



Community

MENTAL HEALTH

CLINTON • EATON • INGHAM

SURVIVING &

Thriving

LIVING
MENTALLY
WELL

2015 REPORT TO THE COMMUNITY



Our Mission

CMHA-CEI's mission is to fulfill two complementary but distinct roles:

Behavioral healthcare provider – providing, directly and through partnerships, a comprehensive set of person-centered, high quality, and effective behavioral health and developmental disability services to the residents of this community.

Advocate, catalyst, thought leader, convener – fostering the transformation of all aspects of community life, eliminating inequities, and promoting the common good for all, especially for persons with mental health needs.

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Message from the CEO

The Community Mental Health Authority of Clinton, Eaton, and Ingham Counties (CMHA-CEI) Annual Report highlights the resilience of our organization and consumers as we learned to survive and thrive in 2015—amidst transitions, challenges, and new opportunities for growth. This kind of resilience would not have been possible without the support of CMHA-CEI’s strong history of innovative board and staff leadership, dedicated community partners, and passionate mental health advocates.

The past year was marked by many transitions—from saying goodbye to a long-standing, trusted leader in Bob Sheehan, to laying the foundation for new electronic health records, to keeping pace with changes in funding patterns. Yet through it all, this organization’s members rallied to serve the mental health needs of our consumers with dignity and an eye to a more promising future—as they have done for over 50 years.

This report highlights the 2015 programs and initiatives that make it possible to boldly uphold CMHA-CEI’s vision of creating:

“A community in which any person with a mental health need has access to a wide range of resources to allow him or her to seek his or her desired quality of life and to participate, with dignity, in the life of the community, with its freedoms and responsibilities.”

We recognize there is much work yet to be done to realize our vision. Yet, this report offers a time to reflect upon and celebrate how we are moving forward in collaboration with community partners to help consumers and their families LIVE MENTALLY WELL, with their abilities and disabilities. We also celebrate the advocacy work CMHA-CEI and our affiliates have undertaken to ensure that we are creating the conditions for all members of the community to thrive.

TOWARD THAT END, IN 2015 CMHA-CEI STAFF:

- created new access points to mental health services by embedding behavioral health consultants in primary care settings and mental health staff in local mental health courts
- trained Families Forward staff in trauma screening for youth, in conjunction with the Department of Health and Human Services
- instituted new behavioral health prevention and wellness initiatives
- increased our capacity to serve youth and young adults with Autism Spectrum Disorder (ASD)
- initiated 24/7/365 access to substance use disorder screening and referral, and introduced mindfulness therapeutic tools and a common dialectical approach in residential substance use disorder treatment at House of Commons

As we look toward the future, we see much light on the horizon with new opportunities before us—fully aware of the economic, political, and stigma-based barriers that lie ahead of us that we must overcome. We commit to the mental wellness of our consumers and to an environment that supports full community participation for everyone. We look forward to the continuation of services to over 12,000 of Michigan’s most vulnerable yet resilient citizens, who teach us every day about the will to SURVIVE & THRIVE.

**Sara Lurie, Chief Executive Officer
Community Mental Health Authority
of Clinton, Eaton, and Ingham Counties**

Community Services for Developmentally Disabled

AUTISM BENEFIT EXPANSION

Effective January 1, 2016 the Department of Health and Human Services (DHHS) expanded the Autism Services benefit to provide Behavior Health Treatment (BHT), including Applied Behavior Analysis (ABA) to Children and Young Adults up to the age of 21. Previously the Autism Services benefit served Children through age five.

Behavioral Health Treatment services include a variety of behavioral interventions, which have been identified as evidence-based by nationally recognized research reviews and/or other nationally recognized scientific and clinical evidence. BHT services are designed to be delivered primarily in the home and in other community settings.

Behavioral Health Treatment intervention evidence-based services include:

- collecting information systematically regarding behaviors, environments, and task demands
- adapting environments to promote positive behaviors and learning while discouraging negative behaviors
- applying reinforcement to change behaviors and promote learning
- teaching techniques to promote positive behaviors, build motivation, and develop social, communication, and adaptive skills
- teaching parents/guardians to provide individualized interventions for their child, for the benefit of the child
- using typically developing peers to teach and interact with children with Autism Spectrum Disorder (ASD)
- applying technological tools to change behaviors and teach skills

1 in 68 children are identified with Autism Spectrum Disorder (ASD)



SOURCE: Centers for Disease Control and Prevention, 2014.

Community Mental Health Service Programs are responsible for implementing the benefit including providing Comprehensive Diagnostic Evaluations, working with Prepaid Inpatient Health Plan (PIHP) to enroll the child (young adult) in the benefit, and securing qualified providers to render the services.

Adult Mental Health Services

NEW ACCESS POINTS IN 2015

Adult Mental Health Services (AMHS) intensified efforts to expand access to mental health services for unserved community members in non-traditional settings in 2015. AMHS staff collaborated with the 55th District Mental Health Court program and successfully supported applications by the 30th Circuit Court in Lansing and the (65th District) Mid-Michigan Regional Mental Health (MMRMH) program in Clinton, Gratiot, and Montcalm counties, to develop and fund new mental health court programs for individuals with serious and persistent mental illnesses. Participants included individuals already receiving services from CMHA-CEI, as well as individuals receiving coordination of care with community treatment providers. Mental health court programs have historically been found to improve clinical outcomes for participants and reduce rates of recidivism.

