

2018 REPORT TO THE COMMUNITY



Community
MENTAL HEALTH
CLINTON • EATON • INGHAM

PARTNERS IN 
RECOVERY, HEALTH, & WELLBEING



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 leaders, 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 **2018 Annual Report to the Community** highlights the many new paths, partnerships, and opportunities we have encountered over the past year. In 2018, we touched the lives of nearly 13,000 individuals across CMHA-CEI Behavioral Health Programs and Services. As an organization, we are passionately driven by our vision of access to a wide range of resources, quality of life, and full community participation for the individuals and families we serve.

In service to this vision and mindful of the future, we have looked to new practices and opportunities to strengthen our ability to meet the growing behavioral health needs of the communities we serve. In this report, you will find initiatives that embody our continued effort to uphold our vision, and stories of individuals and families whom we serve and who inspire us with their determination.

While we have had challenges and missteps along new paths in 2018, I am proud to say that with ongoing energy, innovation, focus on our vision, sound clinical care, strong community partnerships, and the determination and resiliency of the individuals and families we serve, we will continue to step up to whatever changes and challenges come our way, to thrive, and to be a strong **Partner in Recovery, Health, and Wellbeing** for many years to come.

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

JOLLY ROAD BUILDING EXPANSION CELEBRATED!

On September 11, 2018, Community Mental Health Authority of Clinton, Eaton, and Ingham Counties held an open house and ribbon cutting ceremony to celebrate the completion of the year-long building construction project. The project expanded the building to centralize off-site programs/staff and streamline the delivery of services to the community. The expansion added a three story, 42,600 square foot addition to the existing structure.

Following the ribbon cutting ceremony, building tours included a first look at the new Recovery Center and Jolly Java store, and highlighted the existing onsite services offered at the Birch Health Center and Ascension Pharmacy.

“We are excited about bringing some programs back into the building and the benefits our consumers and employees will experience with more programs

in one place. The additional space also offers us important options for the future.” - Sara Lurie, CEO.

The expansion allows the agency to better serve the needs of our community and supports our growing initiatives including the Stand Up 2 Stigma Movement; which aims to continually challenge the stigma surrounding all behavioral health, developmental disabilities, and substance use disorders.



SUBSTANCE ABUSE SERVICES AND CORRECTIONS MENTAL HEALTH (SAS)

Crisis Intervention Team Trained Officers Reach 200

In 2018, SAS Administration continued to partner with Tri-County Crisis Intervention Team Training (CIT) and assisted in providing training to Law Enforcement Officers from the majority of jurisdictions in our three county region. Since introducing the training in mid-2017, over 200 local Law Enforcement Officers have been trained in CIT. CIT training prepares first responders to identify and de-escalate situations involving a behavioral health crisis. In addition to training local law enforcement personnel, the Director of SAS presented at the 2018 National Crisis Intervention Training Conference on Substance Use Disorder Stigma and at the first Annual State of Michigan CIT conference.



it to save lives of individuals who have overdosed on an opiate.

Clinton County Counseling Center Partners in Recovery

Located in St. Johns, Clinton County Counseling Center (CCCC) provides outpatient treatment for Substance Use Disorders (SUD). CCCC served 182 consumers in SUD treatment in 2018. Also in 2018, CCCC and the Clinton County Sheriff's Office partnered to support the implementation of the Jail Re-entry Program, which includes a Case Manager and a Peer Recovery Coach, and works collaboratively with the new 29th Circuit Specialty Court which is specifically for women.

The Recovery Center Relocates

The Recovery Center (TRC) provides medically monitored detoxification services with 24-hour emergent admissions. TRC had 362 admissions in 2018. TRC now provides additional medication options to consumers to assist with withdrawal symptoms.

In 2018, The Recovery Center moved to a new location at 812 E. Jolly Road, which allows for greater collaboration with Adult Mental Health Services (AMHS) Crisis Services and other programs in the Jolly

Road building of CMHA-CEI. Collaboration with the Michigan State Police Angel Program continued in 2018 with TRC assisting and matching individuals in need of SUD service with the appropriate level of care within the Mid-State Health Network region. In the past year, TRC has coordinated services for 82% of the 51 individuals referred by the Angel Program.

Correctional Assessment and Treatment Services Supports Recovery

Correctional Assessment and Treatment Services (CATS), located in the Ingham County Jail, served 422 inmates within the SUD Treatment Program in 2018. The treatment program consists of individual and group therapy, as well as case management services. In addition, Crisis Mental Health staff in the jail screened over 1,200 individuals.

