

Annual Report to the Community 2011



Community  
Mental Health  
Center, Inc.

Your partner in behavioral health since 1967



Faced with constant change and challenges, Community Mental Health Center, Inc. continues to move forward in meeting its mission of functioning in a partnership with staff, persons served and local communities while providing a continuum of quality services to address the mental health and addiction needs in the communities we serve. While financial status is extremely important it represents only one aspect of the Center's functioning. At our core, the staff of the Center are consistently making a positive difference in the lives of persons served and in our communities. CMHC is blessed to have an all-star team of leadership and staff who are dedicated to the organization's mission. I am proud of our successes, made possible by hard work, energy, creativity, and a sincere desire to transform the lives of those we serve. The past year has been filled with the important achievements highlighted in this report. CMHC enjoys a very positive reputation at the state and national level for the innovative services we provide and the positive outcomes we achieve. We continue our striving to improve services, promote innovation, increase access and satisfaction; all within the framework of compassionate professionalism, integrity, transparency, and sound stewardship.

The future will continue to be immersed in a sea of change and challenges. CMHC has outlined its strategic goals to address known upcoming changes and challenges. The Center plans on a continued transformation to becoming a Recovery organization and culture, which we feel will enhance our core mission; for CMHC be at the forefront in leading community change and response to healthcare reform initiatives; and to continually seek improvement and efficiency in our processes via NIATx and Baldrige frameworks. We have taken the first steps forward already on what should be an exciting journey. I believe our best days are ahead of us!

On behalf of CMHC's Board of Directors, staff members, and our community partners, thank you for your continued support of our efforts to meet the behavioral health needs of the individuals and communities of Southeast Indiana.


Tom Talbot, MA  
Executive Director

## **“Nothing endures but change” – Heraclitus**

**T**he above quotation has been especially true for CMHC over the past year. The foremost change has been the transition to a new Executive Director, Mr. Tom Talbot. Almost immediately after taking over the reins, Tom and his staff were faced with Federal changes to Medicare and Medicaid programs which resulted in significant changes in how services could be provided to many of our clients. The staff responded positively and creatively to those changes, and their actions have yielded a favorable outcome for our clients as well as improving the financial footing of the center.


Staff turnover is another area of continuous change for CMHC. It is always a great concern because it affects our ability to deliver both the quality and quantity of services needed by our clients. The pool of qualified mental health workers nationwide is small. Our leaders and our Human Resources Department must compete with larger urban facilities when attempting to lure prospective employees to rural Southeastern Indiana. This is a daunting task, but they have risen to the challenge with positive results, the most recent example of which is the hiring of Dr. Melody Gongwer. Dr. Gongwer’s hiring helps counter the loss of Dr. Lowell Foster, who retired June 30 after more than sixteen years of service to CMHC.

Changes have also been implemented to streamline the entry process for new clients. Staff members have applied newly-acquired skills to reduce the time from a client’s initial call to their first appointment and also to reduce the actual time spent in the registration process. We will keep examining all phases of our treatment processes with the client’s perspective in mind in an effort to continually improve delivery of all CMHC services.



Edwin L. Krause  
President, Board of Directors





## Focus on Transformation

### **Movement towards a Recovery Focused Agency**

In March 2011 CMHC was selected as one of 13 (out of a field of 100 applicants) mental health centers to participate in an inaugural Recovery Summit. Tom Talbot, CEO and Bill Hardy, Director of Community Support Services met with other executive staff from across the nation and other national leaders in mental health recovery gathered for the two-day summit. Participants learned key elements necessary to transform community mental health centers to a recovery-focused system of care.

CMHC left with an action plan and the elements necessary to transform CMHC to become a center that focuses on helping people recover and live healthier lives. The Summit provided a national support network of leading behavioral healthcare experts on system change; roundtable discussions on implementing processes and practices; ways to measure and support recovery within community mental health organizations; hands-on, real-world demonstrations; and social networking initiatives. Attendees learned from experts in the field and heard real-world examples of successful implementation, developed action plans for their center's transformation and discussed specific processes and practices.