In 2016, AMHS will continue to expand outpatient counseling services to individuals with moderate mental disorders/illnesses in the Tri-County area.

CLINTON COUNTY PARTNERSHIPS

Clinton County Counseling Center collaborated with multiple specialty courts in its service area in 2015 and is working with MMRMH as the primary treatment provider for this new program. The center added a half-time Mental Health Therapist position to fill the Mental Health Court needs. The center also collaborated with the Mid-Michigan District Health Department to provide a co-located Mental Health Therapist providing treatment services at its Clinton County location.

REDUCED HOSPITALIZATION RATES

The dialectical-behavioral treatment (DBT) teams at the Mason Rural Outreach Program and Clinton County Counseling Center sites received designation as a full fidelity or comprehensive DBT team during 2014. Dialectical behavioral treatment (DBT) services are a cognitive behavioral-based therapeutic intervention for individuals with emotional dysregulation issues. Services include skills training groups, individual psychotherapy, and 24-hour crisis on-call support.

There are active and planned treatment services available in Clinton, Eaton, and Ingham counties. Analysis of the outcomes of these clinical interventions by the DBT group leader and a Michigan State University graduate student during 2015 reveal rates of inpatient psychiatric hospitalization for individuals actively participating in this program show a reduction of 75% from pre-treatment to post-treatment conditions over the two-year period. This reduction in diverted inpatient utilization translated into a cost savings of \$113,250 for each one year period, funding which can be used for other services. More importantly, the benefit of intensive community-based treatment targeted at helping individuals maintain their relationships, work, education, and other activities without the disruption of a psychiatric inpatient stay are priceless.



**Suicide is
the 10th
leading
cause of
death
overall in
Michigan.**

SOURCE: American Foundation for Suicide Prevention, 2015 Michigan Fact Sheet.



Families Forward » Children First

MEETING THE CRUCIAL NEEDS OF CHILDREN

Families Forward (FF) was selected as one of 13 key sites in Michigan to explore and develop a much needed intersection between CMHA-CEI and the Department of Health and Human Services (DHHS) for identification and treatment of traumatized youth in the Tri-county area. The appropriately named “Breakthrough” initiative supports the development of trauma screening and identification of some of the most vulnerable youth requiring a therapeutic healing intervention; those children being served via DHHS abuse, neglect and foster care services. Once identified as “in need” of further trauma assessment, young children, youth and adolescents are referred to FF for the appropriate evidence-based trauma treatment. Additionally, joint training of DHHS and CMHA-CEI front line staff has been designed to increase trauma awareness, enhance collaboration and help front line staff manage their own exposure to traumatic situations.

In Michigan nearly half of the children in foster care in 2013 were under 5 years old.* Most of these young infants, toddlers and preschoolers, who have been abused and/or neglected, are on a trajectory towards significant social, behavioral, and academic problems.

* In Michigan nearly half of the children in foster care in 2013 were under 5 years old.

SOURCE: Kids Count. ©The Annie E. Casey Foundation.

TRAUMA FOCUSED SERVICES

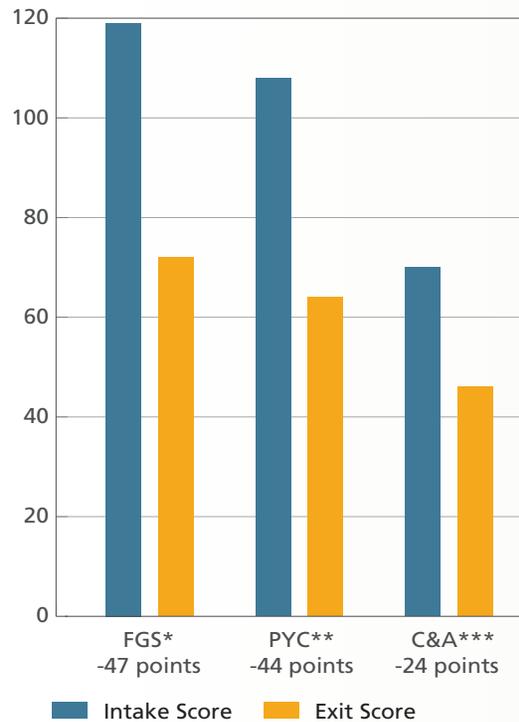
Current brain research has identified that abuse and neglect experiences in the very early years can change both the brain’s structure and its functioning. Brain research has also found that these changes can be significantly modified in the early years through healing interactions with informed and responsive caregivers and intensive treatment.

Screening – At this time CMHA-CEI and DHHS staff collaboratively have screened over 100 children from birth through 17 for trauma treatment needs. Screenings result in treatment recommendations and planning to direct each child toward the most appropriate and responsive treatment-based on their individual needs.

Early Intervention Services (EIS) – provides family focused trauma treatment for very young children in the tri-county area needing assistance healing and getting their development back on track. During 2015 EIS served 350 tri-county families with very young children, many healing from abuse and neglect.