In 2018, CATS also added a Substance Use Disorder Recovery Coach to help address the needs for the high priority substance use population to provide ongoing recovery support following release from the jail. In cooperation with the Ingham County Sheriff's Office, CATS is now ensuring that inmates at high risk for overdose are given a Naloxone kit upon their release from jail.

Naloxone Distribution Saves Lives

SAS Administration serves as the local hub for Naloxone distribution through Mid-State Health Network (MSHN) and has provided 663+ kits to community agencies and law enforcement personnel who use

FAMILIES FORWARD

House of Commons Strengthens Partnerships

The House of Commons (HOC) is a residential substance use disorder treatment center for men. In 2018, HOC served 263 individuals and hired a case manager to assist consumers in connecting with health providers, care coordination, and transportation. HOC also took steps to strengthen partnerships with several regional sobriety and drug courts; including Shiawassee and Hillsdale circuit courts.

HOC continues work to ensure the program welcomes individuals with opioid use disorder who are on Medication Assisted Treatment (MAT) or who, as a part of recovery, would be successful on MAT. This includes forming a relationship with a local physician who is willing to accept consumers into his practice who would benefit from Buprenorphine.

Parent Peer Support Mentors Join the Mobile Crisis Team

Families Forward has a broad continuum of intensive crisis stabilization services including:

- A 24/7 free standing crisis center for walk-in crisis service needs,
- Mobile crisis teams,
- Urgent care (crisis stabilization),
- Urgent access to psychiatry, and
- On-going services and crisis respite.

In 2018, Families Forward Mobile Crisis Team added two mobile Parent Peer Supports (PPS). A PPS joins the Mobile Crisis Team in the visit. Their role allows them to join with parents through shared experiences and to help families navigate needed resources both within Families Forward and in the community. Over the next year, Families Forward Crisis Services will continue to grow, evolve, and address gaps within our community regarding youth mental health crisis stabilization.

Treatment Foster Care-Oregon Underway

This innovative service allows children and their families to address their

clinical challenges while the child is living in a local home with specially trained therapeutic parents who have an integral part on the treatment team. While the child is in that therapeutic environment working on new skills, the aftercare family is also receiving intensive services in preparation for the child's return home. As part of a pilot project with Michigan Department of Health and Human Services and Wayne State University, our team has been trained in the evidence based model and we are currently serving our first two families. **If you or someone you know is interested in being part of a team that supports children and their families while they address their treatment goals and strengthen relationships, please contact Deborah Delcamp at (517) 346-8147.**

Community-Based Prevention Takes Root at Families Forward

The Prevention program at Families Forward saw significant growth and development in 2018, with special emphasis on enhancing community connections around the issues of youth mental health awareness and youth suicide prevention. Prevention

work evolved around three main areas: prevention, preparation, and response. A key avenue of our prevention work has been coordinating the Tri County LifeSavers, a youth suicide prevention coalition comprised of local school districts, agencies, groups, and organizations who meet monthly to network and share evidence-based resources for youth suicide prevention. This activity has evolved quickly and includes the development of a school-based crisis response group and the coordination of CMHA-CEI's Critical Incident Stress Management team, making these services available to our community and schools.

Tri County LifeSavers Takes on Key Projects

The Tri County LifeSavers coalition secured local Public Act 2 funding from Mid-State Health Network (MSHN) for diverse projects that the Families Forward prevention program has implemented.

Some of these projects included:

- Families Forward's First Annual Children's Mental Health Awareness Day Fair, which was attended by over 250 members of the public;

- The creation of videos designed to enhance access to emergency mental health screening;
- The creation of a crisis toolkit; and
- The provision of Youth Mental Health First Aid training.

These funds also enabled CMHA-CEI to support school partners in providing suicide prevention curriculum to students and assisted our partner Ele's Place in providing supportive therapeutic services to families affected by suicide.

Critical Incident Stress Management Team Aids Recovery after Traumatic Events

The CMHA-CEI Critical Incident Stress Management (CISM) team responded to nine separate critical incidents in 2018, helping over 100 people within the agency and the community recover after traumatic events.

CISM refers to an array of interventions that can be used to help people after they've experienced a traumatic event such as an accident or death. These interventions can help restore individual and group functioning as well as help to mitigate the onset of post-traumatic stress

related symptoms.

Response to these interventions has been so positive that the agency is investing in doubling the size of the CISM team in 2019, which will bring the team roster up to thirty-two fully trained staff from multiple programs throughout the agency. This is just one more way CMHA-CEI is leading in its response to the behavioral health needs of the community it serves.



