

Tuscola Behavioral Health Systems

annual community report October 1, 2012 - September 30, 2013



323 North State Street, Caro, Michigan 48723

989.673.6191

TBHS COMMUNITY MESSAGE

The past year has been a year of significant change (challenges and accomplishments) at TBHS. Many of these changes were the result of changes at the state and federal level.

The State of Michigan reorganized the Prepaid Inpatient Health Plans (PIHPs) effective on January 1, 2014. This change reduced the number of PIHPs from 18 to 10. Tuscola Behavioral Health Systems (TBHS) is now part of the Mid-State Health Network (MSHN). MSHN is made up of 21 counties, 12 community mental health services providers (CMHSPs) and 5 former PIHPs. Two members of the Tuscola Behavioral Health Systems Board of Directors were appointed to the Mid-State Health Network Board, Dan Grimshaw and Mark Putnam. A considerable amount of work went into the organization and development of this new region so that it would be operational on January 1, 2014.

The State of Michigan also approved the Healthy Michigan plan. The Healthy Michigan plan will offer low cost health benefits to eligible individuals. Tuscola Behavioral Health Systems began to educate individuals about the Healthy Michigan benefit and to assist with enrollment into the plan. Healthy Michigan implementation began on April 1, 2014.

TBHS also opened an Autism Clinic in FY 13 to provide Applied Behavioral Analysis services to children served through the Medicaid and MICHild Autism Benefit. The Michigan Medicaid and MICHild Autism Benefit went into effect on April 1, 2013. This Autism Benefit provides children ages 18 months through 5 years old who have a medical diagnosis of Autism Spectrum Disorder (ASD) with Applied Behavior Analysis (ABA) services. The child and family are provided with a number of evaluations and assessments to determine eligibility for the Medicaid/MICHild Autism Benefit and appropriate intensity of ABA services.

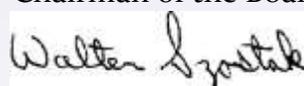
TBHS completed renovations on the former Big Brothers Big Sisters building now known as the Burnside building, as well as, at the Personal Independence Center (PIC) during FY 13. The Burnside building houses training and meeting room space as well as the skill building services. Individuals that receive services at this site also have the opportunity to work in the Kan Do Creations storefront. This gives individuals the opportunity to sell the products that they have "created" to the public. PIC building renovations created clinic space to allow us to have primary care services co-located within the PIC building.

We look forward to FY 14 and the changes that will continue. Mid-State Health Network will begin serving as our new PIHP, the Healthy Michigan plan will begin April 1, 2014 and Adult Benefit waver will end. We anticipate an increase in the number of children that TBHS is serving at the Autism Clinic. We are planning for significant changes in the integration of Primary Health and Mental Health Services.

Chief Executive Officer



Chairman of the Board



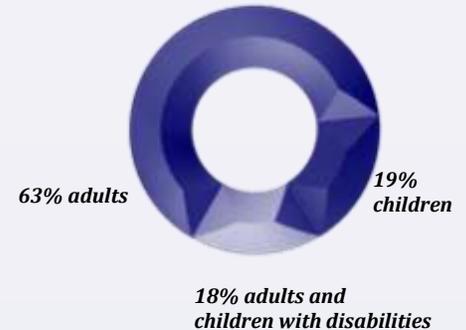
WHO TBHS SERVED FY 12/13

Children with Mental Illness...242

- Children's Home Based Case Management
- Outpatient Services for Children

Adults with Mental Illness...793

- Case Management Services
- Assertive Community Treatment
- Psychiatric Services
- Outpatient Services
- Aging Services
- OBRA Outreach



Adults and Children with Developmental Disabilities ...224

- *Including Respite Services*

TBHS monitors how many people we serve, the programs and types of services they receive and their demographic characteristics in order to effectively manage resources. The number of people served by TBHS programs is tracked in two forms known as unduplicated and duplicated consumer counts. The unduplicated count represents consumer statistics from single admission through discharge of services. The duplicated count represents the number of episodes a client may enter into services and be discharged then enter into services again. This annual report gives the unduplicated numbers.