Family Guidance Services (FGS)– provides treatment for children ages 5 through 17, most of whom have experienced significant trauma in their lives. FGS has continued to add to their existing core group of certified trauma clinicians. These therapists have been intensively trained in the Trauma Focused Cognitive Behavioral Therapy (TFCBT), a best practice model for addressing trauma in children and their families. FGS has also added psycho-educational groups for parents and care givers to increase their trauma awareness skills and is planning a children’s skills group for youth with traumatic experiences this summer.

Change in CAFAS Scores FY2015



* FGS- Family Guidance

** PYC- Parent Infant Program

*** C&A- Child and Adolescent Outpatient

Closed Cases FY 2015: FGS-491, PYC-33, C&A-226

**A drop in total score of
20 points or greater = meaningful
and reliable improvement.**

The Child and Adolescent Functional Assessment Scale (CAFAS) – is the gold standard tool for assessing a youth’s day-to-day functioning and for tracking changes in functioning over time. A drop in total score of 20 points or greater indicates meaningful and reliable improvement. The outcomes in the chart at left show the success families are having after receiving services from our therapeutic partnership with them.

LANSING SCHOOL DISTRICT PEACE GRANT

Community partnerships and increased engagement of youth in need of mental health services continue to be focal points for FF. To that end, a partnership with Lansing School District—through the Lansing School District Peace Grant—has been developed, aimed at increasing access to mental health services for youth enrolled in the district. A process was developed to enhance access to FF services for youth exhibiting mental health concerns, identified through the Peace Grant. This process focuses not only on identifying youth but also engaging their families with services and providing these services in an expedited and intensified manner as needed. FF has allocated staff time, through this grant, to implement this process, which includes: screening of potential referrals, providing outreach and direct access to intake assessment and urgent mental health services as needed. Moving forward, FF’s focus will continue to be increased access to services as well as educating the school community about the services available and the mental health needs of the youth we jointly serve.

**Families
Forward,
Children First
reflects the
progress
and hope
that comes
with every child
and family
we serve.**

Families Forward » Children First *(continued)*



In Michigan,
30% of
adolescents
in the capital
area reported
“symptoms of
depression”
as compared
to **26%** of
adolescents
statewide.

SOURCE: Healthy! Capital Counties 2015 Community Needs Assessment, Michigan Profile for Healthy Youth Survey (MiPHY), Michigan Youth Risk Behavior

PARTNERS IN CHANGE

Families Forward is pleased to be part of a unique initiative to improve the healthcare of children, youth and families in Clinton, Eaton, and Ingham counties. This pilot project, Michigan Child Collaborative Care (MC3) is a partnership among Michigan Department of Health and Human Services, the University of Michigan Health System and CMHA-CEI’s Families Forward. The goal of this initiative is to support Primary Care Providers (PCP) to better manage the behavioral health needs of children and adolescent patients.

Regularly, PCPs are called upon to manage behavioral health issues, including prescribing/modifying psychotropic medications, and often they do not feel adequately prepared to serve their patients in such a capacity. Through this initiative, PCPs in the tri-county area who have enrolled, can access psychiatry consultation, provided through the U of M Health System to assist them in making appropriate medication interventions.



PCPs, who have a patient with complex behavioral health needs can contact a designated Families Forward staff, a Behavioral Health Consultant (BHC), who can assist in determining appropriate behavioral health interventions. For those situations requiring psychiatric consultation, the BHC gathers basic clinical information from the PCP, and submits the information to the on-call U of M Health System psychiatrist. This initiates a consultation call from the psychiatrist to the PCP to provide clinical guidance on appropriate medications and dosages, as well as information on typical side effects to monitor. PCPs are free to follow-up and receive additional consultation, as they supervise their patients’ progress.

As access to psychiatry services continues to be limited across Michigan this pilot initiative can be an invaluable resource for PCPs seeking to improve the care they provide to their patients.

PROVIDING OPPORTUNITIES

Supportive Services offers opportunities for children and families to participate in recreational activities and further their treatment goals in unique and individualized ways through community-based experiences.

In 2015, FF continued a thirteen year tradition of hosting **Summer Camp** for children with serious emotional disturbance—a rare opportunity for many young people who are unable to participate in traditional camps. We continue to be fortunate in finding dedicated staff that find creative activities for our kids to help them increase their social skills and build positive relationships. We are already looking forward to summer 2016!



Families Forward's **Teen Group** has been operational for nearly four years and has served approximately 100 teens during that time. This is an ongoing group for kids ages 14-17 with a focus on developing living skills and providing community service. The group meets weekly and explores topics such as applying for jobs, managing public transportation, and moving toward independence. The group also volunteers in the community—serving food, doing custodial work, and performing other tasks at places such as the Parkwood YMCA and Volunteers of America.

Lastly, Families Forward has offered an **Art Class** for youth approximately three to four times per year for the past two years. This is an opportunity for a structured exploration of art through various mediums. It allows not only an opportunity for self expression but is also another way in which the Supportive Services program creates a space for kids to develop and work on their relationships and interactions with others.

MY STORY:

Frank *Vaca*



I have used CMHA-CEI services for about a year (case management and vocational services). CMHA-CEI was able to help me find a part-time job working at Jolly Java. I enjoy meeting new people at work. CMHA-CEI also helped me be aware of the Adult Handicap Program and I learned how to bowl last year. My teammates really encouraged me and I am looking forward to bowling again this summer.