FAMILY STORY

Family. It has taken a lot of time, tears, & heartache to call us that, but that's exactly what we are. A family. Our journey with Gavin started almost 6 years ago. Up to that point, we had only had girls (lots of them!), and even though we were licensed for 13 and up, my husband asked for the next boy that came through - age didn't matter. Then on April 3, 2013, we got the call from our foster care agency for an 11 year old boy. Gavin came to us from another county, which turned out to be one of our biggest challenges. He was on medication for Oppositional Defiant Disorder, and one of the first things he said to me was how horrible he felt from it, thus began our journey!

After a few months in foster care, we were referred to Community Mental Health Authority of Clinton, Eaton, and Ingham (CMHA-CEI) for services. After we discovered that outpatient services were not enough for his complex emotional needs, we began home based services with a wonderful counselor. She not only was the first counselor to get him to open up, she also introduced us to so many additional resources to help us as a family (family support workers, Appletree respite, CMHA-CEI summer camp, etc.). After several years with her excellent support and guidance, she (unfortunately for us) took a new position within CMHA-CEI. We were very nervous since it was so difficult to find a "good fit" before, how would we ever find another counselor that he would bond with or open up to? Luckily for us, that's exactly what happened.

Gavin's new counselor has helped us through some of the hardest times of our lives. On top of an incredibly prolonged adoption (through no fault of our own), he

was right there supporting us for numerous court hearings, a 9-month placement in residential, truancy, probation, wraparound meetings, moving to a new city, IEP meetings, med clinics, and even taking the time to help train us in Trauma Informed Parenting. He, as well as our Wraparound Coordinator, also stepped up to help us and advocate for us through many, many foster care and insurance issues. It has been the hardest journey of our lives, but we finally were officially able to call Gavin our son on October 18, 2018. The icing on a long overdue cake for him was that Amy, Michelle, and Michael all made sure to be there to support him in what was FINALLY a happy day for all of us.

While it would be nice to not need these services, it's very comforting to know that they can follow our son to adulthood, even post adoption. At the risk of sounding dramatic, I am almost positive our family would not have survived these six years together without the help and support from our team at CMHA-CEI.

-Justin & Jenda Cole



ADULT MENTAL HEALTH SERVICES

Urgent Care Crisis Services – Immediate Care for Psychiatric Emergencies

In January of 2018, discussions began to identify new and creative ways to address the ever increasing in-patient placements for individuals who were experiencing situational psychiatric emergencies.

Since 2015, CMHA-CEI has seen a marked rise in the volume of people presenting in crisis; with an overall increase in hospitalizations of 53%. In response to this knowledge, the team began to collect data to better understand what change was necessary to meet the needs of people while helping to reduce hospital use as the primary solution.

In March of 2018, the Urgent Care Crisis Stabilization Team (UCCS) was launched, including a Mental Health Therapist, Client Services Specialist, and Peer Support to provide immediate interventions with individuals seen voluntarily at Crisis Services, along with 100% follow-up for all who were assessed for hospitalization. To date, 1,335 individuals have received follow-up contacts, with 435 of those being provided face-to-face. Additionally, 412 of those individuals were able to be connected to either community or CMHA-CEI providers.

Client feedback:

“Less than a month ago I was very much looking forward to life being over with. Not knowing exactly what my options were and where to turn, I sought help from crisis services. I was able to speak with someone who then made an appointment for me to come back and see Linda. I’ve suffered from chronic depression and anxiety for over a decade and was initially skeptical of what good, if any, therapy would do. For the first time probably ever, I was glad that I was wrong. I’ve even begun to tell those closest to me that I am actively trying to get myself on the right track mentally. I am no longer embarrassed and I know I have Linda to thank for that. I’ve found a wonderful guide to a better me by working with Linda. For that, I am extremely grateful.”

-Shanora W.

“Hello my name is Nicole and I worked with Rebecca (at Urgent Care/Crisis Services). I mean she worked with me. I came to her office a while ago and she helped me through some hard times in my life. I was so happy to be talking with her. We talked about how the past changes us, and how it’s not my fault. We grew a good relationship as a good counselor and patient.”

-Nicole S.

“We would like to share our most positive experience with the Urgent Care/Crisis Services of Lansing. We were connected early on with a counselor named Linda. She was kind, understanding and showed much compassion. She made herself readily available and checked in with us on a regular basis. She acted in a professional manner and was extremely helpful in helping us to find the needed providers. It was a pleasure having Linda guide us through this journey.”

-Linda T.

Spotlight on Mason Rural Outreach Program

Mason Rural Outreach Program (MROP) is a satellite office of CMHA CEI Adult Mental Health Services providing treatment to rural Ingham County for over 35 years and serves approximately 135 consumers.

