



2013 REPORT TO THE COMMUNITY



# *meaningful lives*

MAKING IT HAPPEN



COMMUNITY MENTAL HEALTH AUTHORITY  
CLINTON • EATON • INGHAM



*meaningful lives*  
MAKING IT HAPPEN

**“MEANINGFUL LIVES: MAKING IT HAPPEN”** is the theme of this year’s Community Mental Health Authority of Clinton, Eaton, and Ingham counties (CMHA-CEI) Report to the Community. This theme describes, in five words, what has been the focus of the work of those whom we serve, the CMHA-CEI staff, the members of the CMHA-CEI Board of Directors, the members of our contractual provider network, and our community partners for the past forty-nine years. It is the core of our work as a community-based support and services system: ensuring that the life of every individual whom we serve has meaning.

This report catalogs the accomplishments in the past year of this organization and those whom we serve. It describes our willingness to take on bold challenges and to foster creativity and innovation in the design and implementation of solutions to hard-to-solve difficulties. Our willingness to take on these challenges is driven by a commitment to those whom we serve – individuals, families, and communities. When that commitment is combined with imagination, hard work, tenacity, and the desire to integrate partnerships into all of our work, we are able to achieve what often seems impossible.

This 2013 Annual Report to the Community contains a number of stories of meaningful lives and the work needed to make them happen. This work is marked by resilience, recovery, creativity, and collaboration. These stories are emblematic of the millions of such encounters that make life richer for the 11,000 persons served by CMHA-CEI every year.

### **CMHA-CEI TAKES ITS VISION SERIOUSLY:**

*This organization holds a vision of a community in which persons with mental health needs have the opportunity to participate, with dignity, in the life of the community, with its freedoms, responsibilities, rewards, and consequences.*

As this vision underscores, our efforts are driven by the view that the abilities and disabilities that we possess, as a community – whether it be a community that is bound by geography, family ties, common challenges, or interests – are what make us who we are: a community founded on the concept of mutual support, full citizenship, and integration.

So, as we look toward 2014, we are encouraged by the impact of nearly five decades of the community mental health movement, a movement built around ensuring that we all are able to live lives of meaning. We are also fully aware of the economic, political, and stigma-based barriers that must be overcome as this movement continues to ensure full citizenship and community participation for all of us, regardless of ability. We look forward to the continuation of this movement and CMHA-CEI’s role in fostering its progress.

**Robert Sheehan, Executive Director**

## **BOARD OF DIRECTORS**

### **FY2013**

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# Community Services for the Developmentally Disabled

**Community Services for the Developmentally Disabled (CSDD) promotes and supports ongoing choices and opportunities for children, adults, and their families to be full and equal citizens in the community.**

## **AUTISM SERVICES AND CENTER**

One in 88 children are diagnosed with Autism, up from 1 in 160 a decade ago. In response to this increase, CSDD began providing a new service: Applied Behavioral Analysis (ABA). This service is available to children with Autism ages 18 months to 5 years.

Residential Options Inc., a provider for CSDD, has led the way in providing this service for the children of the tri-county area. ABA helps children improve communication and social skills, and prepares them to be successful in the school environment.

In 2014, CSDD will also open the Mid-Michigan Therapy Center. The center will provide diagnosis and treatment of Autism Spectrum and other developmental disorders. Emphasis will be on early diagnosis, evidence based practices, and providing training and support to families and other caregivers.

## **PROJECT CONNECT**

As part of an overall effort to provide smooth transitions from school to adulthood, CSDD has partnered with Michigan Rehabilitation Services (MRS) and Ingham Intermediate School District (IISD) to facilitate seamless services for students exiting the school system. Launched in Spring 2013 with three school districts – Haslett, Waverly, and Webberville – the pilot serves the purpose of familiarizing staff in adult service systems with students that will be entering their programs.

The Project Connect team (representing CSDD, MRS, IISD) meets monthly with the school's Transition Coordinator, the student, and their parents. Together, the team reviews each student's Individualized Educational Plans (IEPs) and assists with strategies for successfully exiting the school system.