Total for Fiscal Year 2012/2013...1259

Total for Fiscal Year 2011/2012...1389

Mental health issues affect all of society in some way, shape or form. It is estimated that one in four Americans will have a diagnosable mental disorder at some point in their lives. Its is extremely likely you will encounter someone in your family, workplace, school, church or community who lives with a diagnosed mental disorder. In addition, you will encounter others who are experiencing distress or facing a mental health challenge that may require support and assistance, but not medical intervention. (Youth Mental Health First Aid, instructors manual)



FINANCIALS

Revenues:

◆ **Charges for Services: Medicaid, Earned Contracts, Consumer and Third-Party Pay**
\$ 13,286,913.00 (84.3%)

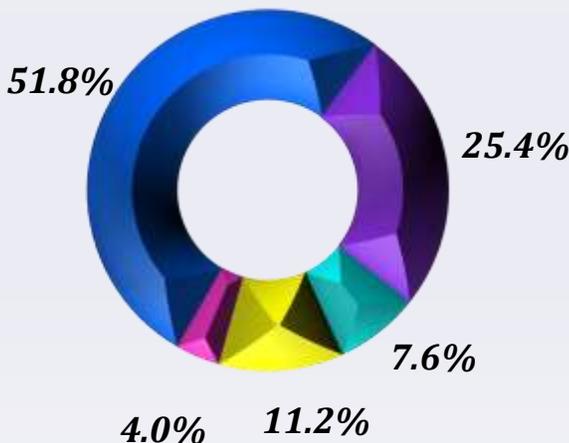
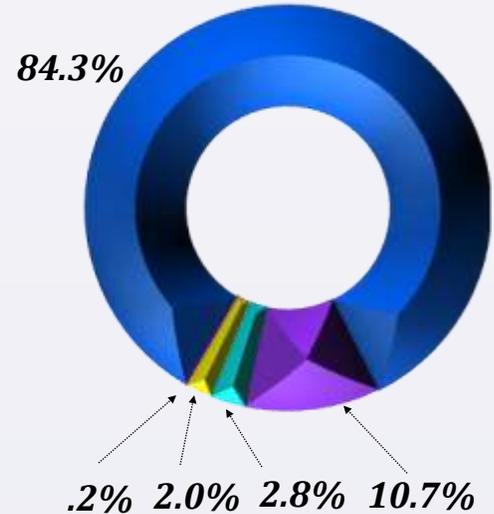
◆ **State Grants: DCH Contract, Adult Benefit Waiver and Title XX**
\$ 1,686,004.00 (10.7%)

◆ **Other Revenue:**
\$ 439,629.00 (2.8%)

◆ **Contributions: Local Units and Interest**
\$ 320,741.00 (2.0%)

◆ **Federal Grants**
\$ 27,886.00 (.2%)

Total Revenue:
\$15,761,173.00



Expenditures:

◆ **Developmental Disabilities Services**
\$ 8,083,768.00 (51.8%)

◆ **Adult Mental Health Services**
\$ 3,965,148.00 (25.4%)

◆ **Board Administration:**
(Compliance, Human Resources, Recipient Rights, Public Information, Finance Department, Program Administration Costs)
\$ 1,741,635.00 (11.2%)

◆ **Cass Valley Enterprises (CVE)**
\$ 622,106.00 (7.6%)

◆ **Children's Services:**
\$ 1,181,474.00 (4.0%)

Total Expenditures:
\$ 15,594,131.00

Excess Revenue over Expense \$167,042.00

NEW MISSION AND VISION



Our mission is to empower individuals and families on their journey toward wellness and recovery by providing access to comprehensive behavioral health care services in our community.

Our vision is to assure the accessibility of effective community services that empower individuals and families to achieve an enhanced quality of life.

TBHS Board of Directors:

Walter Szostak, Chairperson

Raymond Bates

Daniel Grimshaw

Joann Helmbold

Karen Snider, Vice-Chair

Matthew Bierlein

Marianne Harrington

Brenda Ryan

Mark Putnam, Secretary

Paula Cavanaugh

Molli Hartel

Susan McNutt

Community mental health board composition is set by the Michigan Mental Health Code - Section 330.1222.(1). Board members are volunteers representing geographic areas of Tuscola County. The Tuscola County Board of Commissioners appoint the TBHS Board Members.