My interests are playing with my dog Parker, spending time with my family, including my three nieces and two nephews, and traveling. Last year I visited Mexico and Boston for the first time.

I need to finish two math classes so I can receive my General Associate Degree from LCC. If that goes as planned, I may look into working on a Bachelor Degree.

As a member of the Lansing Association for Human Rights, I am a board member and meet monthly. I really enjoy helping people locate resources that are available. My future dream job would be working as an advocate or researcher in an office setting.

I would encourage people that face barriers to look around at all the resources that are available and be open minded to all possibilities. If you need help ask for it and be prepared to work for what you really want.

SURVIVING & Thriving

LIVING MENTALLY WELL

Transitions in 2015

Robert Sheehan served as the Executive Director of the Community Mental Health Authority of Clinton, Eaton, and Ingham Counties (CMHA-CEI) for 18 years when he stepped down from this position on October 9th, 2015 to become the Chief Executive Officer of the Michigan Association of Community Mental Health Boards (MACMHB.)

While Mr. Sheehan was Executive Director, the organization grew, dramatically, in the breadth of health and human services that it provides, in the clinical and administrative sophistication of its work, and in the number of local, regional, and statewide partnerships of which it is a part. During his 18 year tenure, the organization's annual budget grew from \$55 million to over \$105 million, allowing CMHA-CEI to provide a comprehensive set of services to over 12,000 adults with mental illness; children and adolescents with emotional disturbance; children, adolescents, and adults with developmental disabilities; and adults with substance use disorders.

In November, 2015 we also said farewell to **Judy Hazle**, Executive Administrative Assistant who worked with Bob Sheehan throughout his 18 year tenure.

Judy was instrumental in the coordination the Annual Breakfast Event among many other CMHA-CEI community events and initiatives.

Judy retired after 23 years to take on a part-time position for the Michigan Medicare/Medicaid Assistance Program working as Project Coordinator/counselor for the MI Health Link program.



“Walk A Mile in My Shoes”

Thousands of advocates from CMHA-CEI and community mental health agencies throughout the state gathered on Wednesday, May 6, 2015 to celebrate the 11th Annual “Walk-a-Mile in My Shoes” Rally at the State Capitol in Lansing. The rally helps educate the public and Michigan legislators about mental illness and developmental disabilities, and further combats the stigma and prejudice associated with these issues.

WHY WE RALLY:

- to enhance public awareness, because legislators need to know that Mental Health Matters
- to put an end to the stigma related to mental illness & developmental disabilities, because Michigan does not have parity (equality) between mental health & physical health care coverage
- to promote mental health and wellness, because we can make a difference

The 2016 “Walk a Mile in My Shoes” Rally will be held May 18 at the State Capitol in Lansing.

Walk-a-Mile in My Shoes Rally



Substance Abuse Services and Corrections Mental Health

Every year, illicit and prescription drugs and alcohol contribute to the death of more than **90,000** Americans, while tobacco is linked to an estimated **480,000** deaths per year.

SOURCE:

National Institute of Health, National Institute on Drug Abuse. *Drugs, Brains, and Behavior: The Science of Addiction*, 2014

COMMUNITY INVOLVEMENT

In 2015, Substance Use Services (SAS) has been active in several solution-focused community groups. These groups include the:

- **Ingham County Opioid Workgroup**, which was formed to draw continuous attention to the issue of opioid abuse and heroin use in the community.
- **Crisis Intervention Training** workgroup, whose charge is to ensure local police departments have officers certified in identifying individuals with mental health and substance use disorders when called to respond in the community.
- **Ingham Community Plan of Care Committee**, which is drafting guidelines for local emergency departments to use Screening, Brief Intervention and Referral to Treatment for Alcohol and Other Drug Use. Experts will assist Emergency Department personnel in identifying individuals who may have a substance use disorder and hopefully motivate those individuals to seek treatment.

THE RECOVERY CENTER

The Recovery Center (TRC) continues to provide Medically Monitored Detoxification services and short-term residential treatment to clients with chronic substance use disorders. The program works with clients to set up appropriate continuing care and to obtain a primary care physician, as well as connecting uninsured clients with insurance. New this year is the agreement with local emergency medical services to allow ambulance personnel and police officers to drop off individuals who need immediate detoxification services, and do not need to go to a hospital emergency room. This takes the burden off emergency rooms having to provide services to clients that TRC offers. The program also provides services to CMHA-CEI's Adult Mental Health Services, Crisis Services consumers who are inebriated and need to be monitored before a mental health evaluation can be done. TRC provides services for clients that are identified as frequent utilizers of community services. TRC also offers assessment only services for individuals looking to get into residential treatment and do not need detoxification or stabilization services.