The Project Connect program began with juniors and seniors in these three school districts, with plans for expansion to additional schools in Ingham County. This process will eventually be replicated in Clinton and Eaton Counties. In addition, there has been an initiative from the Life Consultation Unit to assign case manager liaisons to each of the school districts in all three counties to collaborate with the schools, students, and families as needed – attending IEPs, consulting on issues outside the school's domain, and offering guidance.

## **WORK SERVICES**

The Work Services unit of CSDD had a successful year in many arenas in 2013. Working and being productive is an important part of developing self-esteem and quality of life for a person. This unit assists more than 400 individuals in finding, developing, and supporting activities to produce an income.

The Supported Employment unit, in partnership with Michigan Rehabilitation Services and Peckham Vocational Industries, surpassed their yearly goals for the number and quality of community placements obtained for CMHA-CEI consumers. Partnerships with Meijer Warehouse, Michigan State University Food Services, Kellogg Center, Premier Food Service sites, and 15 other employers resulted in 66 placements at wages between \$7.40 and \$11.01 per hour, with people working from 6 to 40 hours per week.

In addition, other Work Services Components met their revenue goals, through partnerships in the community including the Work Activity Center at Transitions North, Jolly Java, and the Micro-Enterprise project. It was a successful year of new contracts for work in the Work Activity Program, with significantly increased contracts with MSU, Bottle Corporation, and the Neogen Corporation. The Micro-Enterprise staff set new sales records for individually-run small businesses, working with over 70 individuals from the Transitions Programs.



## **GRAND OPENING! BIRCH CAMPUS - INGHAM COMMUNITY HEALTH CENTER**

The Birch Campus - Ingham Community Health Center opened in April 2013. The center is a cooperative effort between the Ingham County Health Department and CMHA-CEI to provide medical care to patients who receive services at CMHA-CEI. The center is located inside the community mental health facility at 812 E. Jolly Rd, Suite 112, Lansing, Michigan. Many patients are being seen on a daily basis.

The integration of physical and behavioral healthcare is key to promoting health, quality of care and patient satisfaction, and cost control.

**Pictured below, Bob Sheehan, CMHA-CEI Executive Director, and Dr. Renee Canady, former Health Officer for Ingham County Health Department, cut the ribbon at the dedication and opening of the health center.**



## **WALK A MILE IN MY SHOES RALLY 2013**

In 2013, over 400 persons who receive CMHA-CEI services participated in a rally to enhance public awareness, inform legislators, and reduce stigma related to mental illness and developmental disabilities. This rally stresses that Michigan does not have parity between mental health and physical health coverage.

### **CULTURE OF GENTLENESS**

Staff throughout CMHA-CEI's CSDD program work tirelessly to promote an overall Culture of Gentleness, explicitly focusing on creating environments where:

- **EVERYONE** is treated in a way that makes them feel safe and valued.
- **EVERYONE** has an opportunity to have meaningful relationships with others and to engage in meaningful activities.

While seemingly simple concepts, it takes an ongoing effort to ensure this culture is lived out on a day-to-day basis.



### **CMHA-CEI COMMUNITY EDUCATION EVENTS**

CMHA-CEI continues its efforts to reach out into the community by offering free educational events on behavioral health topics as well as primary care topics. Below is a list of events held in 2013:

- **A Sisters Call**  
A documentary film and discussion about Schizophrenia and homelessness.
- **ABC's of Diabetic Health**  
A free public workshop on managing diabetes.
- **Annie's Ghosts: A Journey Into a Family Secret**  
A reading of Steve Luxenberg's book about family secrets and mental illness.
- **Stomp Out Stigma**  
A presentation & discussion about coping with Bi-polar disorder.
- **Perseverance**  
A speaker and film addressing addiction and homelessness.
- **Child Trauma**  
A free public workshop on understanding child trauma.

# Children's Services

## CMHA-CEI Children's Services continues to lead Michigan in positive clinical outcomes for children and families.

As the graphic below illustrates, CMHA-CEI Children's Services continues to show better results than most of the state. The data is reported by Fiscal Year (FY), through use of the statewide outcome measure, PECFAS (Preschool and Early Childhood Functional Assessment Scale), and CAFAS (Child and Adolescent Functional Assessment Scale). The data reports positive changes in scores from intake to completion of services and reflects services to children below and above the age of five years and their families. The most current data available on statewide average is from FY 2011.