TBHS Leadership Team:

Sharon Beals, Chief Executive Officer

Julie Majeske, Chief Operating Officer

Amanda Brown, Chief Financial Officer

Susan Baranski, Financial Services Supervisor

Deb Geno, Outpatient Supervisor

Tina Gomez, Nursing Services Supervisor

Victor Gomez, Residential Services Supervisor

Kathy Hepfer, Recipient Rights Officer

Todd Lewicki, Quality Systems Manager

Cindy Opperman, Human Resource Supervisor

Susan R. Holder, Director Marketing and Training Services

Shannon LaVoie-Thompson, Children's Services & Emergency Services Supervisor

Michael Swathwood, Assertive Community Treatment & DBT Supervisor



ABOUT TBHS AND PROGRAMS

Tuscola Behavioral Health Systems (TBHS) is a governmental non-profit Michigan Community Mental Health Authority established in 1973 to manage public mental health services in Tuscola County. TBHS is under contract with and funded in part by the Michigan Department of Community Health, as well as, Tuscola County.

In general TBHS manages the care for persons with:

- Serious Mental Illness (adults)
- Serious Emotional Disturbance (children)
- Developmental Disability (adults and children)
- Substance Disorders (adults and children)

TBHS along with other community mental health agencies make every effort for individuals who are insured by Medicaid, uninsured, underinsured or with little or no income to be able to receive the help they may need.

Programs and Services

Applied Behavior Analysis (ABA): Services available for Medicaid beneficiaries diagnosed with Autism Spectrum Disorder (ASD) and are provided for all levels of severity of ASD. Services are provided to increase developmentally-appropriate skills to facilitate the child's independence and integration into the community. This service provides evidenced-based techniques or strategies that are targeted to increasing developmental skills of a child with ASD in the domains of activities of daily living, communication, higher cognitive functions, interpersonal interaction, learning readiness, motor skills, play and self-regulation.

Assertive Community Treatment (ACT): Provides basic services and supports essential for people with serious mental illness to maintain independence in the community. An ACT team will provide mental health therapy and help with medications. The team may also help access community resources and supports needed to maintain wellness and participate in social, educational and vocational activities.

Community Bound Program: Provides individuals with developmental disabilities with opportunities to be active, participating members of their community by volunteering their time to activities and non-profit organizations.

Consumer Services/Customer Services: Assists Consumers who are seeking access to the community mental health system.

Crisis Residential: Short-term care for individuals experiencing an acute psychiatric crisis, provided in a supervised, licensed facility. TBHS works closely with a contracted provider of this service.

Crisis Interventions/Emergency Services (ES): TBHS Emergency Services staff is available 68 hours/7 days a week to assist Consumers and Residents of Tuscola County who are experiencing a mental health emergency that requires immediate attention.

Home-Based Services for Children and Families: Are provided in the family home or in another community setting. Services are designed individually for each family, and can include things like mental health therapy, crisis intervention, service coordination or other supports to the family. Infant Mental Health Services are also available.

Nursing Home Mental Health Assessment and Monitoring: Includes a review of a nursing home resident's need for and response to mental health treatment, along with consultations with nursing home staff.

Outpatient Services: Provides assessment and therapy for a wide array of mental health issues for individuals and their families. Group therapy is also available through Outpatient Services.

Peer-Delivered and Peer Support Services: Peer-delivered services such as drop-in centers are run entirely by consumers of mental health services. They offer help with food, clothing, socialization, housing, and support to begin or maintain mental health treatment. Peer Specialist services are activities designed to help persons with serious mental illness in their individual recovery journey and are provided by individuals who are in recovery from serious mental illness.

Psychiatric Services: Services provided by a licensed psychiatrist including evaluation and ongoing treatment as necessary to address psychiatric needs.

Respite Services: Provide short-term relief to the unpaid primary caregivers of people eligible for specialty services. Respite provides temporary alternative care, either in the family home or in another community setting chosen by the family.

Skill Building Assistance/Services: Includes supports, services and training to help a person participate actively at school, work, volunteer or community setting, or to learn social skills they may need to support themselves or to get around in the community.