### **Health Reform Integrated Healthcare**


By 2020, mental and addiction disorders will surpass all physical diseases worldwide as major causes of disability. Yet most people associate public health crises with physical illnesses; however the CDC released a report in September which found that cardiovascular disease, diabetes, obesity and other chronic diseases are associated with mental illness. The report found that treatment of the mental illness also can reduce the effect of chronic diseases.

In March of 2010, President Obama signed the Patient Protection and Affordable Care Act (ACA) into law. Known as national healthcare reform, the new law includes many provisions that will impact the Center, and all behavioral health providers. One key component of ACA is the person-centered healthcare home. A health care home is defined as one that is equipped to care for the whole patient and manage multiple, interrelated and chronic health problems. Health homes hold the potential for significantly improving the health and wellness of those they serve. Access to effective Mental Health and Substance Use Services will be critical to the effectiveness of Health Homes. CMHC must determine what kind of relationship we want with these entities and what we need to do to qualify as partners. Regardless of the Affordable Care Act's ultimate fate, health home will be foundational elements of the future healthcare system, and we must begin positioning ourselves to be recognized as qualified partners. To that end leadership at CMHC is working on a strategic plan to address our role and participation in the ACA.

### **CMHC's Harmony Health Clinic - Integrated Primary Care Clinic**

Early mortality rates of persons with serious mental illness are unacceptable (average life span 25 years less than general population). Persons with serious mental illness have increased vulnerability due to poverty, social isolation, trauma, and incarceration; a lack of coordination between mental and primary healthcare; stigma and discrimination; side effects from psychotropic medications; and an overall lack of access to healthcare—particularly preventative care. In addition to the tragedy of early death, the higher rates of acuity of health conditions also result in greater health costs.

One strategy that CMHC has deployed is the implementation of a primary health care clinic located within our program for persons with serious mental illness. This clinic is staffed by a primary care physician and nurse practitioner. The clinic can be accessed by our clients that have a serious mental illness. At this time we can only accept Medicaid and Medicare as payment. While this is a 4 year pilot project funded by the Health Foundation of Greater Cincinnati we are hopeful that by the end of the grant period we will be able to sustain and expand this integrated primary care clinic model. We are hopeful that the overall health of our clients will improve using this promising practice.



## A Year in Highlights

- The Intensive Youth Services Division continues to work to keep children and youth in the community and out of residential placements.
- The agency is working to implement wide spread use of Infant Mental Health approaches throughout the agency. This model of care is used with young children and their caregiver(s) to promote healthy relationships and reduce mental health challenges later in life.
- The Intensive Family Based teams of the Intensive Youth Services Division have been working further integrate a treatment philosophy that promotes recovery and resiliency.
- CMHC's Lawrenceburg Outpatient office instituted a walk in clinic twice a week for people seeking substance use services. This change decreased the average wait time for this kind of assessment from over a month to being offered a time to come in within 4 days or less from when they first called. The agency is working to institute similar walk in clinics at other offices and for other services.
- The Outpatient teams are working to increase their collaboration with the court systems through joint programming.
- CMHC has expanded its collaboration with the Department of Child Services to become the preferred provider for services to children and their parents. The coordinated services have reduced the overall cost to the State of Indiana and increased access to mental health services for families involved with the Department of Child Services.
- In order to improve access to clients and efficiency of staff time the community-based workers in the Community Support Services Division have been geographically distributed within community they serve. This reduces the amount of time spent on the road and increases the amount of time that is available to work with the people they serve.
- The Harmony Health Clinic held its 2nd annual Health Fair to promote services and engage with other service providers and consumers.
- The Harmony Health Clinic successfully completed its first CARF survey.
- CMHC has convened an agency-wide taskforce to plan for the entire agency, including residential facilities to become smoke-free.
- The Inpatient Unit became completely tobacco-free on November 18, 2010 and was recognized with a RISE award (Rural Indiana Smoke-free Environment).
- The Inpatient Unit initiated trauma-informed care and collaborated with our consumers in how they prefer to be helped during times of crisis.