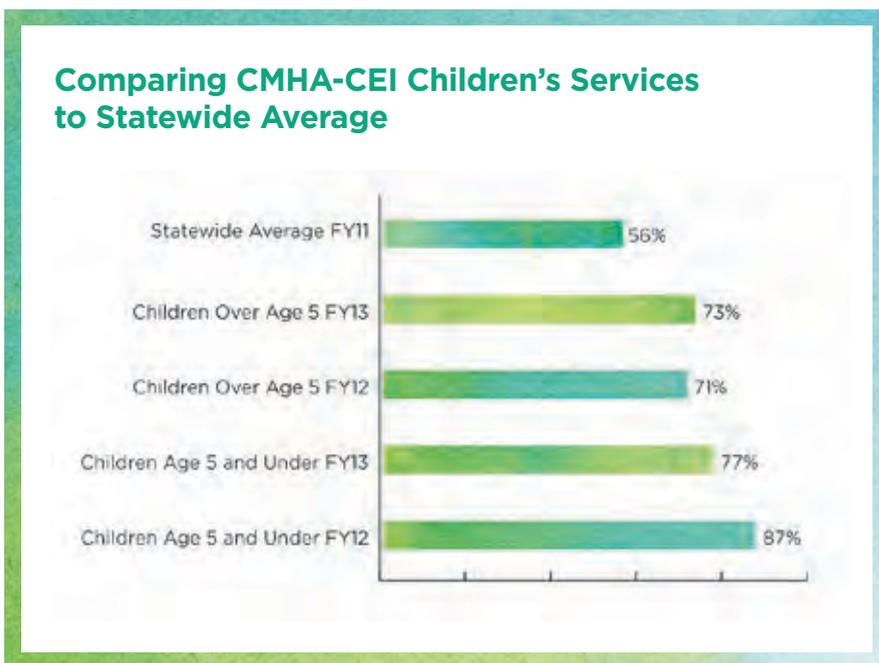
## SED WAIVER

Children's Services continues to expand the number of families served through the use of the federal waivers for children with a Serious Emotional Disturbance (SED). The CMHA-CEI in 2013 had the highest number of SED Waivers in the state. The Waiver emphasizes coordination of care among service providers, something this CMHA-CEI has championed actively in the work done through the System of Care in Clinton, Eaton, and Ingham counties. In partnership with the Department of Human Services (DHS), Children's Services dedicated a part-time staff position to providing an on-site liaison whose role is to consult with DHS staff on the needs of the families they serve and link them with the appropriate CMHA-CEI services.

This liaison and other staff of the Children's Services program presented to DHS in each of the three counties in 2013 as part of the ongoing work to build awareness of the services CMHA-CEI has to offer the families involved with child welfare agencies.

## STRENGTHS-BASED LEARNING

The Children's Services program worked to develop and formalize our Family Guidance treatment model, which has been deemed a promising practice by outside evaluators. This approach to care centers on the belief that families have diverse ways of solving complex problems and have expertise when it comes to their children. Our focus is on identifying and implementing small, obtainable changes through respectful questioning that creates hope, competence, and success. In the past year the management team revisited and enhanced the material in an ongoing effort to keep our curriculum strong and relevant. Two eight-week learning sessions were held in 2013, with approximately 14 participants in each session. In addition to some revisions to the material, the roll out of this most recent version included reviewing videotapes of each staff member and providing thoughtful feedback regarding their work, specifically in relation to the staff person's identified





goal for their own learning and growth as a clinician. The staff provided strong feedback and suggested that this intentional review is invigorating and helps them to continue doing difficult work.

### **TRAUMA CLINIC**

The Children's Services Trauma Clinic is moving forward in developing an innovative array of services for children and families who have experienced traumatic events. Data suggests that more than 90% of the families served in Children's Services have a background that includes some form of trauma, and each family requires a treatment plan flexible enough to meet their unique needs in relation to addressing the trauma related concerns. There is a growing body of research that suggests that individuals managing the effects of trauma benefit from a variety of non-traditional therapies in

conjunction with more standard forms of treatment. Children's Services uses occupational therapists to see families involved in CMHA-CEI programs, adding the benefits of sensory evaluation and sensory integration to their treatment. Children's Services contracted with the Michigan State University Community Music School in 2013 to work with some of their clients.

