

Community

Mental Health Center, Inc.

Annual Report to the Community

Fiscal Year 2010



Your partner for behavioral health since 1967

Community Mental Health Center, Inc.

Your partner for behavioral health

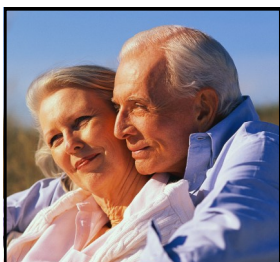


For more than 40 years, CMHC has been your partner for behavioral health. The people we work with are people you know – local, regional, state and federal agencies, behavioral health services providers, hospitals, community service providers, schools, businesses, government and law enforcement entities, local and regional foundations.



Our Mission

We are dedicated to a partnership of staff, clients and local communities. We provide a continuum of quality services to address the mental health and addictions needs in our communities. We are committed to the continuous improvement of community-based services that are accessible, effective and satisfying for all those who participate in this partnership.



Our Vision

Our vision is to create a bond of teamwork uniting staff, clients and the variety of resources of our local communities, attending to mental health and addictions needs while meeting the challenge of excellence in a changing society.



From our clients . . .

“CMHC has had an ability to select people as staff members who are very caring. This is like my family. We love each other. We care for each other.”
— *Gwen, a client in Residential Services*

“Children must be educated when they’re young about mental health and what to do if they need help. We have to teach them that mental health is not a shameful topic.” — *Chris, a client and an employee of CMHC*



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From the Executive Director

Community Mental Health Center, Inc. is immersed in a world of financial challenges and constant change. During the past fiscal year, our Board, administrators and staff members have worked to address those challenges and changes so we can continue to serve our consumers and communities in the best way possible. One major change has been in our executive leadership. I am honored to have been selected to be CMHC's executive director after the retirement of Joseph Stephens, who provided the Center with 22 years of outstanding and visionary leadership.

I have the privilege to work with an all-star team of leadership and staff dedicated to the organization's mission to make a positive difference in the lives of our consumers and communities. In the sea of change in which we find ourselves, this is our constant. CMHC has made strides to develop and provide the highest quality services to support our consumers and communities. The past year has been filled with the important achievements highlighted in this report. 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.

Our goals for the future focus on addressing our financial and change challenges, striving to improve access to services, integrating care, and demonstrating compassionate professionalism and sound stewardship for the good of our consumers, communities and the organization as a whole. Together we will face challenges, seek opportunities, encourage teamwork, promote innovation, and demand the highest levels of integrity, transparency and performance, while honoring CMHC's distinguished legacy of service.

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 Southeastern Indiana.



Thomas M. Talbot
Executive Director

Executive Staff

Thomas M. Talbot, M.A.
Executive Director

Julia Rupp, M.S.
Chief Operations Officer

Georgii Zhirkin, M.B.A.
Chief Financial Officer

Kelly Stewart, B.A.
Director of Human Resources

Jerome Kelly, M.D.
Medical Director

Stacey Cornett, L.C.S.W.
Director of Intensive Youth Services

William Hardy L.C.S.W.
Director of Community Support Services

Charlotte Ipach, M.S.N.
Director of Inpatient and Primary Care
Integration Services

John Mallery, L.C.S.W.
Director of Outpatient Services

Deborah Cohen, M.S.W.
Director of Evaluation

Dawn Skaggs, R.H.I.T.
Health Information Manager

Lisa Weber
Patient Account Manager

Skip Hudson
Information Technology Manager

Kevin Kennedy, Sr., B.A.
Public Relations Manager/
Administrative Assistant

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A Round of Applause for Staff and Board Members

This year, we have several staff members and Board members who are celebrating anniversary service dates. We value the dedication of our staff members and Board members, especially those marking milestones with CMHC.

