just from September.

Outcome: You'll get back to us.

Dray: anything we can do to assist the investigation?

Copper: no, it's not RS.

3. Recruitment and Retention supplements

- Modifications to Article 43.13 includes Alcohol and Drug Counselor II, Correctional Program Coordinator
- Current vacancy rate 27.4%, increased from 25%
- Policy and process for requesting
- Recommendations for institutions to receive – where are highest vacancy rates?

Copper: still getting information. Once we establish something under 43.11 for the fiscal year, no guarantee it will follow on each year, may have to do it each year. July fiscal year.

We have existing policies for the nurse, its just figuring out either rewriting the policy or writing a separate policy and then getting it approved. Whole thing still has to go through DAS and then there has to be budget study. Would hopefully before the end of this fiscal year.

Still gathering the info on what

4. Educational Leave and Reimbursement

Problems with process: no one knows how to do it. 4 hour leave request gets pushed around, and how to sign up and reimbursement. Management isn't giving direction and taking a long time.

23.04 Time Off for Classes

An employee may be allowed time off from his/her position at regular rate for the purpose of taking in person or online job related educational courses or training, at an approved educational institution. The maximum time off under this arrangement may not exceed one tenth (1/10) of the employee's normally scheduled hours per week, unless otherwise

agreed to by the Agency. Any time beyond this amount shall be without pay, unless specifically approved by the Agency. If time off for classes is denied, the Employer shall provide a response with the Employer's reason for denial. Grievances on this issue shall only be advanced through

Sexten: There is a n HR policy and a DAS form they fill out. Get supervisor approval and regional or Sexten if out and it is sent out to HR. Starts with supervisor approval. There is a set procedure.

Stacey: so, who gets it. People in HR don't know.

Copper: once its approved its essentially a time request.

Sexten: when I get them, I send them to Willie Rice and copy Laurie.

Stacey: Do supervisors know?

Sexten: They should. You can steer them to us. It's been discussed in meeting with Supervisors and labor. We talk about it but may not have had to do it for a couple of years, but if there is an issue just loop us in. I just approved one last week.

Amanda: can you send us that information or guidance so we can help our members navigate that?

5. Assignments and Workload

Raised initially in December 2023:

Amanda: You said you'd get supervisors to review workloads to have them address assignments.

John: I cannot say it happened, but I did have that meeting with them.

Amanda: It would be helpful to free up some time to talk to those supervisors. Any CPC should be able to function well in any assignment.

Todd: You need to identify who the other Amanda are because those supervisors might not give honest answers as to what they are doing.

Amanda: But then what happens is you address it with that supervisor and that supervisor takes it out on me through assignments.

Todd: Right but that's when John follows up with me to follow that up.

Dray: CPC has freedom to discuss what those two activities are.

John: Yes.

John: I will look into this and other distribution.

We would still like to address the fact that members are doing more than other members. I know we have asked about seeing what everyone is doing, but the ones that are organized seem to have a more case load. I know come soon the OTP workers are leaving Grafton and the responsibilities are going to fall on the CPC workers. They are already down one staff member too.

So, Lorain you have one just doing assessments and another just doing Starting Points. Or you'd have some with 2 IOPs. This is Lorain but sure its other places.

Sexten: I didn't get to this. If I had specific examples, I can address those. We had one only dealing with Peer Support not IOP, so we changed that. So yes, that needs to be raised:

- Raise with manager, with delegate is needed
- Management should work with you to adjust
- Issue follow up.

Sexten I'm also committed to working broadly on that this year. No-one should just be doing one thing and no other treatment groups

Stutz: MANCI CPC retirement. Will that assignment be bid internally? 24.16

Sexten: we will work to fill that position and that individuals will get the duties.

Geoff: Assignment are bid by seniority

Stutz: If a SAMI CPC retires, will the existing internal CPC's get to bid on the SAMI assignment, or will this be posted externally instead?

Copper: Everything is put out there and anyone can apply. There's no internal bidding.

Amanda: So, the posting will be for a SAMI-specific CPC even though an existing CPC may want that assignment?

Would you canvass it before posting? No.

Geoff: does 24.16 not count?

24.16 Shift and Assignment Openings

A. When applicable, shift and assignment openings within institutions shall be filled by the qualified employee within the classification at the worksite having the greatest State seniority who desires the opening.

No, it's not shifts. And because it has different qualifications. It's a job opening. It's the entire job not just this group at 3 o'clock

If it's not SAMI or anything, would that apply?

No. if you're internal you would apply too. You would get first bid.

Copper: It's not applicable, language under vacancies would be applicable. Assignments are within the position.

How is that not applicable? Because it's a vacancy.

Copper: it's a job assignment.

6. Hiring Process

- Taking more than 30 days.
- Posting requirement now only 5 days
- Still taking 30 days plus to post and more to hire

Stacey: Why do we have to wait until someone leaves? [REDACTED] took a job October, her job not posted. She was extended to train someone at [REDACTED]. So leaving January 13 but her position still not posted and her assignments are being done by staff at Grafton.