Supports Coordination or Targeted Case Management Services: A Supports Coordinator or Case Manager is a staff person who helps write an individual plan of service and makes sure the services are delivered. His or her role is to listen to a person's goals, and to help find the services and providers inside and outside the local community mental health services program that will help achieve the goals. A Supports Coordinator or Case Manager may also connect a person to resources in the community for employment, community living, education, public benefits and recreational activities.

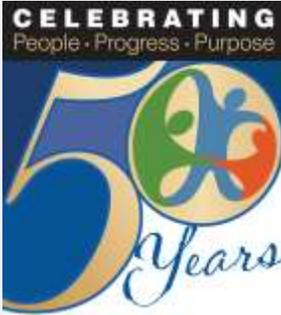
Supported Employment Services: Provide initial and ongoing supports, services and training, usually provided at the job site, to help adults who are eligible for mental health services find and keep paid employment in the community.

Cass Valley Enterprises (CVE) - Vassar, MI provides skill building services and employment to individuals who are referred by TBHS Case Managers and Supports Coordinators based on the individuals person centered plan of service. Skill Building goals are individually based on that plan.

CVE is a diversified, ISO-9001:2008 registered manufacturing and assembly facility that holds government and commercial contracts with;

- General Services Administration (GSA)
- Tank Automotive Command (TACOM)
- Defense Logistics Agency Land and Maritime (DLA L&M)
- Local Businesses

HIGHLIGHTS



Michigan's 46 Community Mental Health agencies commemorated the 50th anniversary of the Community Mental Health Act, which provided funding for mental health centers across the United States and drastically altered the delivery of mental health services, on Oct. 23, 2013.

October 2013 marked the anniversary of President John F. Kennedy's historic message to Congress urging representatives to end the inhumane institutionalization of people suffering from mental illness and developmental and intellectual disabilities. His message led to the signing of the Community Mental Health Act, which focused on community-based care as an alternative to institutionalization. The Community Mental Health Act symbolized a new era of delivering care to the millions of Americans.



Michigan increases commitment to mental health and wellness by supporting independence and self-determination

Bipartisan panel recommends comprehensive changes

Michigan can increase its commitment to mental health and wellness, improving access to help and eliminating the stigma that is often becomes a barrier to people getting the assistance they need, according to a bipartisan panel of state leaders. The Mental Health and Wellness Commission's ground-breaking report "Improving the Quality of Life by Supporting Independence and Self-Determination" offers comprehensive changes to the way Michiganders look at and treat mental health, developmental disabilities and substance use.

Gov. Rick Snyder created the commission through an executive order in February 2013, charging it with reviewing the state's past mental wellness efforts and developing recommendations to strengthen and improve the state's system of support and delivery of services.

Headed by Lt. Gov. Brian Calley, the commission included State Sen. Rebekah Warren, D-Ann Arbor; State Sen. Bruce Caswell, R-Hillsdale; state Rep. Matt Lori, R-Constantine; State Rep. Phil Cavanagh, D-Redford Township; and James Haveman, the director of the Michigan Department of Community Health who co-chaired the group.

"These bipartisan recommendations are the first steps of a long-term plan intended to increase independence, promote self-determination and improve the quality of life for Michiganders affected by mental illnesses, developmental disabilities and substance use disorders," Calley said.

"Each of us knows someone affected by these struggles. I'm optimistic that we can do better by renewing our commitment to mental health and wellness, treating people with the respect and dignity they deserve, and improving the quality of life for all Michiganders."

The commission offers nearly 60 unanimously agreed upon recommendations for changes, focused around the ideas of removing barriers, eliminating the stigma, streamlining procedures to assist healthcare providers and governments and helping our most vulnerable residents.

"After months of feedback from communities across Michigan, I firmly believe that this report is a strong step forward for our residents," Haveman said.

"The recommendations in this report go a long way to address gaps, update outdated policies and systems, and reduce the stigmas associated with living with mental illness in Michigan. The Michigan Department of Community Health is eager to get started on implementing the recommendations in this report and making Michigan a better place for all residents."