Staff Members

25 Years — William Hardy

20 Years — Cheryl Hendry

15 Years — Bridget Bascom-Hinkle
Lowell Foster
Brenda Gabbard
Frans Geeraerts

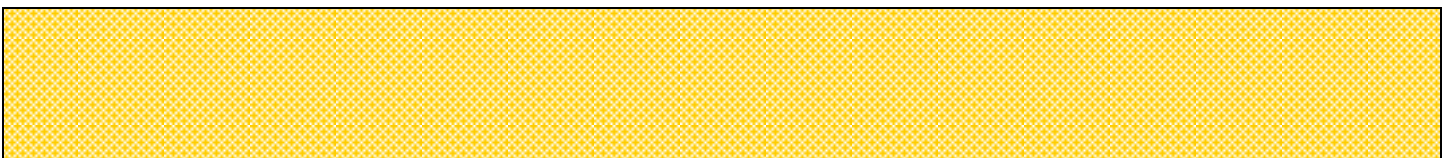
10 Years — Christy Browning
Bev Dalessandro
Lary Jones
Abby Kemper
Sue Lindsey
Tracy Mock
Paul Murphy
Maureen Seals
Kelly Stewart
Tom Talbot

5 Years — Beth Bryant
Carolyn Duncan
Sandra Edwards
Erika Free
Jill Hoog-Buerkle
David Knight
Vicki Lawrence
Liz Loring
Phyllis McKeown
Jackie Mullin
Connie Summers
Ludgardis Woliung

Board Members

15 Years — Nancy McDaniel

10 Years — Cheryl Corning
Ed Goble
Ed Krause



Community Mental Health Center, Inc.

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From the President of the Board of Directors

During the past fiscal year, the Board, administrators and staff members of Community Mental Health Center, Inc., have continued to work to make adjustments to operations to be ready to meet anticipated future challenges so that we can continue to serve our clients in the best ways possible. One of the major tasks in progress is the ongoing implementation of an electronic health record, This project is meeting many needs, including streamlining the Center's clinical documentation and billing procedures and complying with state requirements to report treatment information.

CMHC has provided services to more than 4,000 clients for the fifth consecutive year. Demand for services continues to increase, and CMHC staff members have responded with creativity and vigor to meet this demand. Impacts to regional, state and national economies have stretched resources and mandated careful allocation of time and services. The near-term future appears poised to test us further, so we are taking necessary steps to prepare ourselves and our clients for what challenges may come.

The Board, staff and clients of CMHC, Inc. remain committed to delivering behavioral health services that will continue to improve the quality of life for individuals and families in Southeastern Indiana.

The reason for our efforts was aptly summed up by a consumer at a recent Board meeting when she stated, "There are more people out there who need our help!"



Edwin L. Krause
President, Board of Directors

Board of Directors of Community Mental Health Center, Inc.

Edwin Krause
President
Franklin County

Suzanne Ullrich
Vice President
Dearborn County

Ed Goble
Treasurer
Ripley County

Nancy McDaniel
Secretary
Ohio County

Robert Bischoff
Dearborn County

Rev. David Patterson
Dearborn County

Tom Cheek
Dearborn County

Jud McMillin
Franklin County

Cheryl Corning
Ripley County

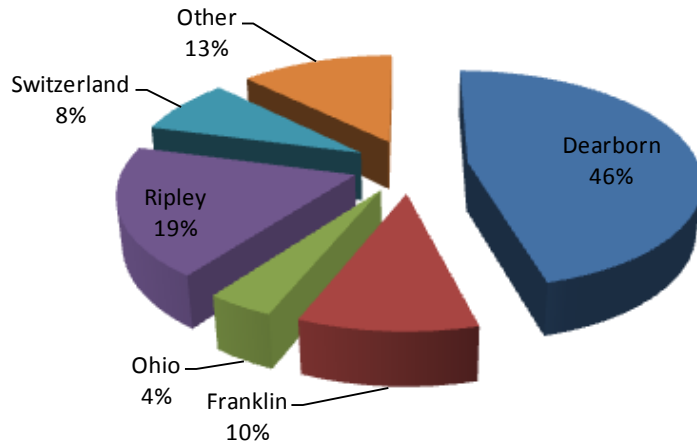
Brenda Myers
Ripley County

Sally Kinghorn
Switzerland County

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Client Residence



CMHC served a total of 5,463 unduplicated clients in FY 2010.