CORRECTIONAL ASSESSMENT AND TREATMENT SERVICES

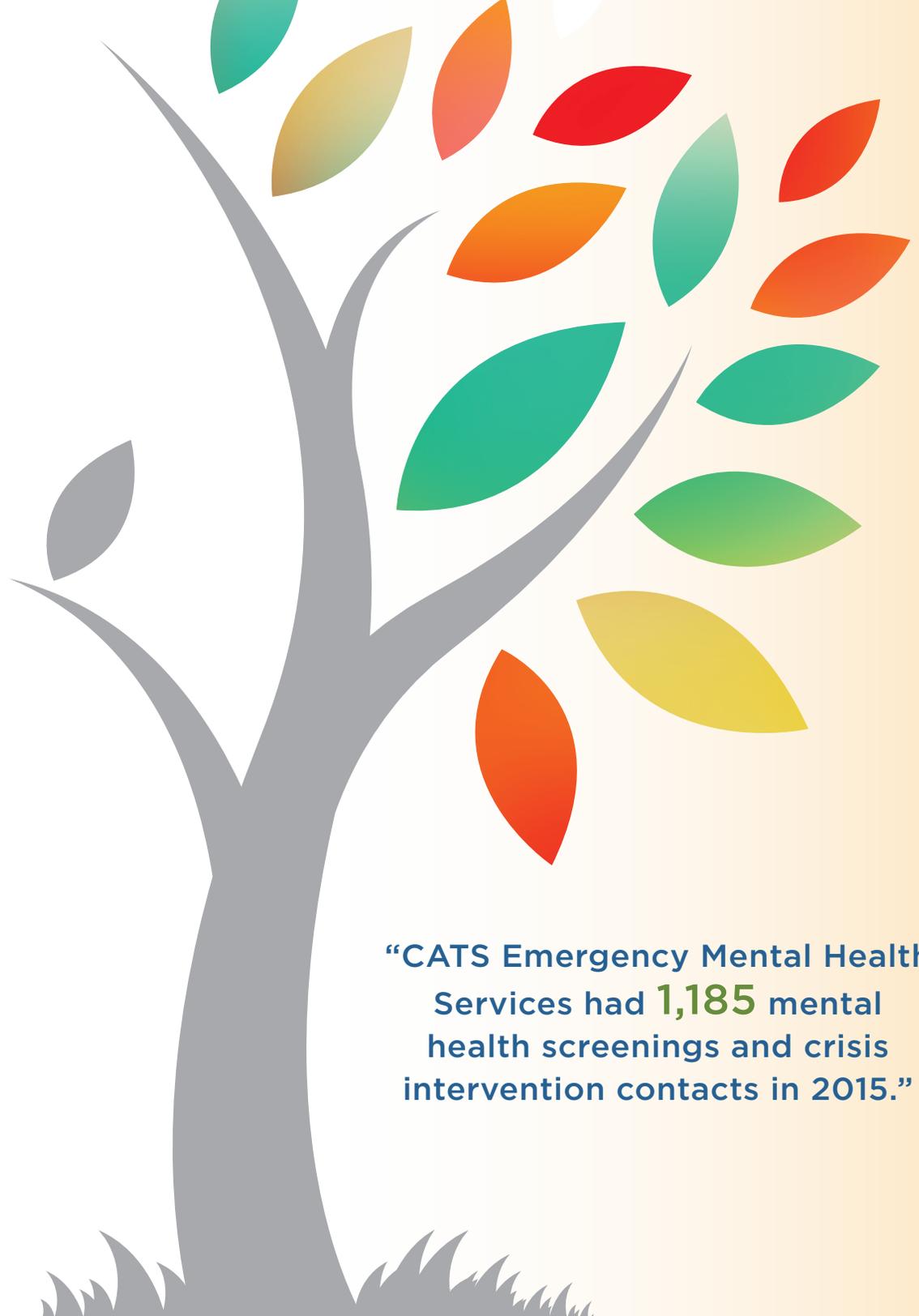
The Correctional Assessment and Treatment (CATS) program, located within the Ingham County Jail, offers both Substance Abuse Services and Emergency Mental Health Services, as well Jail Diversion for individuals who may have a persistent mental illness. During the 2015 calendar year, CATS Substance

Abuse Services program enrolled 371 individuals for treatment which consists of both individual and group therapy. To bridge a gap in clinical needs, CATS Substance Abuse Services also added a new group that focuses on coping skills needed to start preparing for recovery; approximately 110 clients attended this group last year. CATS Emergency Mental Health Services had 1,185 mental health screenings and crisis intervention contacts in 2015.

CATS Case Management Services continue to provide services for individuals identified as requiring continued Substance Abuse and/or Mental Health Services by ensuring the individual has a scheduled appointment, has transitioned to a substance abuse residential facility or has applied for health insurance if previously uninsured at release. The Case Manager also coordinates care with the next treatment provider.

HOUSE OF COMMONS

The House of Commons (HOC) is a 40 bed, men's residential substance abuse treatment program in Mason. In 2015, a new Cognitive Behavioral Group was implemented. Two new groups have been designed for 2016 that will incorporate Diary Cards; they are Core Mindfulness and Emotion Regulation. There is a balance of mental health, substance addiction and criminal behavior with a commonality to sync all parts of treatment into a whole. The introduction of mindfulness therapeutic tools and common dialectical approach has increased the number of clients within the past year. Clients believe the new approach is effective and less judgmental.