* A full copy of the report can be seen at www.michigan.gov/documents

TBHS TRAINING CENTER and KAN DO CREATIONS



In June 2013 TBHS opened our new Training Center and Kan Do Creations store to meet the growing demand of training and meeting space and to highlight an aspect of skill building opportunities. Immediately following the purchase of the former Big Brothers/Big Sisters building at 129 East Burnside Street in Caro, renovation took place. Out of the renovations came **Kan Do Creations**, a unique gift shop located in downtown Caro, providing all occasion baskets and gifts. Baskets and gifts can be custom designed for various occasions (e.g., birthdays, retirements, get well, bridal showers, graduations, special events/meetings, etc.) or customers can select from a variety of pre-made items readily available in the store. Kan Do Creations also has one of a kind jewelry items available.

TBHS Training Center is utilized to train Contact Providers, TBHS staff and individuals served. TBHS hosted a Community Open House in July 2013 which was attended by local dignitaries and community members.

YOUTH MENTAL HEALTH FIRST AID



Two TBHS staff members became certified Youth Mental Health First Aid (Youth MHFA) instructors. The curriculum is designed to teach parents, family members, caregivers, teachers, school staff, peers, neighbors, health and human services workers, and other caring citizens how to help an adolescent (age 12-18) who is experiencing a mental health or addictions challenge or is in crisis.

Youth Mental Health First Aid is primarily designed for adults who regularly interact with young people. The course introduces common mental health challenges for youth, reviews typical adolescent development, and teaches a 5-step action plan for how to help young people in both crisis and non-crisis situations. Topics covered include anxiety, depression, substance use, disorders in which psychosis may occur, disruptive behavior disorders (including AD/HD), and eating disorders.

Thank you to the Tuscola County Community Foundation for the \$2,000.00 grant which allowed TBHS to offer the Youth MHFA training free to community members. TBHS continues to train community members in Adult Mental Health First Aid as well.

Community Collaboration and Engagement

TBHS staff members are active and engaged in various community boards, community activities and health events. Staff provide education and awareness and offset the misconceptions about regarding mental health issues. Below is a sample of TBHS collaborative efforts in Tuscola County.

Tuscola County Human Services Collaborative Council	Great Parents/Great Start Collaborative
Tuscola County Underage Drinking Committee	Michigan School Readiness Council
Foster Care Coalition	Michigan Association of Community Mental Health Boards
Tuscola County Hall Hazard	Domestic Violence Coalition
Early On/Head Start	Tuscola County Court System
Tuscola County Suicide Prevention Coalition	Tuscola County School District
Thumb Area Foster and Adoptive Parent Coalition	Recovery and Integrated Services Collaborative
Tuscola County Health Department Board of Health	Great Parents/Great Start
Tuscola Dental Health Committee	Recipient Rights Association of Michigan
Michigan Youth Opportunities Board	Caro Community Hospital Health Fair
Tuscola County Child Abuse and Neglect Council	Tuscola County Senior Health Fair
United Way of Tuscola County	Hills and Dales Hospital Health Fair

RECOVERY AND RESILIENCY

For me, recovery does not mean I am cured. It means I can have the things I want in life without being stopped by the disabling power of mental illness. As a Peer Support Specialist I share this hope with others. Through work, education, and a little growing up I have found a life on the other side of a psychiatric diagnosis.

I was formally diagnosed with schizophrenia in 2001. My first break occurred while I was still in high school in early 2000. At the time, neither me or my family knew what was happening. For instance, my Dad was convinced drugs had sent me over the edge. The truth is there was no single term or condition that caused this. Mental illness happened to me through a combination of stressors. It was a scary time, that first episode. I needed constant assurance that I was not dying or going to jail, and all my family wanted were answers on how to get through it. And through it all they've stood by me. I know, without a doubt, the stage for my recovery was built not just by my work but also the care and support from some great people.

Peer Support Specialists are people in recovery from mental illness who assist their peers by sharing experience, knowledge, and hope. Peer Support Specialists are trained professionals and may assist with a number of different programs depending on what their position calls for. In June 2008, I became a Certified Peer Support Specialist. The best thing about it for me is the hope I gain from seeing myself coming so far and the belief that it can happen for others. Hope is a keystone for recovery, and I also feel that recovery should be the expectation of those afflicted along with their supports, not just a Hail Mary heave.