Clients resided in the following counties:

Dearborn County: 2,505

Franklin County: 566

Ohio County: 215

Ripley County: 1,036

Switzerland County: 451

Other: 690

How We Are Funded

CMHC, Inc. receives funds from a variety of sources, including federal and state programs and contracts, county taxes, grants and foundations. As you can see from the graph above, the vast majority of funding comes from reimbursement for services provided. As federal and state funding have diminished over the years, behavioral health services providers, including CMHC, have come to rely on generation of service revenue as the primary means for financial viability.

The following financial report is from the audited records of Community Mental Health Center, Inc., as of June 30, 2010. Complete C.P.A.-audited reports for the fiscal year ending June 30, 2010, are available for examination in the Center's administrative office. CMHC, Inc. is audited on a regular basis by an independent certified public accounting firm and is subject to audits and operates in accordance with the rules and regulations of the Indiana Department of Public Welfare, the Indiana Division of Mental Health and Addiction, and the Indiana State Board of Accounts.

Total Value of Services Rendered	\$17,911,558
We were not paid for all services because of contractual and other allowances and an inability of some clients to pay for their services, totaling	(\$9,504,197)
To help offset these costs, we received public support, totaling	\$5,522,870
We received other income, such as interest, donations, rent, etc. totaling	\$321,344
Therefore, our total income for the year was	\$14,251,575
We incurred salaries, wages and fringe benefits totaling	\$10,931,224
We incurred other operating expenses, such as utilities, maintenance, depreciation, supplies, purchased services, etc., totaling	\$3,973,248
Therefore, our total operating expenses for the year were	\$14,904,472
<i>We realized a decrease in unrestricted assets of</i>	<i>(\$652,897)</i>

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Clinical Divisions – Where We've Been in 2010

Community Mental Health Center, Inc. operates four clinical divisions and a variety of programs within those divisions. The following highlights some notable happenings of the past year. If you would like to hear about all of the programs CMHC offers please visit the agency website. <http://www.cmhcinc.org>

Inpatient Unit - The Inpatient Unit had 507 admissions during Fiscal Year 2010, averaging more than 40 admissions per month during the period. Average length of stay during that time was four to five days. A goal within the agency is to provide services in the least restrictive environment. The following shows the number of people who were deferred from hospitalization.

Number of people screened for IPU	Admitted	Deferred to community-based programs
1024	507 (49%)	517 (51%)

CMHC Harmony Health Clinic - The clinic is a integrated primary care and behavioral health service supported by a grant from The Health Foundation of Greater Cincinnati, is for adults with serious mental illnesses who have Medicare or Medicaid coverage. Services include health screenings, wellness check-ups and problem-focused treatment. A health fair for clients and staff members in March marked the opening of the Primary Care Integration Clinic . The clinic is located at Ludlow Apartments, making it accessible to clients and staff members, and it is adjacent to the new QOL Meds pharmacy, allowing the opportunity for "one-stop" services.

Deaf & Hard of Hearing Services

This program has played a key role during the past year in working with a statewide coalition to expand services in Indiana for individuals who are Deaf or hard of hearing. .

The Center worked several months with Jennifer Ficker-Halupnik as a Master's-level social work intern in DHHS. After graduation, Ms. Ficker-Halupnik, who herself is Deaf, was hired as a staff therapist with the program. Hiring Ms. Ficker-Halupnik well help CMHC meet its goal of providing culturally appropriate Deaf services. Mr. Maddux said "Deaf clients and their families have noted how valuable it is to be working with an individual who communicates in their native language.

Directions! Programs—Directions! Staff members and volunteers provided classroom presentations to 5428 school age children that run the gamut from child abuse prevention to decision-making and confidence-building to prevention of tobacco use to dating violence awareness. Programs are geared to primary students, middle school students and high school students.