- CMHC Housing programs is currently in the process of adding two additional facilities, one in Lawrenceburg and one in Batesville. The plan is for one property to be specifically focused on serving young adults. The hope is for both facilities to be open by the end of 2012.
- CMHC completed its 3 year collaborative grant with 4 other Greater Cincinnati mental health agencies to implement an evidenced-based practice that targets specific coping behaviors called Dialectic Behavioral Therapy.
- CMHC has reformatted its walk in emergencies services to increase access to services and decrease the waiting time between transitions to other programs.
- CMHC continues to expand their transition age services by adding more staff to the program. Placing great emphasis on the special needs and interests of young adults using the Transitioning to Independence model.
- The electronic health record (EHR) continues to be implemented throughout the agency reducing the amount of paper used by all staff. The agency is working to use the EHR in a meaningful way that includes using the clinical, demographic and financial information collected to make data informed decisions at all levels of staff.
- CMHC is working to become a training environment for future providers. CMHC has expanded the number of schools they are working with and are currently offering placements in nursing, social work, counseling, and psychology to Ivy Tech Community College of Indiana, University of Cincinnati, Northern Kentucky University, Miami University of Ohio, Indiana University, Indiana University Purdue University Indianapolis/Columbus students.

*"The medical staff are the greatest. They figured out a treatment for my son. I could not ask for anything better because he is now doing wonderfully. The front desk staff is always pleasant and helps to answer the questions I have."*

*-Parent of child who is seen by a Staff Psychiatrist*

"I am so happy that the CMHC inpatient unit is available to me when I really need it. If it wasn't for the unit, it's hard telling where I would be right now and I know it wouldn't be good. Thank you all for your help."  
 -CMHC Inpatient Unit Client



## Financial Information

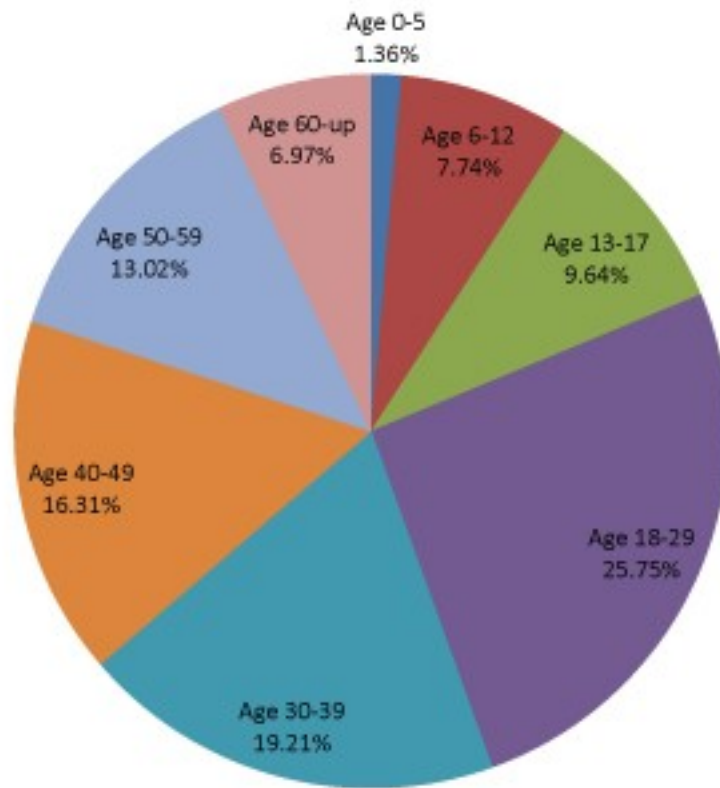
The past year has been marked by significant financial challenges due to changes brought about by the Division of Mental Health and Addiction's Transformation initiative which significantly changed Medicaid Rehabilitation Option (MRO) reimbursement (a major source of revenue for the Center). CMHC struggled to find its financial footing while adjusting to the service delivery and reimbursement changes. Through the dedicated and hard work of the organization's leadership and staff, CMHC was able to finish the year on a positive financial note. This achievement is significant. Many CMHCs throughout the state struggled with the same financial impacts in adjusting to the Transformation initiative. Many of those CMHCs lost revenue, even while impacting employment via layoffs. I am proud of CMHC in that we successfully addressed our financial challenges and maintained employment. While we find ourselves often responding to external change, CMHC also initiated several significant changes regarding our pension plan and health insurance which we feel will positively contribute to our financial status and be of greater benefit to our employees.

