

2018/2019

Annual Report



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Community Mental Health and Substance

Abuse Services of St. Joseph County

2018/2019

Executive Summary

Who We Are

Sometimes life can become difficult. Day-to-day stress and pressure can be intensified by the complexity of today's world. Reactions to stress are sometimes only apparent through outward symptoms such as depression, unusual behavior, or physical problems.

When the support of family and friends just isn't enough, professional help can be the answer. Community Mental Health & Substance Abuse Services of St. Joseph County is ready and willing to help you and your loved one through the time of need. Our comprehensive mental health programs offer a wide range of confidential services for children, teens, adults, and seniors.

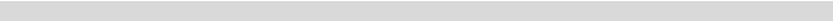
Our Vision

Our Vision is to enhance the lives of the citizens we serve by providing a range of individualized mental health, substance abuse, wellness and recovery services.

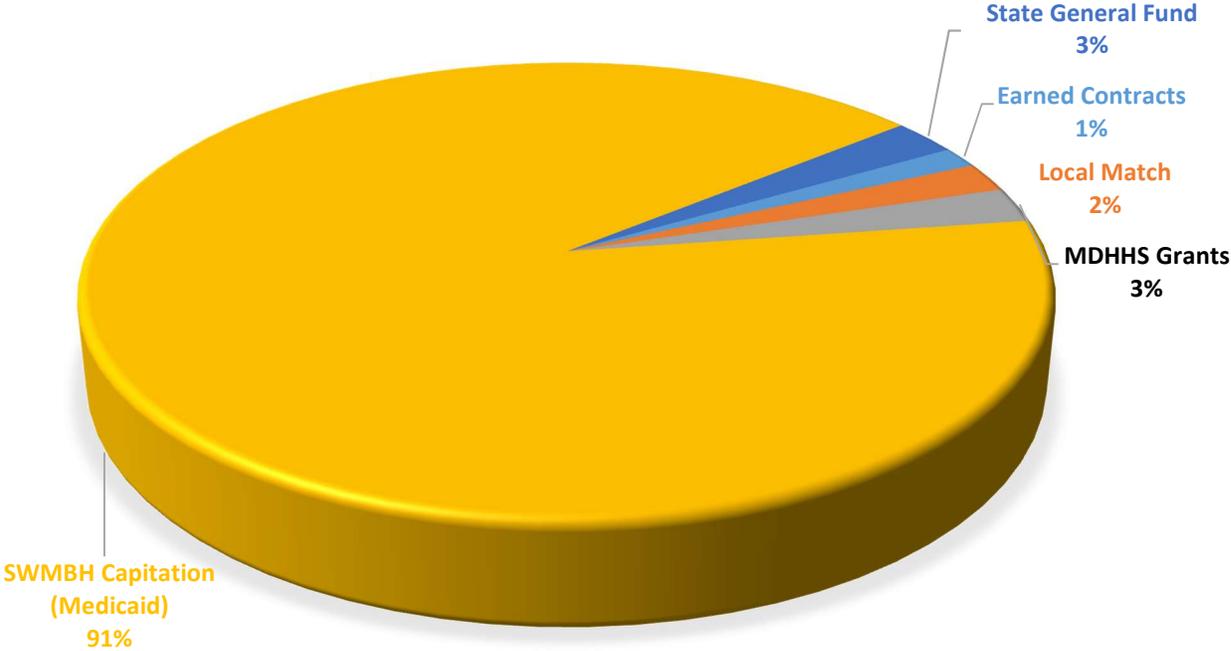
Our Mission

Our Mission is Community Mental Health and Substance Abuse Services of St. Joseph County will be the premier behavioral health care agency providing an excellent system of care for citizens in need by focusing on wellness and recovery.