“CATS Emergency Mental Health Services had **1,185 mental health screenings and crisis intervention contacts in 2015.”**

Quality Assurance, Customer Services and Recipient Rights

INTRODUCING 24/7/365 ACCESS FOR SUBSTANCE USE DISORDERS

In an effort to enhance local CMHA-CEI capacity and infrastructure, the Mid-State Health Network (MSHN) increased funding to the CMHSP network in four distinct areas including Access, Prevention, Customer Service and Recipient Rights. MSHN, through its network of partner CMHSPs, is responsible for ensuring continual access for individuals with behavioral health needs, including individuals whose primary concern is related to a substance use issue or disorder. CMHSPs, like CMHA-CEI have traditionally provided these services to individuals in need of mental health or developmental disability supports. The Substance Use Disorder (SUD) Treatment system has traditionally provided business hours only access to the SUD service array. Beginning in October, 2015, the CMHSP access system became another portal of entry for individuals with a primary SUD concern. CMHA-CEI has been designated as an entity through which 24/7/365 access for individuals with a substance use concern or disorder will occur. This includes an initial screening, referral to services and supports, and appropriate follow up.

To address this expanded role and function involving access, prevention, customer service and recipient rights, several positions were added to the QCSRR Department. One position in particular focuses on the prevention activity of the agency as the Behavioral Health Prevention and Wellness Promotion Specialist. The Prevention and Wellness Specialist role and responsibilities include empowering and engaging community residents, clients, families, staff and system partners to expand and improve upon the behavioral health prevention and wellness promotion activities, opportunities, and efforts provided within our area. The overarching goal is to improve the behavioral health landscape within Clinton, Eaton, and Ingham counties.

Specific behavioral health prevention activities CMHA-CEI will be actively engaged in include:

- connect to and align with local Behavioral Health Prevention Coalition Networks and Behavioral Health Prevention, Treatment, and Recovery partners and providers
- define, develop, and support the implementation of a comprehensive Behavioral Health Prevention service array
- offer and promote Youth and Adult Mental Health First Aid training
- engage in suicide prevention programming and awareness campaigns (QPR, ASIST, AMSR)
- expand and enhance current community Screening, Brief Intervention and Referral to Treatment activity (SBIRT) and Early Intervention programming
- connect and align activities with Multi-Tiered Systems of Support (MTSS), Positive Behavior Intervention and Support (PBIS), and Safe Schools Healthy Students School Initiatives
- explore additional opportunities for Behavioral Health Prevention programming for parents and families
- explore additional opportunities that exist for Behavioral Health Prevention and environmental policy change efforts
- expand upon tobacco cessation efforts
- enhance the Behavioral Health Prevention and wellness promotion web presence within the CMHA-CEI website and Facebook pages

Approximately
1 in 25
adults in the
tri-county area
reported having
a mental health
or emotional
problem severe
enough to
affect normal
activity.

SOURCE:
Healthy! Capital Counties
2015 Community Needs
Assessment, Behavioral Risk
Factors, Survey Year:
2011-2013

CREATIVE RECOVERY

The "Creative Recovery" program, is an arts and crafts program designed for adults who are currently receiving services at CMHA-CEI due to a mental illness and/or a developmental disability.

This program is staffed by Customer Service Representatives (CSR) who are uniquely qualified for their positions. Each CSR has received services from Community Mental Health and is currently in recovery from a mental illness. This journey gives the CSR the ability to understand the challenges of mental illness and to assist others in moving towards recovery.

In 2015, CSR, provided CMHA-CEI consumers these Creative Recovery opportunities:

- **Arts and Crafts** - painting on canvas and pottery, card making, seasonal crafts and other craft projects.
- **"Writers' Workshop"** - hands on poetry, journals and other forms of writing with guest speakers. The group created a Newsletter, "Writers' Group" that highlights poetry, cartoons, and writings.
- **Free Movies, Pop and Popcorn**
- **WHAM** (Whole Health Action Management) class designed to promote a healthy mind and body by setting and achieving goals.
- **Smoking Cessation and Health Choices** - focused on making a healthy lifestyle change by reducing or eliminating a smoking habit.
- **Workshops** - topics including Meditation, Exercise, Diabetes and Finances.

MENTAL HEALTH FIRST AID

In 2014- 2015, CMHA-CEI offered Adult Mental Health First Aid (MHFA) and Youth MHFA trainings to persons who had contact with adults and/or youth struggling with a mental illness (i.e. parents, foster parents, teachers, clergy, public safety, etc.).

These trainings were provided free of charge, through a Grant by Michigan Department of Community Health (MDCH). There were a total of 724 trained in the Adult MHFA and 472 trained in the Youth MHFA for a total of 1,196.

These trainings will continue during 2016, for a small fee of \$25.00 per participant. Lunch, a manual and continuing education units (CEUs) will be provided. (Scholarships are available upon request). Class dates are available at www.ceicmh.org or to register go to eventbrite.com and search MHFA.

Contact 517-346-8465 for additional information.



472
people took part
in Youth MHFA
training and
724
people took part
in Adult MHFA
training in 2015.

Help Make Mental Health First Aid
1 Million Strong.

Be **1** in a
million



#1in1m

Information Systems

NEW ELECTRONIC HEALTH RECORD

October 1st, CMHA-CEI implemented SmartCare, an Electronic Health Record that stores consolidated records. The SmartCare system allows clinicians to electronically write and sign clinical assessments, treatment plans, referrals, discharge summaries and scores of additional documents that form the clinical record of individuals seen. These records are combined with any scanned documents from other sources, giving treatment staff the opportunity to review records in a complete consolidated system.