Services include:

- Targeted case management,
- Individual and group therapy,
- Psychiatric evaluations and medication reviews, and
- RN services and community living supports.

MROP serves the rural Mason area including Mason, Dansville, Leslie,

Webberville, Williamston, Stockbridge, Onondaga, Carriage Lanes Apartments in Okemos and the MLK and Arch Road homes in Eaton Rapids.

MROP Client Story

Verlin Cook, pictured below, is 85 years old and has been receiving Case Management Services from CMHA-CEI since 1983. She is proud to say “I have never been hospitalized”.

She also has never had a Crisis Residential (Bridges) admission in those 35 years. She has lived at Wings AFC since 1991 and has been getting her mental health services in Mason through the Mason Rural Outreach Program since 1987. She enjoys living at Wings, “I just got a new electric chair, electric bed, and dresser”. Verlin faithfully attends MROP and is a member of the Kiwanis Aktion Club.

AMHS Takes Aim at Hypertension

In the fall of 2017, AMHS set out to address the increasing rate at which the adult mentally ill population was having poor physical health outcomes. The primary goals were to increase clinician knowledge and documentation of physical health indicators and to increase coordination of care and sharing of information between

the CMHA-CEI Clinical team (OCMS-Outreach Case Management Services) and the Birch Health Center (located within our building). Over a year’s time, staff provided documentation of blood pressures (BP) and conversations with identified individuals. Blood pressures and conversations about physical health at least doubled when compared to the previous year. AMHS plans to expand our pilot to other teams in 2019.

Pilot success story:

DM is a 33-year-old man with a diagnosis of schizophrenia. He comes in to the clinic every 2 weeks to receive his long-acting antipsychotic injection and CMHA-CEI staff check his blood pressure and weight at this time. His blood pressure was consistently high, running from 140/90 to 170/95. He required several visits and discussions with nurses to convince him to follow through with an appointment at the Birch Health Center. He was prescribed medication. His blood pressure was not much improved and DM admitted he thought it would be good to only take the medication if he felt “something going on in my heart.” He

responded to consistent discussion around his blood pressure, over several months, regarding the risks of hypertension, other means of lowering his blood pressure (diet, exercise, quit smoking, etc.) but required repeated reminders about his need to take the medication consistently in order for it to be helpful. He still goes several days missing his dose, but he has been remembering to take his medication more frequently and his blood pressure has greatly improved. He recently asked the RN to fill his blood pressure medication at the pharmacy, and even went to the pharmacy himself to pick it up!



Dialectical Behavior Therapy Builds Skills and Improves Relationships

AMHS has provided Dialectical Behavior Therapy (DBT) to clients since 1995 and comprehensively since 2009. A second DBT team that includes staff from Mason, St. Johns, and Charlotte CMHA-CEI satellite offices was developed in 2011. AMHS staff from each of these sites make up the consultation team. A third DBT team will be added to CMHA-CEI Waverly and Forest Wellness Centers in 2019.

Comprehensive DBT is an evidence-based practice that helps those who have Borderline Personality Disorder and experience emotional dysregulation, suicidal thoughts/behaviors, and/or interpersonal ineffectiveness. Treatment includes individualized therapy, skills training group, skills coaching, team

consultation, and ancillary treatment (psychiatry, case management). Each staff member on the team completes 7 days of training over a several month period with ongoing support, training, and supervision.

DBT allows clients to decrease behaviors that they want to change while increasing more effective skills to build a life worth living.

Clinton County Counseling Center client Debra Rockey, pictured below, shares her success through her participation in DBT at the St. Johns satellite office:

“My participation (over the last 6 months) in DBT has given me a better way of coping with very difficult relationships that I was sure would never be mended. At the time I started DBT, my relationships with my three sons were almost non-existent, and it was totally non-existent with my oldest.

Then I got some skills from DBT and put them into action. I learned not to push him into wanting what I wanted and gave him time and space to figure out what he wanted - no matter the outcome, and it was important for me to accept just that. I’m happy to say that he and I are communicating now and I even get a hug here and there, and that is a miracle in itself. I’m positive it came right from me practicing the DBT skills in this relationship. I learned how to step back and meet him where he’s at, not where I want him to be, and it seems to be working. I cannot say enough about this class. It’s helping me even when I don’t know it is!”

-Debra Rockey



COMMUNITY SERVICES FOR THE DEVELOPMENTALLY DISABLED (CSDD)

A Year of Change

2018 was a year of substantial change for Community Services for the Developmentally Disabled (CSDD). Much of this change was prompted by Michigan's transition to federal Home and Community Based Service (HCBS) rules impacting how Medicaid services need to be provided.