Revenue

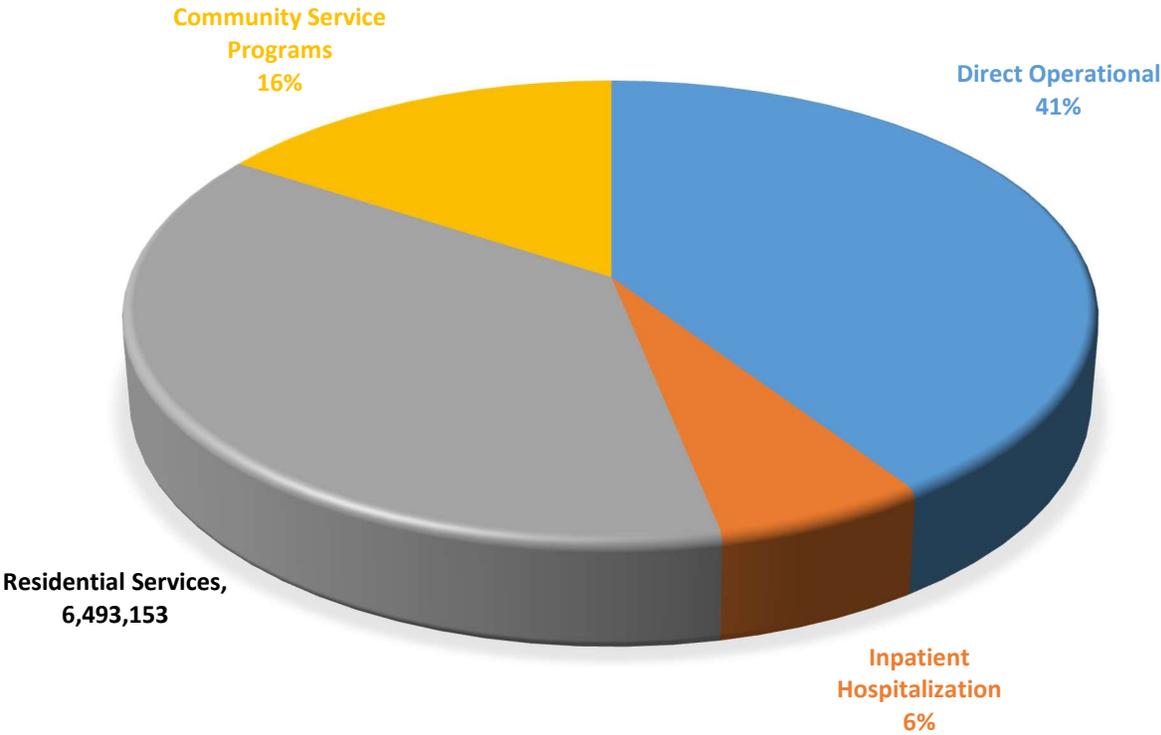


	Annual Budget FY 2019
Earned Contracts	256,610
Local Match	363,768
MDHHS Grants	433,953
SWMBH Capitation (Medicaid)	15,883,247
State General Fund	445,245
Total Revenues	<u>17,382,823</u>



Expenditures

	Annual Budget FY 2019
Direct Operational	7,064,670
Inpatient Hospitalization	1,075,000
Residential Services	6,493,153
Community Service Programs	2,750,000
Total Expenditures	<u>17,382,823</u>



Adults with Mental Illness

Philosophy of Program

The mission of adult services is to provide an array of quality mental health services to adults with mental illness, especially serious mental illness and serious and persistent mental illness, for the purpose of empowering and assisting them to achieve the life style they desire, and incorporating the rights and responsibilities of full citizenship. Individuals with mild to moderate illnesses will generally receive less intensive services. Collaboration with key stakeholders in the individual's life is a focus, including primary care providers, Department of Health and Human Services, Social Security Administration, the correctional system, and community support systems.

Services Offered

Crisis Intervention

Crisis intervention services are available 7 days per week, 24 hours per day to respond to urgent and emergent mental health situations. Eligibility for crisis intervention is based on the "prudent layperson" standard, and is available to all residents of St. Joseph County. Activities include assessment, pre-admission screening for inpatient hospitalization, alternative emergency placement, crisis counseling, and referral. These services may be provided on a walk-in basis during regular business hours at the CMHSAS program site or at community locations (usually the ERs of the local hospitals). Help line and clinical on-call services are also available after hours.