SmartCare also brings additional features to help with operations and meet increased regulatory requirements. The system supports electronic claims, authorization of all services (a Medicaid requirement), sophisticated billing, and inter-connection with other systems. It also supports electronic prescribing and integration with primary care offices, to help provide the best possible integrated health care.

SmartCare was selected in 2013 by a team of 50 CMHA-CEI staff from all parts of the agency. Since then Information Services (IS), Finance and Program staff spent cumulatively thousands of hours setting up and implementing the new system. CMHA-CEI clinical, administrative and managerial staff have been working hard to adjust to new processes and methods of operation. Although the new system brings many good new features, there is a definite “learning curve” as staff adjust to new State requirements and other new processes that came with the system.

Also this year, IS staff made significant programming changes to the data “warehouse” that is used for the collection of encounter and other information that must be sent to the State. CMHA-CEI and other CMHs in the Mid-state Health Network connect to this warehouse to submit information and view results. The system submits data to the Department of Health and Human Services (DHHS) on behalf of the Network.

The CMHA-CEI infrastructure has become quite complex, with 33 physical servers and 382 virtual servers supporting over 1100 users on 950 computers. In FY15 The IS Department made some significant upgrades to computer infrastructure including new banks of disk storage, replacement of 175 laptop computers, a new uninterruptable power supply for the computer server room, redesign/replacement of server room “switching” equipment, additions of six large servers, and doubling the memory capacity in over 80% of the desktop fleet.

The CMHA-CEI infrastructure has become quite complex, with **33 physical servers** and **382 virtual servers** supporting over **1100 users** on **950 computers**.

Human Resources

UNITED WAY CAMPAIGN

CMHA-CEI recognizes the countless ways the Capital Area United Way strengthens and improves the greater Lansing community—providing access to health care and short term emergency assistance, improving graduation rates through school readiness and retention, and building financial stability through educational money management programs. In the fall of 2014, Human Resources (HR) led CMHA-CEI's annual United Way campaign for the 2015 calendar year.

HR partnered with OPEIU Local 459 and Local 512 to plan and kick off the campaign, with a goal of reaching \$20,000 in donations. The generosity of the CMHA-CEI employees exceeded our goal beyond expectations!

In recognition of our successful campaign, CMHA-CEI was awarded for the 2014 Best Overall Campaign Kickoff. HR was honored to accept the CAUW award on behalf of the organization.



(CLOCKWISE FROM FRONT LEFT) LATASHA MCWRIGHT, DEB DARCY, EMMALEIGH DOUGHTY, FELIZ RODRIGUEZ AND MORGAN MCKITTRICK.

MY STORY:

Jacob Snyder

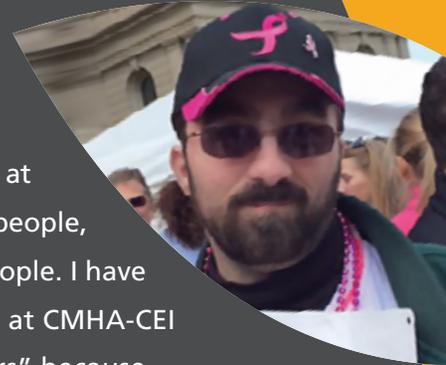
I started working in the Medical Records Department of CMHA-CEI on October 13, 2001 and was there for about six years. On tax day in 2010, I started working at Jolly Java. I like working at Jolly Java because of the people, I enjoy chitchatting and helping different kinds of people. I have made friends and enjoy the family atmosphere here at CMHA-CEI and in Jolly Java. For me, it kind of feels like “Cheers” because “everyone knows your name” and we all help each other out.

Being involved in the community is important to me. I am involved in a Parrot Head Club. Parrot Head is the name for a fan of Jimmy Buffet. We do charitable events in the community like Walk for the Cure and Fun Fest. Fun Fest raises money for Sparrow Hospice.

I ride my bike a lot during the summer and enjoy that. Last year I rode 1,508 miles! I enjoy going to movies, watching TV, listening to music, and reading books. My favorite authors are James Patterson and Kathy Reichs.

Right now I feel happy with the way my life is going. I have my own place, good friends, and a job I really enjoy. This has taken a lot of effort and hard work on my part and I think other people can work hard and meet their goals too!

I encourage you to stop down at the Jolly Java for a drink or snack, or just to say hello!



Finance

OUTREACH ASSISTANCE

Due to the reduction in General Fund revenues, Finance, in collaboration with Leadership and all of the programs within CMHA-CEI, conducted an aggressive effort to pursue healthcare coverage for its consumers who were previously uninsured. Finance continued to provide outreach assistance to consumers and the community by hosting or participating in several events throughout the tri-county region. Such outreach included providing assistance with the application process for Medicaid, Healthy Michigan and other healthcare coverage.