HCBS rules establish the following:

- Individuals receiving Medicaid based supports and services may not be discriminated against in any way via that provision of service.
- Individuals served via Medicaid dollars must be integrated fully within their community and have access to the same conveniences, rights, and choices that people not receiving Medicaid services do (people we support should be treated the same way you or I would expect to be treated in our own homes, work settings, and in the community).

CSDD programs had roughly a year to shift focus and service array. The various service units collaborated diligently to ensure the transition could be enacted as required. For Residential services, this shift entailed the development of a process to allow group home residents (and family members) to participate in selection of a provider of their choice within their home settings.

Additionally, rule changes for group homes were presented to providers, with assistance from the program staff, to ensure all necessary changes could be implemented within the required time frames. Similarly, for Community Living Services (CLS), providers received extensive training surrounding their needed HCBS changes, along with contract changes to reflect new requirements.



Full Life Level of Care

In support of the HCBS efforts, the Life Consultation unit underwent extensive training to ensure that case managers were aware of all levels of the service change, as well as how to navigate the newly designed “Full Life Level of Care” assessment - meant to ensure full support of all aspects of individuals’ lives. Also, the number of people served per case manager is being reduced. The outcome of this shift will allow case managers to explore more deeply the needs of those they serve.

Transitions Shifts to Community Based Services

Related to CSDD’s Transitions program, a dramatic shift has been enacted. Due to HCBS needs, a complete transformation has been underway within this service area. This transformation includes associated training for all staff and recipients of service. A new emphasis has been placed on full community integration, including the actual closure of “program sites” – services will now be provided entirely in typical community settings (which complies fully with HCBS standards). Additionally, the vocational aspect of the Transitions programs was expanded, with an emphasis on meeting

individuals where they are in terms of skills and then building them strategically into employment opportunities with local employers. This new area of service – customized employment – has been supported through our work with a national expert on employment opportunities for individuals with intellectual and developmental disabilities.

Although our Clinical Services unit has escaped much of the demand that comes with HCBS, clinical staff have stepped in to support all efforts of change across the system as a whole. Clinicians are reworking support plans and meeting with providers to consider needs of individuals served and to ensure compliance with new standards. Although

each unit has addressed demands of varying levels over the past year, the new and expanded “service array” within CSDD is now emerging soundly, and in service to truly supporting people as full participants in their local communities. This effort has been taxing of course, but the ultimate outcomes for those served hold tremendous value!



CONSUMER ADVISORY COUNCIL

EMPOWERING CONSUMER VOICE

The CMHA-CEI Consumer Advisory Council (CAC) provides opportunity for consumer involvement in shaping CMHA-CEI policy and practice. The CAC is comprised of current and past recipients of services and family members of those who have received services. Members are appointed by the

Board of Directors to 2 year terms. To assure strong linkage to the Board of Directors, the Chairperson of the Program and Planning Committee acts as Board Liaison to the CAC, attending meetings and reporting back to the full Board of Directors.



MEMBER SPOTLIGHT | ED HAMM

Ed Hamm has been receiving services with CMHA-CEI since 1982 and participated at CSDD-Transitions Central for many years. He now lives independently with the assistance of Moore Living Connections.

Ed joined the CAC in 2017 and is one of its founding members. He enjoys being on the council and has plans to reapply for another term of two years in September.

Ed had this to say about his time on the CAC: “It has been a good experience, I have learned a lot of things and it is quite an education.” Ed is a strong advocate for mental health and has a passion for the funding elements of the behavioral health sector.

Ed is now retired, but was once a staff member at Jolly Java, a full-featured convenience store located at CMHA-CEI. Ed spent his time at Jolly Java serving coffee, popcorn, and pizza on “Pizza Friday”. Ed’s retirement is a recent occurrence that he is happily navigating; he talked about retirement with a smile on his face stating, “my working days are over”. Ed is now enjoying his free time while socializing with friends at church and attending a group meeting called “coffee group”.

Ed can often be seen with his Community Living Support (CLS) worker, Jack. Jack has been assisting Ed in the community and at CAC meetings as his CLS worker through Moore Living Connections for 6 years. Speaking about Ed, Jack said that “he is like family”.



PREVENTION AND OUTREACH

Housed within Quality, Customer Service, and Recipient Rights (QCSRR) is the Prevention and Outreach department that facilitates the agency's prevention, outreach, and wellness initiatives.



The Culture of Health and Wellness Committee (CHWC)

The CHWC was established in 2018 and has prioritized and begun the implementation of goals and objectives found within CMHA-CEI's behavioral health prevention and wellness promotion plan, titled: Creating a Culture of Health: Changing the landscape to improve behavioral health and wellness for those we serve, our staff, and our communities.

