

SHIAWASSEE COUNTY COMMUNITY

Mental Health Authority

2016 ANNUAL REPORT

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MISSION STATEMENT

Our mission is to improve the overall health and quality of life for the community, the families, and individuals we serve by inspiring hope, effectively healing trauma, supporting self-determined lives, encouraging recovery in all it's forms, promoting prevention and effectively integrating care.

VISION

- To provide compassionate, trauma informed, recovery oriented, and effective treatment that is responsive to the needs and values of the community and individuals we serve.
- To offer these quality services in a welcoming environment, supportive of the cultures, traditions, and values of our community.
- To ensure these easily accessible services are offered in a timely manner and are comprehensive, and individually tailored to each individual we serve.
- Present as an organization that is valued as a collaborative resource, establishing relationships with individual and community stakeholders.
- Who creates comprehensive, innovative, and effective services in partnership with these stakeholders. Through these efforts encourages community inclusion by combating stigma, and promoting prevention programs that support total health and quality of life.
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SERVING SHIAWASSEE COUNTY

In Michigan, behavioral health prevention, early intervention, treatment and recovery support systems are the primary responsibility of the State's mental health and substance use disorder services authority, which are collectively known as the Behavioral Health Developmental Disabilities Administration (BHDDA). BHDDA is located within the Michigan Department of Health and Human Services (MDHHS). Public behavioral health services are delivered through county based Community Mental Health Services Programs (CMHSP), which are public entities that are created by county governments to provide a comprehensive array of mental health services to meet local needs regardless of an individual's ability to pay. CMHSP's contract with Prepaid Inpatient Health Plans (PIHP), which on behalf of MDHHS, serves as the State's publicly-operated and managed behavioral health system for Medicaid funded behavioral health speciality services and supports. SCCMHA contract with Mid-State Health Network PHIP to serve adults, children and families who have serious emotional disturbance, severe mental illness and/or intellectual/developmental disabilities and/or substance use disorders. Our services are provided to individuals without regard to race, color, nationality, religion, political beliefs, age, health status, disability or ability to pay as defined in Michigan's state law or regulations.

HIGHLIGHTS FROM THE CEO



In September of 2007 a diverse group of people formed a committee to select a new logo for Shiawassee County Community Mental Health Authority. The committee identified a desire to select a logo that would represent stability, dependability, teamwork, change and caring. Early thoughts were of an oak tree, which was viewed as tall and proud and stable. Eventually the idea of a sturdy oak tree was pared down to an oak leaf. The leaf represented continual change, new beginnings and growth. The color green was chosen because it was believed to be calming while it signifies for us to go or to move ahead. On January 9, 2008 the Board of Directors adopted the green oak leaf as the new agency logo. The green oak leaf has served as a perfect symbol for the work being done and the services being provided at SCCMHA. Nine years later the color green and the oak leaf remain appropriate symbols to represent SCCMHA.

In 2016 SCCMHA enhanced our Utilization Management (UM) Program to encourage the highest quality care, in the most appropriate setting, from the most appropriate provider. Through UM functions we worked to avoid over-use and under-use of services and made decisions based on evidence based practices and guidelines. At SCCMHA our UM Program supports our commitment to providing high quality cost effective care.

SCCMHA continued on our mission of being a resource for our community. We offered Youth Mental Health First Aid Training, which is designed to teach family members, teachers and other school staff, peers, neighbors, and health and human service workers how to help an adolescent who is experiencing a mental health or addiction challenge or is in crisis. Our goal to help members of our community be prepared should they have an opportunity to help an adolescent in need.

Through our partnership with Great Lakes Bay Health Center, SCCMHA invested in an integrated approach to addressing healthcare needs. Together our agencies are better able to treat the whole person. Experts in primary care physical health and experts in mental health are working as a team to support the best outcomes for the individuals served.

SCCMHA is fortunate to have a Board of Directors that supports innovation. SCCMHA is also fortunate to be a part of the community that embraces partnerships and is committed to promoting the overall well-being of Shiawassee County citizens. During 2017 will we strive to continue to live up to our logo as well as embrace opportunities for growth.