CMHA-CEI GENERAL FUND EXPENSES*

	DOLLARS	PERCENT
Adults w/ Mental Illness.....	31,566,619	25.96%
Children w/ Emotional Disturbance	11,313,310	9.30%
Adults w/ Developmental Disabilities	46,843,542	38.52%
Children w/ Developmental Disabilites.....	4,342,509	3.58%
Substance Abuse.....	669,670	0.55%
Board Administration	10,363,784	8.52%
Community Benefit	590,762	0.49%
Supportive Housing	6,000	0.00%
Substance Abuse Sub-Regional Entity....	15,040,695	12.37%
Local Match.....	868,372	0.71%
TOTAL EXPENSE	121,605,263	

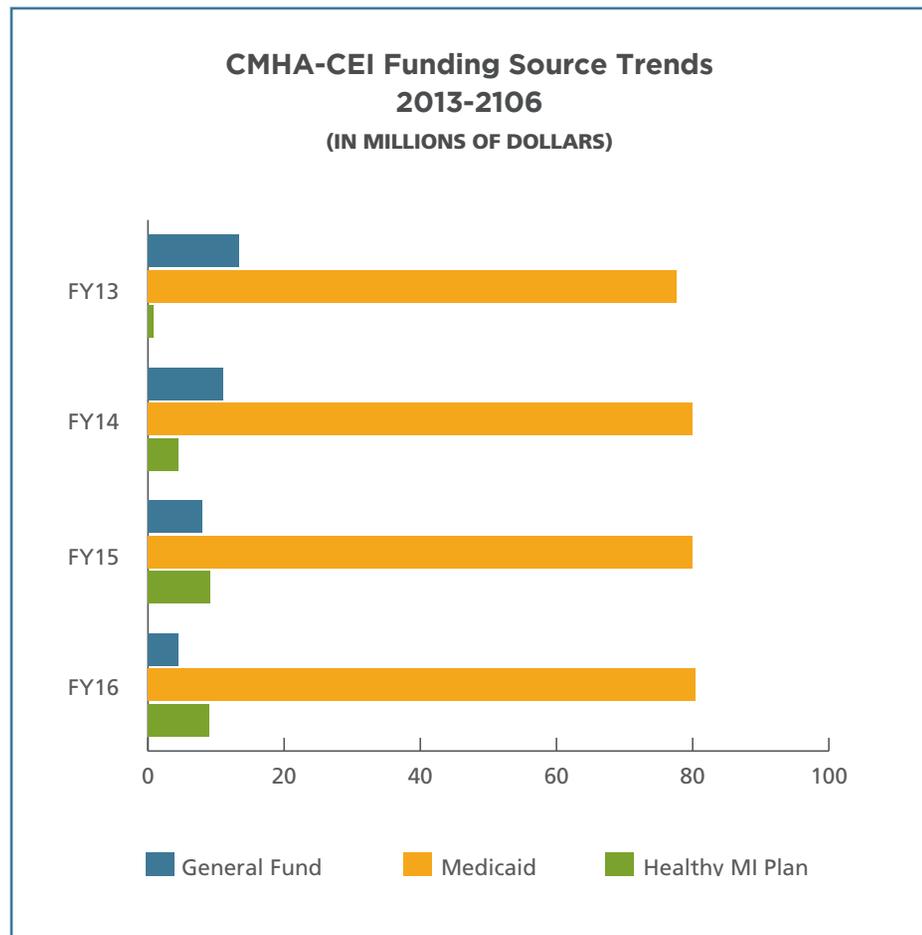
CMHA-CEI GENERAL FUND REVENUES*

	DOLLARS	PERCENT
Federal Funds	4,725,543	3.92%
State of Michigan	9,052,627	7.50%
Local.....	5,280,920	4.38%
Earned Contracts.....	5,349,831	4.43%
Medicaid PEPM	83,205,912	68.97%
Medicaid PEPM - Substance Abuse.....	7,717,248	6.40%
Medicaid - Fee for Service.....	2,769,509	2.30%
SSI/SSA	780,569	0.65%
Fees.....	1,669,104	1.38%
Food Stamps	86,742	0.07%
Interest Income.....	2,331	0.00%
TOTAL REVENUE	120,640,336	

**The financial information contained in the tables above are based on unaudited financial statements for the quarter ending September 30, 2015.*

FUNDING SOURCES AND TRENDS

The table below reflects the changes in CMHA-CEI funding sources from 2013-2016. The state general fund (GF) allocation has been on the decline while Healthy Michigan Plan (HMP) funding has increased. State general funds allow CMHA-CEI to provide services to uninsured and underinsured consumers who do not qualify for Medicaid or HMP.



Customer Satisfaction

Annually, CMHA-CEI surveys those whom it serves to determine their level of satisfaction with CMHA-CEI services. Following are the results of the 2015 survey (percent responding satisfied or very satisfied).

The CMHA-CEI staff...

- *responded to my request for services.....* **91%**
- *are courteous and respectful* **96%**
- *help me get the right type of services for my problem.....* **91%**
- *understand my needs and situation* **92%**
- *have the knowledge and skills to serve me well.....* **91%**

*If a friend or family member were in need of similar services,
I would recommend my CMHA-CEI program to him or her.....* **89%**

The services I receive help me to function better in my life..... **91%**

*If I were to seek help again, I would come back
to the same program* **91%**

In general, I am satisfied with the services provided **93%**



Community
MENTAL HEALTH
CLINTON • EATON • INGHAM



**Community Mental Health Authority
of Clinton Eaton & Ingham Counties**

812 East Jolly Rd., Lansing, MI 48910

Phone: 517-346-8200

Mental Health Crisis: 517-346-8460