In addition to having staff trained in evidenced-based treatments for trauma, it is the goal of the program to provide all Children's Services staff with the education and support to provide services that are trauma-informed. Trauma clinic staff are able to serve as consultants to their peers in addition to providing co-therapy as needed while maintaining their own caseloads of families who are prepared to do therapeutic work that is specifically focused on managing the effects of trauma.

### **INFANT MENTAL HEALTH**

Infant Mental Health (IMH) home-based services in Michigan is now recognized as a Promising Practice! Research will be continuing to fulfill the requirements to be an Evidence Based Program. CMHA-CEI's Parent-Infant Program has been providing IMH services for infants, toddlers and their families in the tri-county area almost since the treatment program was developed over 35 years ago. We have been a key contributor in the development of the practice model and will continue as we contribute to the upcoming research. IMH services focus on strengthening parents' ability to nurture and foster their child's social emotional development while addressing parental and child mental health issues. As a majority of a child's brain development occurs in the first three years of life, PIP services have a significant impact on the child's life trajectory.



## Be Yourself!

Cathy graduated from Fowler High School in 1997. After graduation she spent most of her time hanging around at home with her mom, and on Tuesday mornings she helped her Aunt Rita. Her mother learned about the Community Support Services Transitions St. Johns program, and they decided to try it. The first visit wasn't easy – Mom came in and talked with staff while Cathy sat in the car. But since that first visit everything changed for Cathy.

Cathy says, "Once I realized that some of my old classmates were there, that made it okay. Now I come to Transitions St. Johns four days a week. This program has helped me do things I wouldn't normally have been able to do because it was not offered in the town I had lived in. It has helped me learn to be my own self."

"After I learned some things in the Independent Living Group I realized I can do this! Now I am doing more things independently, and I'm looking forward to having my own apartment in our new house. Even now, I use my Independent Living Group folder on the weekends to help me with my chores. The class also helped me learn to cook."

"I have learned about health and fitness, too. I go to the gym on Monday afternoons and I am going independently to yoga on Monday and Thursday mornings. I use public transportation to go to my classes. All this has really changed my life around."



# Health and Wellness

**CMHA-CEI Peer Support Specialists (PSS) partnered with 374 consumers during 2013 to promote health and wellness.**

The health and wellness classes and events included:

- **WHAM (Whole Health Action Management)**

Classes promoting a healthy mind and body by setting and achieving whole health goals with a weekly action plan and a support group.

- **NIA**

A sensory-based movement practice promoting listening to your body and choosing pleasure over pain. A positive or negative attitude can make a difference in weight loss and fitness.

- **Smoking Cessation and Healthy Choices**

A weekly support group focusing on making a healthy lifestyle change by reducing or eliminating a smoking habit.

- **PATH (Personal Action Toward Health)**

Six week workshop teaching strategies for management of chronic health conditions by improving sleep habits, food choices, exercise, pain management, and other issues that impact health.

- **Diabetes Workshops**

Educational programs focusing on managing diabetes through education, eating habits, and exercise.



- **National Recovery Month Seminar & Speakers**

Four speakers shared experiences with mental illness, addiction and achieving recovery with consumers, staff, and the community.

- **Creative Recovery**

An arts program designed for adults challenged by mental illness and/or developmental disabilities. Classes/workshops/programs feature opportunities to express the artist within oneself including:

- **Arts and Crafts** – *Painting, pottery, card making, crafts.*

- **“Stitches in Time”** – *A bi-weekly group that does needlework and supports each other.*

- **“Writers Workshop”** – *A monthly group that writes poems, journals, and explores writing topics.*



## Substance Use Disorders and Mental Health Corrections

### THE RECOVERY CENTER

An eleven bed Sub-Acute Clinically Monitored Detoxification Program located in Lansing, Michigan, continues to see a strong collaboration with local agencies to reduce the frequency of admissions to local emergency rooms for individuals who would be better served by accessing Substance Use Disorders Treatment. Persons served by the Recovery Center often have a long history of addiction tied to numerous medical problems.