SAS also used a variety of community events to promote their services including its annual "Take Back the Night" event in April and ongoing presentations of "The Clothesline Project," a national campaign in which displays of T-shirts created by survivors of rape and sexual assault are used to inform viewers about how these crimes affect survivors' lives and the lives of their family members and the community in general. Both "Take Back the Night" and The Clothesline Project have become important and valued community events. The SAS team worked 848 hours: serving 17 adults related to domestic violence cases and providing community training.

Outpatient Services

NIATx Projects - CMHC is participating in a 5 year learning collaborative sponsored by the Health Foundation of Greater Cincinnati to fund a series of process improvement projects using the approach advocated by the Network for Improvement of Addictions Treatment, or NIATx. This approach helps organizations identify potential barriers clients may face in accessing treatment and sticking with it and encourages organizations to examine and improve processes to reduce or remove identified barriers. The Center's Change Team will examine processes, gather consumer input and make data-driven decisions to implement and sustain improvements.

As part of the NIATx Initiative the Batesville Park Street Outpatient Office was able to reduce the time between first contact and intake appointment.

Average Wait Days For Assessment Before Change	Average Wait Days For Assessment After Change
31 Days	10 Days

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Clinical Divisions —

Where We've Been in 2010... continued

Intensive Youth Services (IYS) - IYS has made a number of moves to support its mission of serving and supporting children and families in a way that exemplifies family-driven, youth-guided, culturally competent and community-based services. Based on the wraparound model of care one of the IYS performance measures is to increase strengths in youth as measured in a standardized assessment in 2010: 49% of 281 youth increased in at least one strength domain.

Trauma-informed care continued to be a focus as staff continued to raise awareness of this need and as clients were engaged to provide input on how needs in this area can best be met.

One Community, One Family : Systems of Care - completed the second year of the six-year federal grant to provide comprehensive wraparound services to children and families in Dearborn, Decatur, Franklin, Jennings, Ohio, Ripley, Rush and Switzerland counties. Development and engagement of the advisory and governance committees is ongoing as the programs seeks to collaborate with a variety of community stakeholders. Additionally, One Community, One Family (OCOF) was contracted to provide training and consultation throughout the state on the wraparound service model. Staff worked with inpatient hospitalization providers to help ensure effectiveness of treatment and appropriate return of children to the community. Partnership with the statewide Community Alternatives to Psychiatric Residential Treatment Facilities (CA-PRTF).

OCOF offered a variety of training opportunities to providers and stakeholders, including presentations on services for individuals who are Deaf or hard of hearing, the Transition to Independence Process (TIP) program, and early childhood mental health.

Community-Assisted Supported Employment (CASE) - Several staff members have been added to serve youth and young adults through the federal Systems of Care grant and the Transition to Independence Process (TIP) model. CASE also has become an Employment Network, allowing it to serve individuals in Indiana, Kentucky and Ohio. CASE continues to produce excellent outcomes:

- 118 Individuals completed the enrollment process
- 81 (69%) enrolled in Indiana Vocational Rehab Services
- 45 (40%) obtained a job

F.I.R.E. (Finding Improvement by Reaching Empowerment) - a peer support and advocacy group for adolescent and young adult consumers, enhanced its profile in the community by expanding support offerings for young consumers and their families and by offering a variety of events and activities in the community. One highlight from the past year was a community concert sponsored by F.I.R.E. in Ripley county.

United Families—a family support program affiliated with OCOF, expanded peer support and advocacy services to secondary consumers by adding “Parent Gathering” meetings and one-on-one support. The United Families staff members are working with a variety of community agencies in order to ensure that the family voice is heard.

Community Support Services

Advisory Council - The Advisory Council is a group of consumers, CMHC staff members, and community stakeholders which meets monthly to engage and promote client involvement in determining how to address challenges and issues facing clients and their families. Advisory Council members annually attend the Indiana KEY Consumer Conference, and a consumer-initiated and consumer-led support group including Lost and Found and SOS continue to meet in Batesville and Lawrenceburg.