Jail Diversion

Jail diversion services are required by the Michigan Mental Health Code for the purpose of identifying persons who come to the attention of the law enforcement system who may be appropriate for mental health treatment as an alternative to incarceration. Diversion from incarceration may occur before or after booking. Pre-booking diversion typically occurs in the field and is handled by a road officer and CMH emergency services worker. The result is typically hospitalization or other protective placement. Post booking diversion typically occurs after the person has been incarcerated and involves a tailored sentence negotiated by the jail diversion specialist with the prosecutor, judge, and defense attorney. Post booking referrals are directed to the agency's designated jail diversion specialist.

Outpatient Counseling Services

Individual, group, or family therapy is available depending on customer need. The goals of treatment are to reduce the severity and disruptive nature of psychiatric symptoms, improve

the quality of significant relationships, normalize community functioning, and improve decision making in realizing personal objectives. Individuals receiving outpatient counseling services only generally have less severe forms of mental illness and lower levels of functional impairment.

Medication Management and Psychiatric Services

Medical intervention is often needed as a part of an individual's treatment regimen. In many cases, those services can be provided by the primary care provider, such as when the psychotropic medications are fairly routine (e.g., antidepressants). In cases where an alternate prescriber is not available, or cases that are more complicated or need close coordination with other mental health services, the services are provided by CMH.

Older Adult and OBRA Services

OBRA is a federally mandated program that requires persons with mental illness or developmental disability to be assessed prior to nursing home placement to ensure the placement is appropriate, and that needed services are provided during placement. OBRA includes preadmission screening and annual resident review.

Peer support/recovery services

Peer support services are delivered by individuals who have common life experiences with the people they are serving. People with mental and/or substance use disorders have a unique capacity to help each other based on a shared affiliation and a deep understanding of this experience. In self-help and mutual support, people offer this support, strength, and hope to their peers, which allows for personal growth, wellness promotion, and recovery.

Targeted Case Management

Targeted case management is a service that assists beneficiaries to design and implement strategies for obtaining services and supports that are goal-oriented and individualized. Services include assessment, treatment planning, linking/coordinating, advocacy, and monitoring.

Assertive Community Treatment

Assertive Community Treatment (ACT) is a set of intensive clinical, medical and psychosocial services provided by a mobile multi-disciplinary treatment team. The team also provides basic services and supports essential to maintaining the beneficiary's ability to function in community settings, including assistance with accessing basic needs through available community resources, such as food, housing, and medical care and supports to allow beneficiaries to function in social, educational, and vocational settings.

Community Living Supports

CLS is used to increase or maintain personal self-sufficiency, or facilitate an individual's achievement of his goals of community inclusion and participation, independence or

productivity. Supports may be provided in the participant's residence or in community settings.

Circle of Friends Clubhouse

Clubhouse programs are appropriate for adults with a serious mental illness who wish to participate in a structured program with staff and peers and have identified psychosocial rehabilitative goals that can be achieved in a supportive and structured environment. The beneficiary must be able to participate in, and benefit from, the activities necessary to support the program and its members, and must not have behavioral/safety or health issues that cannot adequately be addressed in a program with a low staff-to-member ratio.