In 2013, The Recovery Center increased nursing hours, allowing for coverage 7 days a week to better serve those in the program. By adding this specialized nursing care, the program has also been able to provide physician oversight and prescription medications. These medications abate withdrawal symptoms that, in the past, may have led to an individual walking out of the program prior to stabilization and thus never reaching the next level of care. Understanding that the chronic care model involves mind and body, the ability to offer physician/nursing care, auricular acupuncture, and medications brings the program one step closer to treating the whole person.

## Adult Mental Health Services

**Throughout 2013, CMHA-CEI Adult Mental Health Services (AMHS) expanded capacity through innovative collaborations to reach and serve adults with mental health needs accessing services provided through community partnering organizations.**

In October, 2013 the State Court Administrator's Office (SCAO) awarded AMHS with the 55th District Court a grant to establish a mental health court in Ingham County. The Mental Health Court model is designed to identify individuals with criminal justice involvement due to the symptoms of a serious and persistent mental illness and/or other conditions that would qualify them for services at CMHA-CEI. This grant provided for a full-time Mental Health Therapist, Client Services Specialist, and a part-time Peer Support Specialist, as well as psychiatric providers. Research shows that

mental health courts reduce the rate of incarcerations and hospitalizations for individuals receiving specialized court programming as well as dramatically improving quality of life.

### BEHAVIORAL HEALTH

Behavioral health services for adults were provided in nine physical health care settings (e.g., Ingham, Eaton, and Clinton health department locations as well as primary and family clinics) by therapists and allied providers (psychiatry, nursing, and peer support specialists) working in collaboration with primary care



staff to address the comprehensive health needs of consumers. Over the course of the year, 1,068 consumers received 4,177 behavioral services through this new health care delivery model. The benefits of “co-located” services include more richly integrated care, increased staff efficiency, reduced “costs” (e.g., transportation, time away from work, and other activities) for consumers, timeliness of interventions, and other positive outcomes.

### PEER SUPPORT SERVICES

Adult Mental Health Services expanded Peer Support Services (PSS) available to consumers with mental health needs through recruiting, training, and prioritizing opportunities for peer support staff. In 2010, AMHS had 10 permanent PSS staff and by December 2013 that number had grown to 24 permanent

positions. PSS staff have the unique ability to help consumers by sharing their own mental health issues and key factors leading to their recovery. Peers promote recovery through mentoring, person-centered planning, helping consumers navigate benefit systems, housing assistance, and instilling hope. Peers also provide a broad range of health education and promotion services through the delivery of Whole Health Action Management, Personal Action Toward Health, Mental Health First Aid, and Smoking Cessation curricula to consumers, which complements health services being offered through integrated AMHS programs and primary care services provided through the Ingham Community Health Center-Birch Campus that opened on April 1, 2013, located at 812 E. Jolly Rd., Lansing.

### CRISIS SERVICES

AMHS Crisis Services (CS) staff provided more urgent screenings of consumers presenting with acute psychiatric issues and had more face-to-face contacts in 2013 than in any previous year. Specifically, CS screened 2197 adults on an urgent basis during the fiscal year ending in September 2013: a growth of 583 additional face-to-face evaluations and a 27% increase in the number of contacts on an annual basis over 2010. In order to address this increase in consumer need, the crisis recovery team (CRT) was established in 2011 with a focus on intensive, short-term intervention with individuals. The CRT utilizes a comprehensive approach to care by providing brief therapy, case-management, peer supports, nursing, and psychiatric treatment, ultimately linking consumers to community and agency providers for ongoing services. The addition of peer support services has been critical to the promotion of recovery. Individuals served through this program also receive assistance in obtaining state and federal benefits, primary health care, housing, employment, and counseling and substance abuse treatment.



## Mental Health First Aid Training

Mental Health First Aid Training (MHFA) is an 8-hour course that teaches how to help someone who is developing a mental health problem or experiencing a mental health crisis. The training helps identify, understand, and respond to signs of addictions and mental illnesses.