Committee initiatives include:

- Winter Warm Up Partnership with Blue Cross Blue Shield and Playmakers – 5k training program
- Expansion of the Stand Up 2 Stigma Movement
- Take the Stair signage within CMHA-CEI buildings

- Health promotion posters, checklists, and newsletters
- Launch of Health & Wellness Central (currently located in the Jolly building lobby) which includes a blood pressure monitoring system

Expanding the Online Behavioral Health Screening Platform

The Online Behavioral Health Screening Platform is located on the front page of CMHA-CEI's website. The screening platform is also being offered by area partners to those in need and had over 700 visits to the site and 383 behavioral health screenings conducted over the past year. These screenings provide individual results, appropriate referrals and recommendations, as well as access to online behavioral health resource materials.

Youth and Adult Mental Health First Aid (MHFA) Trainings

In total, staff provided 17 trainings to 376 community professionals and residents of the tri-county area received MHFA in 2018 through CMHA-CEI. The Prevention & Outreach staff promotes, shares, advertises, and collaborates our low-cost MHFA trainings with area systems and stakeholders to train individuals,

residents, and professionals.

Partnership with the Eaton Regional Education Service Agency (ERESA)

CMHA-CEI Prevention and Outreach staff have partnered with ERESA who received a Mental Health Awareness and Training (MHAT) Grant for \$125,000 to increase the number of Youth MHFA certified trainers in our tri-county area and provide onsite Youth MHFA training to over 1,000 area school district professionals over the next 3 years.



Ingham County Community Health Improvement Process (CHIP)

The Prevention and Outreach staff have been continuing implementation of the multi-year behavioral health action plan within the Ingham County Community Health Improvement Process (CHIP) that provides direction to and aligns with the Capital Area Health Alliance's (CAHA) Mental Health Partnership Council as well as other tri-county area coalitions addressing mental health and substance use disorder issues.

Providing Three Coordination of Care Dinner Presentations

The 2018 COC Dinner Presentations were provided to over 225 primary care and behavioral health care professionals operating within the tri-county area.

Presenting to Over 600 Individuals Locally and Statewide

The Prevention and Outreach staff have presented to over 600 individuals locally and statewide surrounding our service array, access center, Stand Up 2 Stigma movement, behavioral health screening platform and other prevention and wellness resources. Networks included MSU, Ingham County Health Department, Sparrow Hospital, McLaren Hospital, Rotary Club of Lansing, Disability Network, Central Michigan University, Capital Area District Library, Kiwanis Club, Statewide Co-Occurring College Conference, Community Mental Health Association of Michigan Fall Conference, Suicide Prevention Technical Assistance Conference, and several others.

Providing Outreach to Community, Tri-County, and Statewide Events

Prevention and Outreach staff attended over 15 events held in our area with a total reach of 11,575 participants to share CMHA-CEI services menu and access information, clinical tools, screening opportunities, training information, and prevention and wellness resources.

Continued Growth of the CMHA-CEI Facebook Page

We currently have over 2,079 page "Likes". Our Facebook page is seen as a resource hub for information regarding our services, events, initiatives, and opportunities to connect to CMHA-CEI and our community.

Substance Use Disorder Recovery Coaches Assist

The department's two Substance Use Disorder (SUD) Recovery Coaches have been busy assisting over 240 individuals in accessing, enrolling, and engaging in substance use disorder treatment services in the tri-county area and beyond. These staff interface with CMHA-CEI programs including Crisis Services, Bridges Crisis Unit, The Recovery Center as well as the entire statewide SUD provider network.



INFORMATION SERVICES (IS)

Electronic Health Record Developments Meet New Demands

In 2018 Information Services (IS) made a wide variety of improvements in both the Electronic Health Record and updating our infrastructure. For the Electronic Health Record, the Business Analyst and Software Developer team completed 322 projects.

A portion of these projects included 11 new documents and screens, 50 new reports, and over 97 enhancements to existing systems. Many of the changes were implemented to improve Electronic Health Record functionality and increase efficiency for staff, including Touch Screen Signing, automation of some documentation steps, and multiple updates to the Assessment and Treatment Plan.

In order to meet demands for increased integrated care, several new screens, tracking systems, and Care Alerts for consumers were also developed.

Helpful New Systems Released

The Business Analyst and Software Developer team developed and released several new systems:

- A Human Resources Incident system to ensure that CMHA-CEI is collecting all pertinent data relating to incidents involving staff; this also results in a discount on Workman's Comp Insurance;
- An electronic Visitor Management system for the Jolly Road building front desk, to simplify the check-in process; and
- A web-based training system that provides access to training webinars 24/7, to make it easier for staff to remain informed about system enhancements and continue their education.