Residential Services

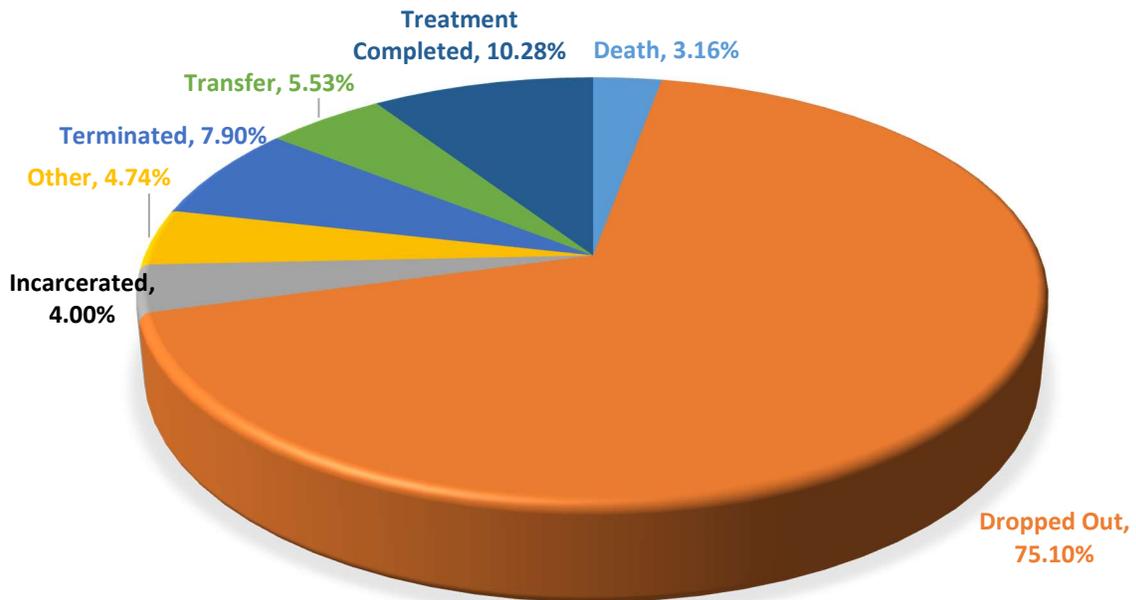
Adult Foster Care: CMHSAS-SJC works with several AFC homes in the county for placement of those clients who need some level of supervision and assistance. The relationship with CMHSAS and standard AFC providers is non-contractual, and providers receive payment for room and board from their residents and model payment dollars for specialized care from the State. CMHSAS through its case management function, determines the needs for an AFC placement, helps secure the placement site, completes necessary paperwork for the provider and CMH record, and provides ongoing coordination and monitoring.

Specialized Residential: Specialized residential homes are similar to AFC homes in that both are considered dependent care settings, and both provide supervision and ensure the basic needs of the individual are met. However, there is a much higher level of supervision and monitoring in specialized residential programs, which utilize shift staff to ensure around the clock awake supervision. These programs often have built-in treatment and/or activity components. Unlike standard AFC, there is a contractual relationship between CMHSAS and the specialized residential provider and CMHSAS pays a per diem rate.

Numbers of Clients Served

Department	Number of Clients	Number of Services
Circle of Friends Clubhouse	51	7561
Assertive Community Treatment	42	2176
Case Management	187	2564
Outpatient Therapy	379	2422

Discharges



Adults with Developmental Disabilities

Philosophy of Program

The mission of the Intellectual/Developmental Disabilities Service division is to provide quality, medically necessary mental health services to adults with intellectual/developmental disabilities while enhancing the development of natural supports.

Services Offered

Supports Coordination/Targeted Case Management

A service that assists beneficiaries in designing and implementing strategies for obtaining and monitoring services and supports that are goal-oriented and individualized. Supports coordination and/or case management services include assessment, planning, linking, advocacy, and coordination and monitoring.

Respite

Services provided to assist in maintaining a goal of living in a natural community home by temporarily relieving the unpaid primary care giver. The frequency and duration of respite should be identified in the PCP. Respite services cannot supplant or substitute for community living support or other services of paid support/training staff.

Community Living Supports

Services used to increase or maintain personal self-sufficiency, facilitating an individual's achievement of his goals of community inclusion and participation, independence or productivity. Supports may be provided in the participant's residence or in community settings.

Skill Building

Skill Building services are activities that assist an individual in increasing economic self-sufficiency or engaging in meaningful activities, such as education, work or volunteering. The services provide knowledge and specialized skill development and/or support. Skill building assistance may be provided in the individual's home or in community settings.