Community Support Services

Assertive Community Treatment (ACT)- The ACT Team was consolidated from two teams (North and South) to one unified team to better meet the needs of clients living throughout the Center's service area. The ACT Team provides a variety of services, both facility- and community-based, to assist clients with maintaining their lives in the community while continuing on the path to recovery. Efforts to meet the needs of clients while maintaining adequate staffing and management are ongoing.

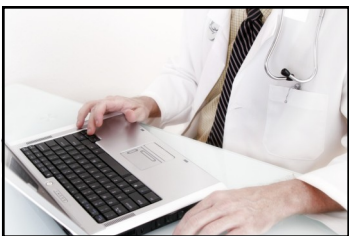
Community Support Services

Housing Programs - CMHC continues to move forward with opportunities provided by its participation in the Indiana Supportive Housing Institute, which has resulted in development of two new housing projects, one in Batesville and one in Lawrenceburg, that would expand housing options.

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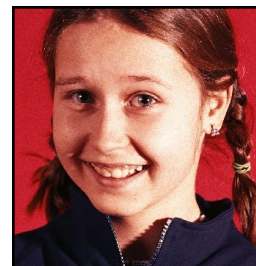
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Special Projects



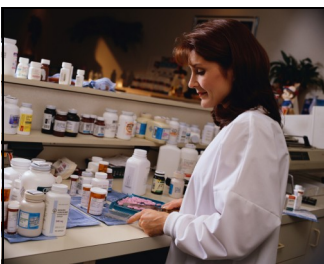
EHR Implementation- Implementation of the electronic health record continues to be the most significant ongoing improvement project at CMHC. Key documentation items are being developed on a daily basis to help clinicians continue to move toward a paperless clinical record. Implementation of the EHR has contributed greatly to the availability and use of data to drive various aspects of the agency, including service development and management and fiscal administration. Clinicians can run reports to see all services delivered to a particular person over a specific time period, financial staff can monitor payments more easily, and administrators can monitor performance management data at the click of a mouse.

Systems of Care National Evaluation Study- CMHC continues to participate in the Systems of Care Children's Mental Health Initiative (CMHI), funded by a federal grant. As part of the grant, One Community, One Family is working with Indiana University to evaluate the process of its development. In January, some OCOF youth and families were enrolled in a national study associated with the grant. At the same time, OCOF, Indiana University and CMHC are conducting evaluations at local and regional levels. Earlier this year, individuals throughout the region covered by the initiative took part in a study to gauge their perceptions and attitudes about serving youths who have mental health needs. Feedback and data generated by during these activities will be used to drive further development and to determine satisfaction with services delivered by the initiative. Additionally, OCOF was selected to participate in a School Sector study with one other CMHI site. This study will consist of OCOF school-age children school behavior and performance to be compared with school-age children in another comparable community within Indiana.



RAISE Study - The Center was chosen to participate in a national research study on early onset of schizophrenia. Recovery After an Initial Schizophrenic Episode (RAISE), the RAISE Early Treatment Program will compare two different methods of providing treatment for individuals experiencing the early stages of schizophrenia and related illnesses. Comprehensive initial evaluation at the earliest point after symptoms appear is emphasized. Treatment could include medication, psychosocial therapies and supportive services that address the multiple aspects associated with these illnesses. The study is taking place in 35 community mental health centers and hospital outpatient mental health facilities in 21 states. CMHC anticipates enrollment of 18 participants over a two-year period and will monitor those enrolled for two to three years.

Dialectical Behavior Therapy (DBT) - The South Continuous Treatment Team and South Outpatient Team is part of a multi-agency grant-funded collaborative to provide DBT to clients with a diagnosis of personality disorder, post-traumatic stress disorder, or a trauma history. This modality has brought positive outcomes for many clients. This team hopes to continue to increase the number of clients receiving DBT in the com-



QoL Meds Onsite Pharmacy — QoL Meds, a Pittsburgh-based pharmacy company, has opened a pharmacy in one of the housing facilities operated in Lawrenceburg by Community Mental Health Center, Inc. QoL offers on-site medication coordination, state-of-the-art proactive prescription management, sample medication management, and in-depth medication education.