2016 BOARD OF DIRECTORS

Mr. Jerry Walden	Chairperson
Ms. Vicki Bocek	Vice-Chairperson
Mr. Bruce Cadwallendar.	Treasurer
Ms. Robyn Spencer	Secretary

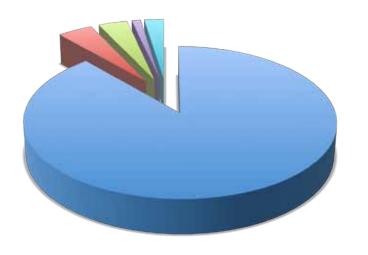
BOARD MEMBERS

Ms. Joan Durling Ms. Janelle Hughes
Mr. Fred Finnen Ms. Jeanne Ladd
Mr. Gary Holzhausen Ms. Kathleen Olund
Mr. John Horvath Dr. Paul Wiese

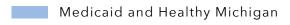


2016 ANNUAL REPORT

FINANCIALS



TOTAL REVENUES













TOTAL EXPENDITURES

Persons with Developmental Disabilities

Adults with Mental Illness

Children with Serious Emotional Disturbances

Administrative Services

Other Expenses

REVENUES

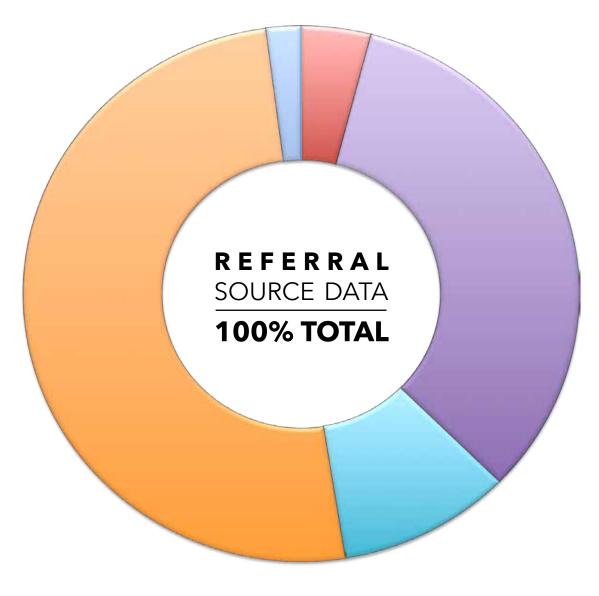
Medicaid and Healthy Michigan	\$16,274,034
State General Funds	786,530
Grants and Contracts	652,312
Shiawassee County Appropriation	200,000
Other Revenues	440,094

TOTAL REVENUES......18,352,970

EXPENDITURES

Persons with Developmental Disabilities\$9,300,711	
Adults with Mental Illness6,040,973	
Children with Serious Emotional Disturbances1,535,517	
Administrative Services647,904	
Other Expenses881,525	

TOTAL EXPENDITURES.....18,406,630



0%

ALCOHOL/DRUG ABUSE CARE PROVIDER

4%

COURT/CRIMINAL JUSTICE REFERRAL/DUI/DWI

0%

EMPLOYER/EAP

33%

INDIVIDUAL

10%

OTHER COMMUNITY REFERRAL

50%

OTHER HEALTH CARE PROVIDER

2%

SCHOOL (EDUCATIONAL)



DIALECTICAL BEHAVIOR THERAPY: A SUCCESS



Dialectical Behavior Therapy (DBT) is an evidence based, intensive therapy focused on treating individuals diagnosed with Borderline Personality Disorder (BPD). Individuals with BPD experience emotions at a heightened level and have difficulty regulating their emotions. It is believed the inability to regulate emotions is due to both genetic tendency to mental health symptoms, combined with an invalidating environment during childhood. Since the disorder is due to both factors, medication alone is not sufficient treatment, individuals must also participate in therapy to learn skills to cope with emotions. Often

times, the inability to tolerate intense emotions contributes to substance use, incidences of self-harm, suicidal thoughts as well as suicide attempts. Additionally, those with BPD often have ongoing conflict in relationships. Due to the severity of the disorder, it is not uncommon for those with BPD to have numerous ER visits, multiple episodes of treatment and psychiatric hospitalizations.

For more than 10 years, SCCMHA has offered DBT. It is lead by a team of extensively trained staff. Participants commit to one year of DBT which consists of weekly individual therapy, skills training class, 24/7 phone coaching (which sets this treatment apart from other models). The DBT team members meet weekly for consultation. The team also has a Peer Support Specialist to provide mentoring and coaching to participants. DBT skills class teaches: mindfulness, communication skills, skills to tolerate distress and skills to regulate emotions. The goal of the treatment is to help individuals experience a "life worth living."

Approximately 17% of SCCMHA adult consumers served have a BPD diagnosis and are eligible for treatment. Retaining participants requires creative strategies due to one year agreement and intensity of the program. The DBT team is committed to supporting consumers diagnosed with BPD to develop the skills they need to create the life they desire.