Self Determination

Services focusing on enhancing customer's ability to have a meaningful role in directing their own supports using the Medicaid funds for which they are eligible. Self Determination

is a process that focuses on increasing the partnership between customers and CMH in self-directed service selection by customers.

Specialized Residential

A licensed setting providing personal care and community living supports to meet the needs of the individual as defined in their plan of service. This setting enables individuals to reside in the community, enhancing the quality of their life.

Physical and Occupational therapy

Services provided by physical and occupational therapists to enhance or restore optimal physical functioning, including daily living tasks, ambulation, and sensory integration.

Speech, Hearing and Language therapy

Services provided by a speech therapist to enhance or restore language and hearing functioning.

Individual Therapy

Treatment activity designed to reduce maladaptive behaviors, maximize behavioral self-control or restore normalized psychological functioning, reality orientation, remediation and emotional adjustment thus enabling improved functioning and more appropriate interpersonal and social relationships.

Med Review/Psychiatric Evaluation

Services provided by psychiatrist to prescribe, evaluate and monitor the need for medication to stabilize psychiatric functioning.

Behavior Treatment Review

This process safeguards the rights of customers with the purpose of preventing unnecessary application of aversive, intrusive, restrictive techniques or psychoactive medication for behavioral control purposes.

Supported Employment

Provide job development, initial and ongoing support services, and activities as identified in the individual plan of service that assist beneficiaries to obtain and maintain paid employment that would otherwise be unachievable without such supports. Support services are provided continuously, intermittently, or on a diminishing basis as needed throughout the period of employment. Capacity to intervene to provide assistance to the individual and/or employer in episodic occurrences of need is included in this service.

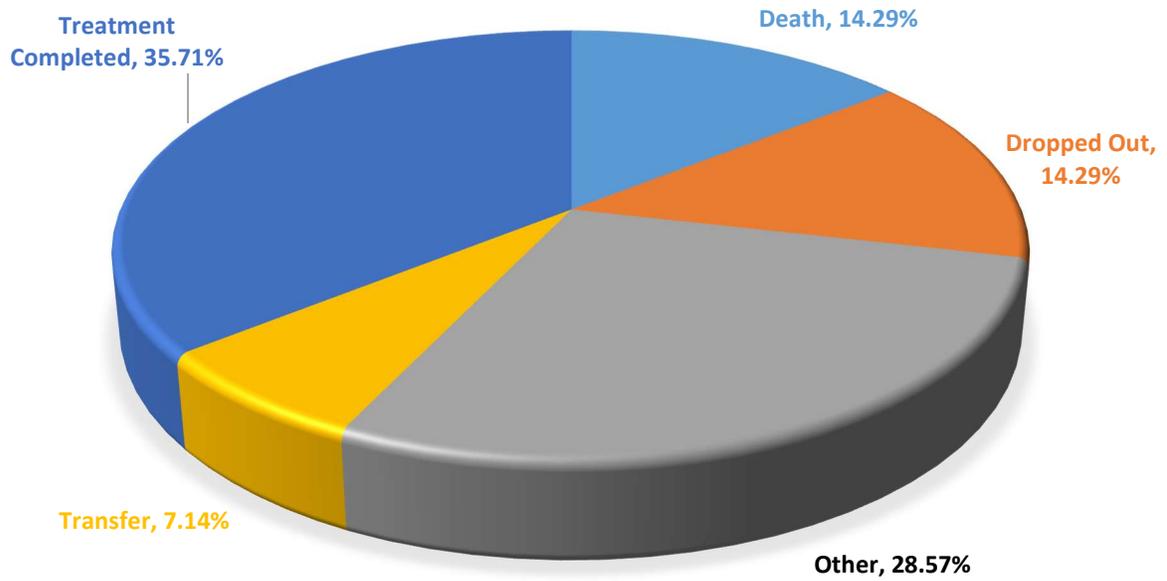
Therapeutic Overnight Camp

A group recreational and skill building service in a camp setting aimed at meeting the goal(s) detailed in the beneficiary's plan of service. A session can be one or more days and nights of camp.