Copper: November, the position was requested to be filled (PAR – Position Action Request). Has to be submitted and approved. We didn't get approval to fill it until recently. It's beyond our control. We have several at that point. 38 vacancies. She was not held back to train someone she was covering it - we did ask for a 2 week extension. And separately her destination also delayed her move.

Stacey: In contract negotiation Kristin Rankin said the reason can't hire is because we keep it up too long and that's why they wanted to shorten the posting period to five days. So that's not really the hold up for approval. It's DAS? It seems like it's taking longer now.

Sexten: there are several different legs. We submitted as soon as we learned she was leaving. It was sent to HR who then has to submit it upwards. Don't know the reasons why holdups. But when it is approved, we on them to post it asap. When we have applicants Fiscal, HR, Dep Dir. Chief of Staff, and Director for approval. Then HR will contact applicants who then have to fill out

paperwork and do background check and blood test. That was done outside agency so can take some time. There may be follow up questions on the background by legal. And that's just to get them blessed before offering the job.

Stacey: What can we do to speed up the process? We have people at Grafton picking up and will be short again soon. CPC workers doing a full caseload that is now going to also do OTP caseload.

Sexten: Lorain OTP worker is going to come over to help with screenings. Not provide group, but screenings.

It can be as quick as X and as long as X. We want people filled as quickly as possible but it's a long winding bad road.

7. Process for requesting and receiving 100% Sick Leave

- Current contract says that the first 36 hours used in the usage period (December 1st to December 1st) is automatically 100% and then anything after that is 70% (except in the circumstances described below) until you get to over 72 hours in the period and it goes back to 100%.
- During that donut hole period between 37-72 hours members are eligible to supplement their leave per 13.04:

Hours Used	Percent of Regular Rate
1-36 sick leave	100%
36.1 plus sick leave	70%

Any sick leave used during the 36.1 to 72 hours will be paid at 100% when the sick leave usage is for the employee, the employee's spouse, or child residing with the employee for: 1) time spent hospitalized overnight or hospitalized at the direction of their physician or for those hours of sick leave used before or after the hospital stay that are contiguous to the hospital stay; 2) time spent in Any sick leave used during the 36.1 to 72 hours will be paid at 100% when the sick leave usage is for the employee, the employee's spouse, or child residing with the employee for: 1) time spent hospitalized overnight or hospitalized at the direction of their physician or for those hours of sick leave used before or after the hospital stay that are contiguous to the hospital stay; 2) time spent in outpatient surgery or for those hours of sick leave used before or after the outpatient surgery that are contiguous to the outpatient surgery. Sick leave may be supplemented at the employee's request to 100% of pay with available sick leave balances. The employee must indicate the desire to supplement sick leave balances on the leave request. In the event this paragraph is found to violate the FMLA or any other State or Federal law or regulation or the implementation of such will adversely affect the provisions of this Article, the parties agree that this paragraph will be null and void.

Any sick leave utilized in excess of seventy-two (72) hours in any usage period shall be paid at one hundred percent (100%).

Employees may elect to utilize sick leave to supplement an approved disability leave, workers' compensation claim or childbirth adoption leave pursuant to Articles 15 and 26. Sick leave used for these supplements shall be paid at a rate of 100% notwithstanding the schedule previously specified.

- Willie Rice (our payroll contact) has requested that an e-mail be sent to him IN ADDITION TO requesting 100% pay in our Leave Request. Despite our members doing both, they are still not being paid at 100%.
- We request a clear formal process, with communication to all employees

When does the 70% vs 100% period reset? December 1.

The accruals are Dec 1 to Dec 1 pay period.

Management: If you want to supplement (not hospitalization) this is the process

- Submit your sick leave request (put note on your request for supplement)
- Email you timekeeper that you want to supplement (Willie.Rice@mha.ohio.gov)
- Rice processes it, and out it on your check.

It's a completely separate form. It is available in the document section. There is a central place. Timekeeper would direct. Its on the main homepage, under MHAS Forms.

Dray and Stutz send Copper multiple examples of members doing this and still not getting their money.

If it is still not supplemented what does the member do?

Copper: I'll look into it.

8. Absent supervisor

- Who is in charge is supervisor is out/on leave?
- How is that communicated.
- TO what extent does clinical work into it

Sexten: I have stressed this. I know managers put out info to staff when they have a planned absence. I stressed it this morning in a central meeting. I found some are doing some are not. I want that done so your staff know how long and who they should go to. Institution: they go to regional. For unexpected absence, supervisor should call regional and they will inform the local CPCs that you go to Sexten. Understand some are following that and some are not but it is being rectified.

There could be a point person assignment. E.g. DRC might have a RS question that CPC might be able to answer, but they don't have to. Often times it's just whoever is there answering questions about operations or whatever they could look up. Not making decisions.