To learn more about what is occurring within the agency visit our "new and improved" website <http://www.cmhcinc.org>

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Program Leadership

Nancy Pieper, L.C.S.W.
Program Director
North Outpatient Services

Nancy Janszen, Ed.D., L.M.H.C.
Program Director
South Outpatient Services

Marcus Maddux, L.C.S.W.
Program Director
Deaf & Heard of Hearing Services

Dan Glynn, Psy.D.
Coordinator, Psychological Services
North Region

Sarah Lacey-Horine, Psy.D.
Coordinator, Psychological Services
South Region

Jeff Craven, L.M.H.C.
Coordinator, Collaborative
Services (MAJIC)

Patricia Blank, R.N.
Coordinator, Outpatient
Medication Management

Dennis Crandell, L.C.S.W.
Program Director
Acute Stabilization Services

Tamara Willis, R.N.
Nursing Supervisor Inpatient Unit

Cathy Dwyer
DIRECTIONS! Adolescent Program Manager

Marilyn Cohen, M.S.
Program Director
North Intensive Youth Services

Tracy Mock, L.M.H.C.
Program Director
South Intensive Youth Services

Laura Harmon, M.S.W.
Coordinator
North Intensive Youth Services-Brookville

Noel Lopez-Freeman, M.A.
Coordinator
South Intensive Youth Services, Lawrenceburg

Jennifer Cuellar, L.M.H.C.
Coordinator
North Intensive Youth Services-Batesville

Corinna Davies, L.M.H.C.
Coordinator
South Intensive Youth Services-Vevay

Brenda Konradi, B.A.
Project Director
Systems of Care

Jamie Buzek, M.S.W.
Resource Coordinator
Systems of Care

Malissa Spurlock, M.S.W.
Resource Coordinator
Systems of Care

Bobbi Jo Short, B.A.
Resource Facilitator Supervisor

Paul Murphy, M.Ed
Associate Director
Community Support Services

Rachel Roszell, L.M.H.C.
Program Director
Psychiatric Rehabilitation

Jackie Mullin, B.A.
Program Director Community-Assisted
Supported Employment (CASE)
Program/Coordinator of Youth Development

Bridget Bascom-Hinkle, L.C.S.W.
Program Director
Assertive Community Treatment (ACT)
& Integrated Dual Disorder Treatment (IDDT)

Suzanne Newton, M.A.
Coordinator, North Region
Residential Services

Mike Creech, B.S.
Coordinator, South Region
Residential Services

Jill Hoog-Buerkle, B.A.
Coordinator, Developmentally
Disabled Services, CSS

Sara Frohlich, L.M.H.C.
Manager of Recovery Centers

Robert Miller, B.A.
Residential Facility Manager

Jascia Robinson, B.S.
DIRECTIONS! Elementary Program Manager

Affirmation of Policy

Community Mental Health Center, Inc., steadfastly maintains equal opportunity in all activities, including admissions, accessibility to services and employment. CMHC does not discriminate on the basis of age, race, color, religion, gender, national origin, ancestry or disability.

CMHC's Licenses, Certifications & Accreditations

CMHC, Inc., is licensed as a psychiatric hospital by the Indiana Division of Mental Health & Addiction (DMHA). CMHC is also certified as a community mental health center, as a residential services provider, and as a managed care provider for adults with serious mental illness, children and adolescents with severe emotional disabilities, and individuals with substance use problems. CMHC is endorsed by DMHA as a provider of compulsive gambling services. CMHC is accredited by the Joint Commission and by CARE, the Rehabilitation Accreditation Commission.

Recovery is the goal. Empowerment is the tool. Hope is the beginning.