Numbers of Clients Served

Department	Number of Clients	Number of Services
Outpatient Therapy	8	60
Case Management	232	2895

Discharges



Adults with Substance Use Disorders

Philosophy of Program

Substance Abuse services are provided for the purpose of reducing the frequency and severity of substance use, lessening its negative impact on overall functioning, assisting persons in initiating and maintaining recovery as one element in overall wellness. In order to actualize this philosophy, achieve these outcomes, our substance abuse program expresses a number of core values.

Services Offered

Assessments

The first appointment is an assessment, the first step in your recovery journey. It is the time to look at where you are, talk about what is going on and what brought you into treatment. The assessment helps us understand the nature and extent of the issues that brought you into treatment and what we can do to help. It is also a time to provide you with information on other resources and services available to you.

Treatment Planning

The second step is to make a recovery plan. We use a Person Centered Planning approach that focuses on what you want to change and not what we think you ought to change. You decide what your treatment goals are or what things in your life you want help in changing. Everybody's road to recovery looks a little different; we are there to help you make your plan for a better life.

Intensive Outpatient

Sometimes in the beginning of treatment, you may need extra support and help. Intensive Outpatient Services provides you with 9 hours of treatment per week so that you can begin recovery while at home, yet have intensive individual and group therapy to get you started on the road to recovery.

Individual Therapy

Everybody has a story. In individual therapy you have the opportunity to tell your story. The counselor will help you make sense of your story, past events, and assist you in making the changes you said you wanted to make in your treatment plan. This is the time and place where you can rewrite your substance abuse story, get your life back, and write your recovery life story!

Group Therapy

Having a solid support system for your recovery journey is essential. Group therapy is the place where you share stories; you listen to how others are making their way, and you can tell others what you have learned. The counselor will present important topics to discuss. We have both morning and evening groups. Group is a place where you will find you are not alone in recovery.

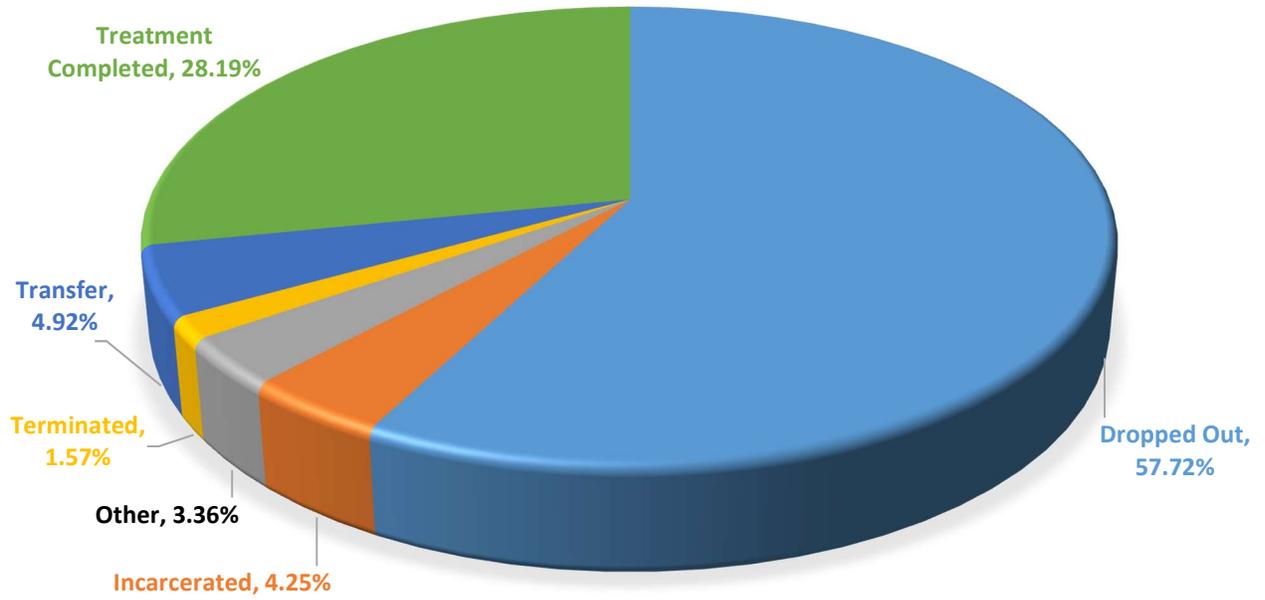
Women's Specialty Services

We are committed to empowering women through healing the past, helping to change current unhealthy behaviors to create a safe and positive life for the future. Pregnant women, women with children and those involved in the child welfare system are a priority for admission to treatment services.