Thank you staff- Tom Talbot, Executive Director

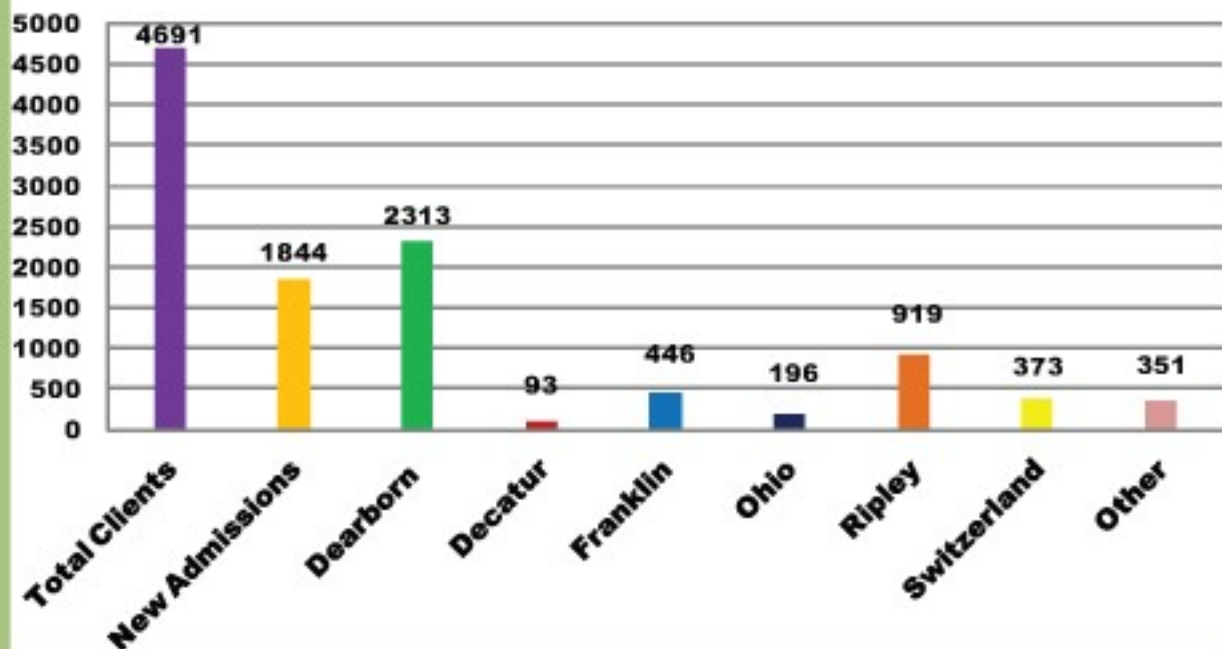
Total Value of Services Provided	\$14,231,655
Less contractual allowances and charity care	(\$6,041,771)
Public Support - State	\$1,707,010
Public Support - Local	\$624,609
Federal Funding for Programs and Services	\$4,158,279
Other Funding - Grants, Donations, Interest, Etc.	\$466,837
<b>Total Income for the Year</b>	<b>\$15,146,619</b>
Wages and Benefits	\$10,846,651
Other Operating Expenses - Supplies, Utilities, Maintenance, Transportation, Purchased Services, Etc.	\$4,181,413
<b>Total Expenses for the Year</b>	<b>\$15,028,064</b>
<b>Increase in Unrestricted Assets of</b>	<b>\$118,555</b>