CMHA-CEI had four staff trained as certified trainers for MHFA in the Fall of 2012. The goal of CMHA-CEI is to educate as many individuals as possible about mental illness and what an individual can do when mental health concerns are suspected. In 2013, 112 persons in seven classes completed the CMHA-CEI MHFA program.

### Four Reasons to Become A Mental Health First Aider

#### 1. Be prepared

When a mental health crisis happens, you will know what to do.

#### 2. You can help

People with mental illnesses often suffer alone.

#### 3. Mental illnesses are common

One in five adults are diagnosed with mental illness in any given year.

#### 4. You care

Be there for a friend, family member, or colleague.

*Individuals or groups that are interested in learning more about or registering for MHFA training may call CMHA-CEI Customer Service at 517-346-8244 or toll-free 1-877-333-8933 for more information.*

## Transitions Leslie

Transitions Leslie opened its doors on March 14, 2013. This new program is a unique collaboration between CMHA-CEI, Tri-County Office on Aging, and Grace Lutheran Church at 212 S. Sherman, Leslie MI. The program was designed to meet the needs of Senior citizens in the Leslie or southern Ingham county area. Tri-County office on Aging is providing a nutritious meal 3 days per week and community members are invited to attend along with the people we support. This program strives to bring the community to the people we support rather than requiring people to go out to find friends. Several people previously served in Mason or Holt have moved to Leslie and are enjoying a relaxing schedule of events. Each month a calendar filled with activities, guest speakers and bingo is developed and distributed. (Bingo prize donations are welcomed!)

CMHA-CEI staff at this location have worked tirelessly to circulate information in the Leslie community about the opening of the Senior Center. They are interested in having volunteers help with meal service or to lead group activities.

***To volunteer at Transitions Leslie, please call 517-898-5989.***



## Information Services

The Information Services Department worked on information technology infrastructure upgrades in 2013, with a majority of the work focused in four areas:

- **Implementing the new “Streamline” Electronic Health Records system** to provide clinicians with real-time electronic access to each consumer’s health record, making clinical information readily available to support treatment.
- \* **Creating an “encounter warehouse”** to support CMHA-CEI’s new region, the Mid-State Health Network and used for data submission system to the Michigan Department of Community Health.
- **Rebuilding the 10-year-old highly complex CMHA-CEI electronic system** to submit service information to the Michigan Department of Community Health to meet changes mandated by the Department.
- **Continuing partnerships to develop and promote the exchange of clinical healthcare information**, including ongoing work with the Great Lakes Health Information Exchange, Ingham County Health Department, and Michigan Health Information Network.

## Human Resources

The Human Resources Department continues its pursuit in developing employment strategies to ensure the CMHA-CEI workforce maintains the capacity, diversity and skill level needed to meet the growing demand for diverse behavioral healthcare, developmental disability services, and substance use services.

Human Resources staff, in collaboration with the Diversity Advisory Council, Leadership, and the Board of Directors, focused their efforts on the development of a Management Mentorship Program. The goal of the program is two-fold:

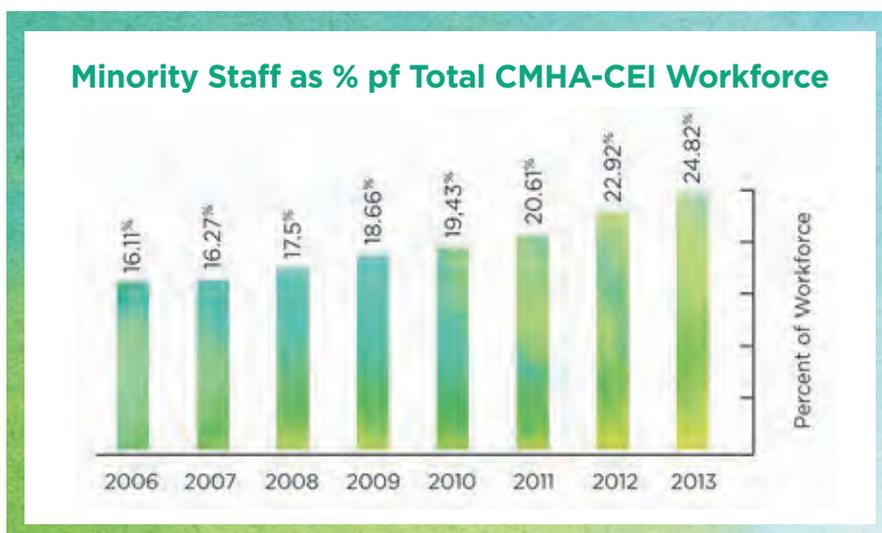
- to support succession planning by ensuring a rich pool of internal candidates exists within CMHA-CEI to fill management position vacancies.
- to further our current recruitment initiatives of diversity of agency staff to reflect those of the community served.