During 2015-16, SCCMHA had 9 DBT participants; 2 successfully completed the skills training class. HERE ARE THEIR THOUGHTS ABOUT THE PROGRAM

"DBT has changed my life, I use the skills with everyone in my life. This is a life changing program that helps me live a life on life's terms. I would recommend it for anyone, even people in school." - Jeni

"I really enjoyed class and meeting new people. Everyone treats everyone equal and with respect. I was able to express my emotions and learn to understand and manage them. The skills trainers, therapist, and phone coaching really helped me a lot. Everyone supported one another and helps each other. It was a wonderful class." - Sarah

COMMUNITY OUTREACH & EDUCATION

SCCMHA continues outreach efforts into the community by offering behavioral health educational events. During the past year SCCMHA focused on Youth Mental Health First Aid training, an evidence based public education and prevention tool. The training teaches adults who interact with youth about how to provide initial help to a person showing symptoms of mental illness or is in a mental health crisis until appropriate professional or other help can be engaged, including peer and family support.

SCCMHA has one certified Youth Mental Health First Aid trainer, Penny Corbin, and held 4 classes. A total of 45 persons were trained throughout Shiawassee County including teachers, social workers, case managers, clergy, foster parents, sexual assault advocates, law enforcement officers, college students and faculty, and concerned community members. Classes will continue to be offered in 2017.

UTILIZATION MANAGEMENT

The public mental health system has evolved making fundamental changes in approaching behavioral health care. Specifically, to develop an integrated service system that offers enhanced access as well as increased coordination. These changes have resulted in a more complete and effective system of community-based recovery focused services and supports.

Due to the paradigm shift in providing public mental health services, Shiawassee County Community Mental Health Authority (SCCMHA) has committed to a philosophy that emphasizes a care management system that is a continuum of services and is coordinated among healthcare professionals. This managed care system offers easy and timely access to the most appropriate and individualized, high quality, recovery-focused mental health and/or substance use services for consumers. It also strives to control the costs of providing those services, as well as delivering clinically necessary and effective care.

In order to ensure that consumers receive services that are in line with SCCMHA's philosophy, a comprehensive utilization management program was developed and carried out in early 2016, and integrated into the agency's overall clinical operations. This has allowed SCCMHA to focus on delivering the highest quality of care, in the most appropriate setting, from the most appropriate provider, at the right time.

One strategy interconnected with utilization management that SCCMHA has adopted, that will support the fundamental changes to behavioral health care, is population health. Population health or population-based care focuses on health outcomes by improving the quality of care, providing better access to care, and increasing preventative care. It has the potential to improve the health care system while at the same time making significant cost reductions.

SCCMHA's utilization management program is using population health data analytics that will ultimately assist behavioral health staff in promoting the well-being of consumers by empowering them to better manage their condition and overall health, which will ultimately improve their quality of life. Population health further helps behavioral health staff tailor care to those most in need of particular services, ensuring that children and adults with co-existing medical and behavioral conditions are getting the right services at the right time for their conditions, decreasing any risk (clinical and/or financial) and prolonging life through a holistic treatment approach.



LAWN CARE & SNOW REMOVAL SERVICES

For the past eight years, SCCMHA has provided Lawn Care and Snow Removal Services throughout the community as part of Employment and Skill Building Program; a vocational rehabilitation program that prepares individuals for successful employment. The goal of this program is to provide on-the-job training to consumers based on individual skill level. Once assessed and placed,

job coaches work with the consumer to provide encouragement, guidance and skill development. An additional goal of the Lawn and Snow Removal crew is to assist individuals in the local community who may have difficulties maintaining their lawn and the demands of snow removal.

Lawn Care & Snow Removal Services are coordinated by Snow & Lawn Crew Manager, Jill McDonald. Jill worked with three individuals in the last year providing lawn and snow removal services to 14 households and one business. This work experience offers an opportunity to learn a variety of skills including how to operate and maintain equipment, safety skills, and customer service.

INTEGRATED HEALTH CLINIC



BACK ROW:

Dee Buchholz RN Kim Dekowski OT Lisa Higbee RN Krystal Shreve LMSW Kurt Durling RN

FRONT ROW:

Angie Lader COTA Lisa Flinton CMA Maria Vargas CMA

The Integrated Health Clinic is a joint effort with the local Federally Qualified Health Center, Great Lakes Bay Health Center (GLBHC) and Shiawassee County Community Mental Health Authority (SCCMHA). During Fiscal Year 2015-16, the clinic provided primary care for 103 SCCMHA consumers. While the focus was on health maintenance, screening for early detection, and management of chronic health conditions, clinic staff also addressed flu shots, mammograms and colonoscopies, and other routine health care. This treatment approach also promoted improved health behaviors for individuals who had only used primary care when ill. These health screenings resulted in diagnosis of hypertension, diabetes, chronic obstructive pulmonary disease, and cancers of breast, uterus, and bladder.