Numbers of Clients Served

Department	Number of Clients	Number of Services
Substance Abuse	666	7818

Discharges



Children with Severe Emotional Disturbance

Philosophy of Program

The mission of the children's services is to provide quality mental health services to children with severe emotional disturbances or intellectual developmental disabilities and their families. The focus of treatment is both the child and their family unit. Collaboration with key stakeholders in the child's life is a focus, including local school districts, Department of Health and Human Services, Juvenile Court and community support systems.

Services Offered

Outpatient Services

Treatment may be provided as individual child therapy or family therapy depending on customer need. Child therapy is provided to children who meet the diagnostic criteria of severe emotional disturbance. The goals of treatment are to reduce maladaptive behaviors maximize skills in behavioral self-control or restore or maintain normalized psychological functioning, reality orientation and emotional adjustment. Family therapy is provided to the child and their family to help facilitate improved child and family functioning. Children and families receiving outpatient services generally have the resources and commitment to treatment to keep appointments in the clinic setting.

Home Based

Intensive services to children and their families with multiple service needs. Services are provided based on an individual plan of services that focuses on the child and their family. The plan identifies child and family strengths and individual needs. Home based services include individual therapy, family therapy, group therapy, crisis intervention, case management and family collateral contacts. Services are provided in the customer's home, school and community.

Case Management

A service that assists beneficiaries to design and implement strategies for obtaining services and supports that are goal-oriented and individualized. Services include assessment, planning, linkage, advocacy, coordination, and monitoring.

School Based Services

A collaborative program working with local school districts, children and their families to identify children at risk early in their educational career. Services provided include work with parents so that they can be more involved in their child's life, and monitor and supervise

their child's behaviors. Services also focus on working with children to develop pro-social behaviors, coping mechanisms and problem solving skills. Consultation is also provided to teachers and other school personnel in order to assist them in developing relationships with these students.

Respite

Services provided to assist in maintaining a goal of living in a natural community home by temporarily relieving the unpaid primary care giver. The frequency and duration of respite is based on family need and determined in collaboration with the clinician. Respite services cannot supplant or substitute for community living support or other services of paid support/training staff.

Community Living Supports

Services used to increase or maintain personal self-sufficiency, facilitating an individual's achievement of his goals of community inclusion and participation, independence or productivity. Supports may be provided in the participant's residence or in community settings. Individual or small group activities could include attending free community events, going shopping, learning to cook simple meals, learning how to do laundry, and accessing public transportation.