# Persons Served

## Distribution of Client Ages



## Clients FY 2011





## NIATx

The Health Foundation of Greater Cincinnati has awarded CMHC a five year grant initiative to assist the Lawrenceburg Outpatient Location to improve access and retention to persons with substance use disorders using a nationally recognized process improvement model called NIATx. CMHC and OCOF have both adopted the principles of this process improvement model and are using to use it for process improvement throughout the mental health center and the entire child serving system of care. CMHC is working to integrate the process into all aspects of the agency from ranging from billing, to facility aesthetics, and program processes. CMHC hopes that this data driven model will help to emphasis the need of objective information in order to make smart clinical and business decisions. Below is data from our first change meeting related to decreasing the time between first contact to request an assessment and the actual assessment.



## Special Programs and Projects

### One Community One Family

The One Community One Family Partnership (OCOF) is a collaborative of community partners throughout eight counties in Southeastern Indiana working together to improve the system of care for children and families. CMHC serves as the legal entity. OCOF staff provides technical assistance, facilitate change initiatives, assist partners in marketing, provide and coordinate training, work to improve access for all services, and provide evaluation and quality assurance for a variety of partners and programs. OCOF is guided by a structure of committees comprised of various system/agency representatives, families, and youth that provide guidance, accountability and endorsement to not only OCOF, but throughout the system of care. OCOF is currently finishing Year 3 of a six-year federal cooperative agreement with SAMHSA and continues to work to improve practice throughout Southeastern Indiana and the entire state. CMHC is very excited how participation in this partnership has improved communication and innovation within the child serving system.

### Trauma-Informed

Trauma-informed means that our staff aims to be as welcoming and respectful to all clients, family members, and other staff that come into contact with CMHC staff. CMHC has taken a lead in tying the idea of becoming trauma-informed throughout the agency. This transformation will not only occur at the front line clinical level but will also include our support staff, administrative staff, financial staff, and human resources staff. Currently, One Community One Family partnership (Systems of Care) is facilitating cross training between community mental health centers, other contracted service providers and child protection workers in facilitating child and family team meetings utilizing the principles of flexible, individualized, strengths based, and team based to ensure that trauma focused services occur and support concurrent and safety planning.

### Research and Evaluation

CMHC continues its commitment to increase participation in research and evaluation. Internally CMHC is utilizing the data already collected through the EHR to help to inform and improve the programs offered. CMHC completed its first year as a participant in the National Institute of Mental Health funded RAISE study. The RAISE Early Treatment Program (ETP) is a research study looking at people experiencing the early stages of schizophrenia and related illnesses. This study is of great importance from the perspective of prevention. The experiences of young adults newly diagnosed with a serious mental illness are very different than those who were diagnosed 20 years ago. This study hopes to explore how new therapies (medication and other interventions) can be used to ensure the newly diagnosed have an opportunity at a productive life in the community. Additionally CMHC is a participant in a national data collection effort to increase the knowledge about antipsychotic use in community mental health centers. CMHC hopes to continue to expand its participating in research and looks at this as an opportunity to inform the field of mental health.

### Deaf Services

CMHC hired University of Cincinnati Masters in Social Work graduate Jennifer Ficker-Halupnik, to work for the Deaf Services Program. Jennifer who herself is also Deaf, has joined forces with Deaf Services Program Director, Marcus Maddox to provide services throughout the southern portion of the State of Indiana. Additionally Marcus and Jennifer and alongside CMHC's Executive Director and Chief Operating Officer participate on a State task force group to improve behavioral health services for the deaf state wide.

"A great partnership-Keep it going!!" -Principal at a local school