Building Expansion Leads to Network Expansion

The Infrastructure Team have been busy redesigning networks and adding equipment for the building expansion to support staff moving into the building and also preparing for continued growth. Several upgrades were made to software within our data center and firewalls (security system) at our many locations. These upgrades gave us access to several new features and made our entire system more secure and easier to administer. All workstations (desktops and laptops) were consolidated to the same version of Windows 10 and an upgrade plan was developed to accommodate Microsoft's new quarterly update release schedule.

Helpdesk Helps!

The CMHA-CEI Helpdesk team worked hard at handling approximately 100 calls per day. Many of those calls resulted in the creation of support tickets. Helpdesk staff were able to resolve and close 525 support tickets on average per month for a total of 6,300 closed within the year.

HUMAN RESOURCES

Recruitment Strategies for a Diverse Workforce

Our continuous efforts towards achieving a diverse and inclusive workforce drives our recruitment initiatives and allows us to provide a wide range of supports for those we serve. The Human Resources department has prioritized recruiting initiatives and allocated additional staff time and increased funding for recruitment.

In 2018, the department expanded recruiting markets including entering into a service agreement with LinkedIn Recruiter. This is a web-based platform for finding and connecting with candidates which allows the recruiting staff to search profiles and contact individuals based on their skill set. LinkedIn has thousands of members that now have access to employment opportunities with CMHA-CEI.

Our recruitment team, led by Morgan McKittrick, increased connections with colleges and universities, continued attending on-campus career fairs, and attended virtual career fairs. The department has also increased our social media presence on several platforms to advertise our job vacancies.

The HR Department moved to a weekly posting cycle which allows the release of candidates to managers more frequently and created a new requisition form which streamlined the posting work flow for new and vacant positions. In the fall of 2018, we launched a new on-line application system. Our new system is more user friendly, provides candidates an option to complete an application via their cell phone, and has decreased the application screening time.

In the upcoming year, the HR team will continue focusing our recruitment efforts in increasing the number of applicants, reaching out to a diverse pool of candidates and becoming the employer of choice in our community.



FINANCE

Throughout the past year, the CMHA-CEI Finance Department has had numerous accomplishments.

2018 Accomplishments:

- Began working with consultants from the Government Finance Officers Association (GFOA) to start the process of acquiring a new Enterprise Resource Planning (ERP) Software. With GFOA, staff conducted a business process analysis and established the requirements necessary for the new software. A Request for Proposal (RFP) was released and in fiscal year 2019 staff will review RFP responses, participate in software demonstrations, and make a final decision on the new software.
- Continued to focus on improving the functionality of the Electronic Health Record (EHR) system, SmartCare, which integrates claims, service, and billing data into consumer health records.
- Kicked off our Provider Access Workgroup. This group includes representatives from all programs throughout CMHA-CEI. The workgroup will be working together to implement the functionality of allowing access to our provider network to directly enter claims into the SmartCare software.
- Has continued to provide assistance to consumers with applying for Medicaid, Marketplace and the Ingham Health Plan coverages through the Outreach Assistance Program. This past year the staff, who are Certified Application Counselors, assisted 2,822 people with obtaining coverage, of which 803 were specific Medicaid/Chip enrollments.
- Sent our team of Reimbursement Assistants to participate in 183 outreach events throughout the tri-county region, providing information on healthcare coverage and assisting people with applying for health coverage options. The Reimbursement Assistants monitor our programs for uninsured and work diligently to assist in obtaining coverage for our consumers and the general public.

GENERAL FUND EXPENSES*

	DOLLARS	PERCENT
Adults w/Mental Illness	\$36,443,105	29.60%
Children w/Emotional Disturbance	\$12,826,984	10.42%
Adults w/Developmental Disabilities	\$54,590,474	44.35%
Children w/Developmental Disabilities.....	\$2,909,544	2.36%
Substance Abuse	\$2,869,836	2.33%
Board Administration	\$11,666,292	9.48%
Community Benefit	\$800,260	0.65%
Supportive Housing	\$123,272	0.10%
Local Match	\$868,372	0.71%
TOTAL EXPENSE	\$123,098,139	

*The financial information contained in these tables are based on unaudited financial statements for the quarter ended September 30, 2018.