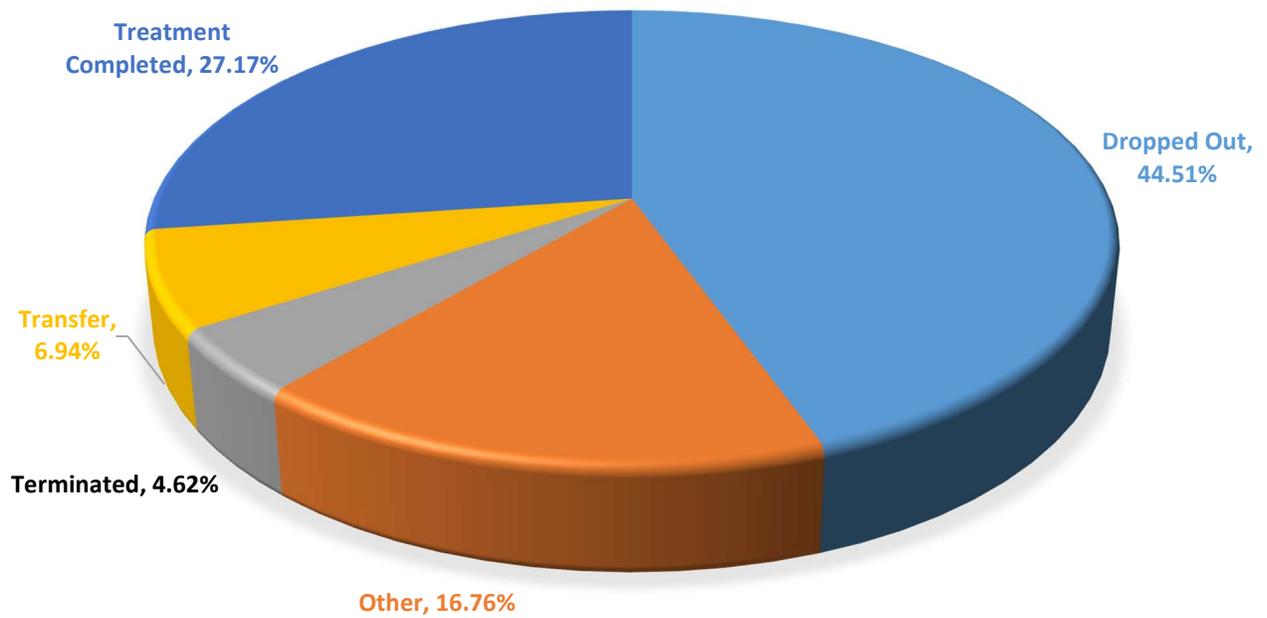
Family Support and Training

Family focused services provided to family (natural or adoptive parents, spouse, children, siblings, relatives, foster family, in-laws, and other unpaid caregivers) of persons with serious mental illness, serious emotional disturbance or developmental disability for the purpose of assisting the family in relating to and caring for a relative with one of these disabilities. The services target the family members who are caring for and/or living with an individual receiving mental health services. The service is to be used in cases where the beneficiary is hindered or at risk of being hindered in his ability to achieve goals.

Numbers of Clients Served

Department	Number of Clients	Number of Services
Outpatient	141	1218
Community Living Supports	49	948
Home Based	63	621
Case Management	305	3963

Discharges



MMBPIS

Michigan Mission-Based Performance Indicator System

The Michigan Mission-Based Performance Indicator System was first implemented in fiscal year 1997 and is contractually required of the 10 PIHPs and 46 CMHSPs. Since 1997, the system has undergone changes based on feedback from consumers, families, advocates and mental health professionals. These indicators include measures on timeliness of service in emergent and non-emergent situations, service following discharge from an inpatient facility, services provided to Habilitation Waiver consumers and percentage of readmissions to an inpatient facilities.

Indicators

Fiscal Year 2018/2019

Indicator #1 Pre-admission Screening within 3 hours

Percentage of persons receiving a pre-admission screening for inpatient hospitalization for whom the disposition was reached within 3 hours

Population	
Child	98.41%
Adult	99.45%

Indicator #2 Access/First Request Timeliness

Percentage of new persons receiving a face-to-face assessment within 14 calendar days of a non-emergency request for service

Population	
SUD	99.18%
MI Adults	98.98%
DD Adults	100.00%
Children	96.06%

Indicator #3 Access/First Service Timeliness

Percentage of new persons starting any needed on-going service within 14 calendar days of a non-emergency face-to-face assessment

Population	
SUD	96.54%
MI Adults	95.27%
DD Adults	93.75%
Children	96.32%

Indicator #4a Hospital Follow Up

Percentage of discharges from a psychiatric inpatient unit that were seen for follow up within 7 days

Population	
Child	85.71%
Adult	98.18%

Indicator #10 Inpatient Recidivism

Percentage of Readmissions to an inpatient psychiatric unit within 30 days of discharge

Population	
Child	0.00%
Adult	6.73%