## Diversity and Cultural Competence

Work continued in 2013 to strengthen the diversity and cultural competence of CMHA-CEI’s workforce. Guided by the Diversity Advisory Council (DAC)—a group made up of consumers and staff, Board members, and labor representatives—a range of approaches were applied including:

- Cultural competence training
- Employee recruitment
- Multi-lingual materials
- Management mentoring

The racial and ethnic minority population in the tri-county community makes up 14.5% of the entire population. The analysis below indicates the focus on achieving a diverse CMHA-CEI workforce has been successful, with the percentage of staff represented by racial and ethnic minorities climbing every year.





## Finance: Reimbursement Services

### Quality improvement initiatives continue to be a focus in CMHA-CEI's Reimbursement Services in addition to the on-going regulatory requirements.

The following are 2013 highlights of those accomplishments:

- Assisted consumers with applying for Medicaid and Social Security benefits, assisted consumers with enrolling for healthcare benefits in the Health Insurance Marketplace, completed specialized training to become Certified Application Counselors and Certified Navigators to provide staff with expertise and efficiency, and CMHA-CEI's Reimbursement Program partnered with the Centers of Medicare and Medicaid to become Champions of Coverage for the Insurance Marketplace and partnered with Michigan Consumers for Healthcare to serve as a local Community Navigator.
- Created a tracking tool for Medicaid re-determinations which automatically notifies CMHA-CEI staff when a re-determination is due so staff can assist consumers in completing the required re-determination to ensure their will be no interruption in their Medicaid benefits.
- Created a Medicaid Explanation of Benefits to be sent out annually for at least 5% of Medicaid services to consumers receiving services from CMHA-CEI meeting a new Michigan Department of Community Health requirement.
- Developed and achieved many efficiencies by the Reimbursement Program by creating or refining several tools in the Revenue Manager software including the ability to do on-line fee determinations and keep a history of those determinations, ability to track Medicaid deductible amounts for consumers.
- Entered into a contract between the CMHA-CEI Reimbursement Program and Gratiot Community Mental Health to provide expertise and assistance with reimbursement questions, guidance, and technical functions.
- Implemented many successful service code changes that were mandated for psychiatry established by the American Medical Association with the Centers for Medicare and Medicaid.



### Persons Served per Fiscal Year

The increase in the number of persons served by this organization—up nearly 20% over the last five years—is the result of:

- a range of innovative clinical approaches to reaching the un-served and underserved (what CMHA-CEI has termed "Emerging Markets").
- an increased demand and expanded outreach.
- a range of innovative financial leveraging approaches.

#### Increase in the number of persons served over the last year.

|                        |        |
|------------------------|--------|
| 2012 .....             | 10,634 |
| 2013 .....             | 11,287 |
| One Year Increase..... | 6.1%   |

#### Increase in the number of persons served over the last five years.

|                       |        |
|-----------------------|--------|
| 2008 .....            | 9,501  |
| 2013 .....            | 11,287 |
| 5 Year Increase ..... | 18.8%  |