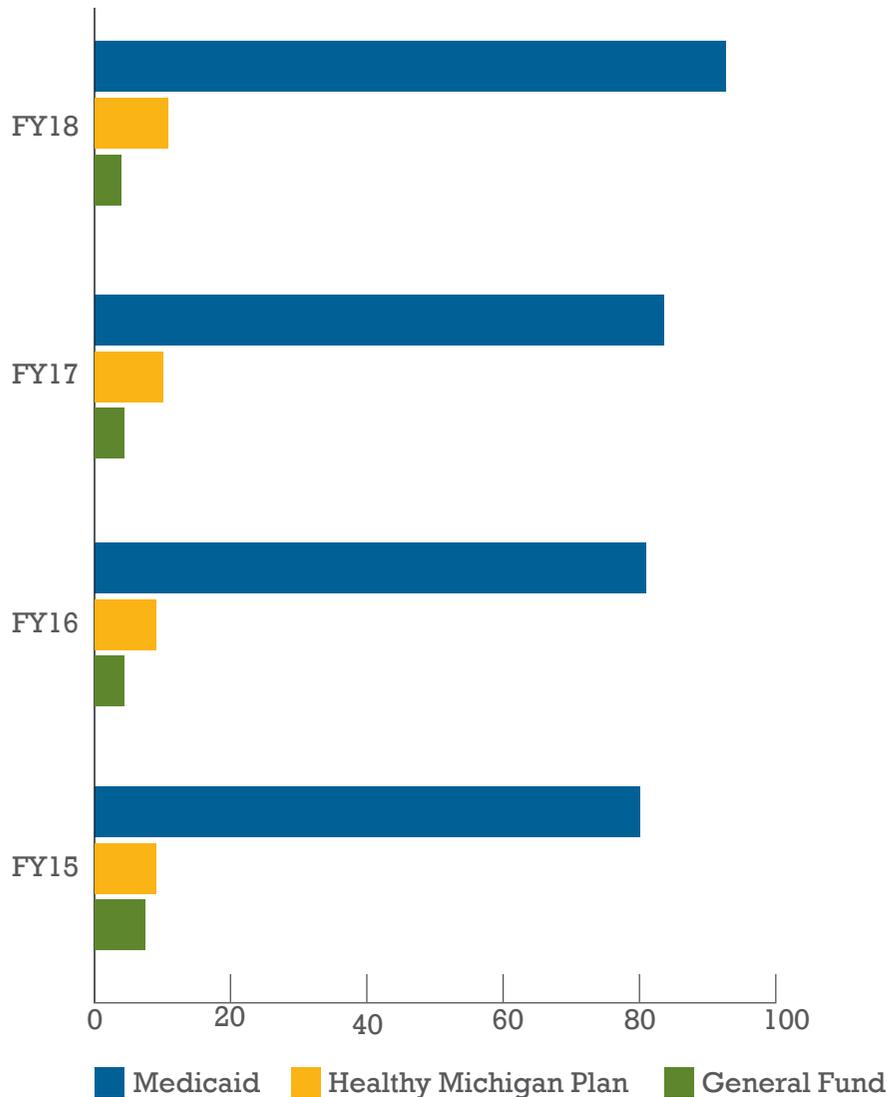
GENERAL FUND REVENUES*

	DOLLARS	PERCENT
Federal Funds	\$1,831,585	1.46%
State of Michigan	\$4,744,111	3.78%
Local	\$4,144,791	3.30%
Earned Contracts	\$6,152,020	4.90%
Medicaid PEPM	\$94,198,263	75.01%
Medicaid - Fee for Service	\$12,170,814	9.69%
SSI/SSA	\$718,402	0.57%
Fees	\$1,507,587	1.20%
Food Stamps	\$96,652	0.08%
Interest Income.....	\$13,313	0.01%
TOTAL REVENUE	\$125,577,538	

CMHA-CEI FUNDING SOURCE TRENDS

2015-2018

(IN MILLIONS OF DOLLARS)



CUSTOMER SATISFACTION

Annually, CMHA-CEI surveys those whom it serves to determine their level of satisfaction with CMHA-CEI's services. The following is the percentages of satisfied or very satisfied responses:

THE CMHA-CEI STAFF...

- responded promptly to my request for services **88%**
- are courteous and respectful **94%**
- helps me to get the right type of services for my problem **89%**
- understand my needs and situation **90%**
- have the knowledge and skills to serve me well **92%**
- follows my person-centered plan (PCP) or family centered plan **88%**
- helped me identify natural supports **85%**

OTHER QUESTIONS

If a friend or family member were in need of similar services, I would recommend my CMHA-CEI program to him or her **88%**

In general, I am satisfied with the services provided by CMHA-CEI **91%**

The services I receive help me to function better in my life **89%**

If I were to seek help again, I would come back to the same program **89%**





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