One story of a husband and wife illustrates the impact availability of care has on quality of life. The gentleman was a diabetic who had not received routine care in several years. He depended on donated insulin supplies due to lack of insurance coverage. His wife did not have previous routine health screenings, again related to lack of coverage and difficulty navigating the health care system. SCCMHA staff were able to enroll both individuals through Healthy Michigan insurance program. The gentleman achieved his first health goal to obtain the diabetic equipment and supplies he needed from a local pharmacy. She had her first women's health screening in several years and was identified as needing surgical intervention for abnormal results. She was also diagnosed with insulin dependent diabetes and was able to get the medical supplies ordered by the doctor for her treatment.

The Integrated Health Clinic is staffed by GLBHC Physician Assistant, Janell Twietmeyer and Certified Medical Assistant, Sarah Nohel. SCCMHA registered nurse, Kurt Durling, serves as the Integrated Care Clinic contact at SCCHMA. He meets with all newly referred consumers for program explanation and completion of the enrollment process. SCCMHA staff has found that this internal contact has significantly improved attendance and collaboration between primary case holders from SCCMHA and primary care provider from GLBC.

Krystal Shreve, LMSW is a social worker at SCCMHA and provides full-time services at the CGBHC in Owosso. She monitors the primary care screening programs for depression and substance use disorder. She assists consumers with resources, referrals and solution focused interventions. She also serves as the social work member of GLBHC's new Medicaid MI Care Team. The eligibility for enrollment in this program is a mental health diagnosis of depression and/or anxiety and at least one of the following chronic health conditions, hypertension, diabetes, heart disease, COPD or asthma. The team approach of primary care medical provider, nurse, social worker and community health worker is able to address all aspects of the enrollees health.

PROUD PARTNERS

OF SHIAWASSEE COUNTY DRUG COURT

In 2016, Shiawassee County Circuit Court initiated the first Shiawassee Drug Court/Adult Felony Treatment Court. Shiawassee County Drug Court is funded through grants and community donations. The mission is to break generational cycles of regional criminality related to substance abuse and addiction and to enhance the quality of life throughout Shiawassee County. Participants make a significant commitment to reap the legal and personal benefits that occur during the 5 phases to graduation. Each phase is connected to the number of days of substance sobriety, treatment compliance, program compliance, and the results of random drug testing. The goal is for each participant to successfully graduate from the program and continue to live their life in a productive and meaningful way that is free of substance use and legal entanglements.

The initial Drug Court team are representatives from the prosecutor's office, a defense attorney, medical director and therapists of the substance use treatment program, administrator of the Shiawassee County jail, officers from the Parole/Probation office, circuit court administrator, a case manager, and a Circuit Court Judge. In the planning and development phase, the Drug Court team completed extensive research and training. The Drug Court team requested additional community partners, including SCCMHA, Shiawassee Health Department, and Shiawassee Hope. SCCMHA began their participation in February 2016 with a representative from the Access Department and serves as a treatment team representative. Their role is to advocate for the mental health needs of participants. The representative from SCCMHA attends weekly treatment team meetings and Drug Court sessions. They also attend trainings that are offered for drug court members.

The collaboration and partnership between SCCMHA and Shiawassee County Drug Court is a natural connection. Drug Court participants sometimes have complex mental health needs that co-occur with substance use. The partnership offers an opportunity to collaborate treatment services for participants that require substance use treatment as well as specialty mental health services of SCCMHA. When those situations occur, then the participant's SCCMHA case holder is also a member in the Drug Court team for that individual. SCCMHA has been able to develop a strong relationship with Recovery Pathways, LLC, a drug court substance use treatment program. Recovery Pathways, LLC is a referral option for individuals who present to the SCCMHA Access department for treatment and have primary substance use needs. Treatment team members have benefitted from sharing resource information and working together to address community members needs.

SCCMHA is proud of the great work of the Shiawassee County Circuit Court, and pleased to work together with the Drug Court team to promote positive outcomes in Shiawassee County.



A governmental non-profit Michigan Mental Health Authority serving residents in Shiawassee County. Affiliated with the Mid-State Health Network. Member of Michigan Association of Community Mental Health Boards. Financial support from the Michigan Department of Health and Human Services and the Shiawassee County Board of Commissioners.

— To access services 989.723.6791 • 800.622.4515 TTY • shiacmh.org —

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