My biggest strides in recovery came when I returned to work in 2007. Before my diagnosis I held several jobs so I knew what work was like. And for some years I was convinced I could not return to that pace. Now, most anyone on social security disability can tell you, after bills are paid there is not much leftover for the things you *want*. So the bottom line was apparent, if I want it then I have to work for it. Fortunately I was given a chance by my local video store. In the year I was there my self esteem, sense of trust and purpose became restored. Plus having some pocket money was not all bad.

While working at the video store, my case manager told me about a job opportunity at CMH, working with peers on their goals as someone who had successfully been through the service. I always had an interest in psychology and through other experiences I knew about the power of fellowship in recovery.

So I jumped at the chance, put together a resume, and interviewed for the position. The experience has been awesome! Working as a peer has helped in so many ways. First, it is an incentive to do the things I need to in order to stay well so as to better help the people I see. Also, working alongside clinicians and other peers has been a huge learning experience. What I enjoy most is the level of independence I've achieved, having my own place, and reclaiming control over my life.

Education, gained mostly on my own time and research, has been a huge factor in my recovery. When I first became ill, my family read up on schizophrenia and passed along that knowledge on to me. In 2003, I was able to participate in research at the National Institute of Mental Health (NIMH) in Washington D.C. It was pretty much like staying on a hospital unit with frequent visits by Doctors and researchers, plus fun activities and sight seeing tours around the capitol. I attended psychoeducation groups, took cognitive tests, was able to bring my favorite video games to play during downtime, and made some great friends. Also by working with some of the world's top Doctors in the area of schizophrenia, I began coming to terms that I in fact have a mental illness. It is not an easy thing to accept, since it comes with so many stigmatizing connotations. But today I'm proud of who I am and I'm grateful to have enough people in my life who feel the same way.

Educating myself on social security work rules also helped me keep my job without losing benefits. Each individual's experience may differ but I'm here to say people can work and still keep their benefits. Become knowledgeable about the rules, report income to the appropriate places (like Department of Human Services and the Social Security Administration), and follow up when it's requested.

Finally, what keeps me moving in the recovery process is taking responsibility for my own life. In the past I would search for the answers to what went wrong, who is to blame, etc. What I learned is that by stewing in those unending quandaries, I was only delaying an important decision: When to take control. I learned through the years of living with a mental illness, my biggest advocate is me. Even with the support of family and others, I still need to be vigilant and proactive when it comes to managing my symptoms. For instance if I start hearing voices, I need to actively dismiss or accept their presence, rather than wrestle with their claims. Now I advocate for people to identify and talk with their supports, find a Doctor they like, trust in others, and ultimately take control of their own life.

I do not have all the answers but I know what things have helped me. I realize I may get sick again. But I am not going to let mental illness define me or what I can achieve in life.

Recovery is “the process through which people are to live, work, learn and participate fully in their communities. For some individuals, recovery is the ability to live a fulfilling and productive life despite a disability. For others, recovery implies the reduction or complete remission of symptoms. Science has shown that having HOPE plays an integral role in an individuals recovery.”

~President's New Freedom Commission on Mental Health, 2003 www.mentalhealthcommission.gov



We delight in the beauty of the butterfly, but rarely admit the changes it has gone through to achieve that beauty.



TBHS Programs are accredited by CARF
Accrediting body of behavioral healthcare organizations.

TBHS has been awarded a three-year accreditations from the Commission on Accreditation of Rehabilitation Facilities (CARF) for its following programs:

- **Assertive Community Treatment: Mental Health-Adults;**
- **Case Management/Services Coordination Mental Health-Adults, Children and Adolescents**
- **Community Services: Community Integration and Community Services Coordination;**
- **Crisis Intervention-Mental Health-Adults;**
- **Employment Services: Community Employment Services: Job Development, Job Supports, Job Site Training and Employment Services Coordination**
- **Intensive Family-Based Services-Family Services-Children and Adolescents:**
- **Outpatient Treatment Mental Health -Adults, Children and Adolescents**

- **TBHS Administration Building: 323 North State Street, Caro, MI 48723**
- **TBHS Clinical Programs: 1332 Prospect Avenue, Caro, MI 48723**
- **Kan Do Creations Store: 129 East Burnside Street, Caro, MI 48723**
- **Cass Valley Enterprises: 50 Enterprise Drive, Vassar, MI 48726**

989.673.6191 or 1.800.462.6814

www.tbhsonline.com

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