# CMHA-CEI Governmental Fund – Statement of Revenues, Expenditures and Changes in Fund Balance

Year ended September 30, 2013

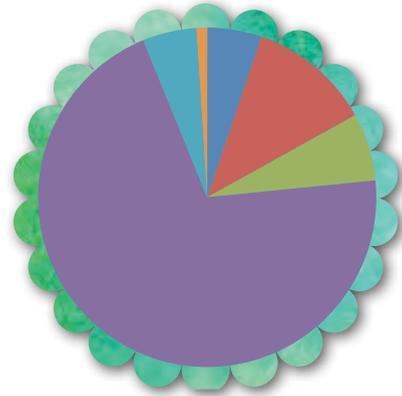
## REVENUES

|                                     |                    |
|-------------------------------------|--------------------|
| Federal sources.....                | \$6,002,803        |
| State sources.....                  | 13,536,658         |
| Local sources.....                  | 7,428,033          |
| Medicaid contracts.....             | 81,159,081         |
| Other contracts.....                | 5,945,840          |
| Charges for services and fees ..... | 1,146,604          |
| Investment income.....              | (2,905)            |
| <b>Total Revenues .....</b>         | <b>115,216,114</b> |

## EXPENDITURES

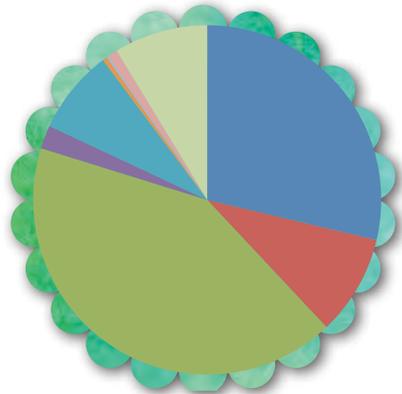
|   |                    |
|---|--------------------|
| Adults with Mental Illness .....          | 32,755,155         |
| Children with Emotional Disturbance ..... | 10,610,599         |
| Developmental Disabilities .....          | 47,705,300         |
| Substance Abuse.....                      | 2,475,944          |
| Board Administration.....                 | 8,940,105          |
| Community Benefit .....                   | 477,394            |
| Supportive Housing.....                   | 191,933            |
| Affiliation .....                         | 1,058,516          |
| Coordinating Agency .....                 | 9,936,588          |
| <b>Total Expenditures.....</b>            | <b>114,151,534</b> |
| Excess of Revenues over Expenditures..... | 1,064,580          |

*In addition to CMHA's revenues and expenses for its Clinton, Eaton, and Ingham operations, CMHA receives \$39,424,083 in Medicaid revenues with which it purchases Medicaid services, for the residents of its eight county Affiliation region, from its six community mental health and substance abuse coordinating agency affiliates. When these funds are reflected in CMHA's budget, its annual FY 2013 revenues were \$154,640,197 and its annual FY 2013 expenses were \$153,575,617.*



## REVENUES

- Federal sources
- State sources
- Local sources
- Medicaid contracts
- Other contracts
- Charges for services and fees
- Investment income



## EXPENDITURES

- Adult Mental Health Services
- Children's Services
- Developmental Disabilities
- Substance Use Disorders
- Board administration
- Community benefit
- Supportive housing
- Affiliation
- Coordinating agency

## 2013 CMHA-CEI Customer Satisfaction Survey

Annually, CMHA-CEI surveys those whom it serves to determine their level of satisfaction with CMHA-CEI services. Following are the results of the 2013 survey (percent responding satisfied or very satisfied):

|  |            |
|--|------------|
| CMHA-CEI responded to my request for services.....                           | <b>91%</b> |
| CMHA-CEI staff are courteous and respectful.....                             | <b>96%</b> |
| CMHA-CEI staff help me to get the right type of service for my problem ..... | <b>92%</b> |
| In general, I am satisfied with the services provided by CMHA-CEI.....       | <b>94%</b> |
| CMHA-CEI staff understand my needs and situation.....                        | <b>92%</b> |
| CMHA-CEI staff have the knowledge and skills to serve me well.....           | <b>93%</b> |
| If a friend or family member were in need of similar services,.....          |            |
| I would recommend my CMHA-CEI program to him or her.....                     | <b>92%</b> |
| The services I receive help me to function better in my life .....           | <b>91%</b> |
| If I were to seek help again, I would come back to the same program .....    | <b>91%</b> |
| CMHA-CEI staff follow my person-centered or family-centered plan.....        | <b>91%</b> |
| CMHA-CEI helped me identify natural supports .....                           | <b>87%</b> |



COMMUNITY MENTAL HEALTH AUTHORITY  
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*CMHA-CEI is an equal opportunity employer.*