



Northern Lakes

COMMUNITY MENTAL HEALTH

ANNUAL REPORT TO THE COMMUNITY 2008



Greg Paiffhouse
Chief Executive
Officer

Thanks for taking time to read our 2008 Annual Report. We believe that you will find it informational – regarding the public mental health system, our organization, services provided and especially about persons for whom we are privileged to serve. We share this with humility, pride, and recognition to our community partners, network providers, and staff on whom we depend.

I am proud to be part of the Michigan public mental health system, of the changes our system is making, and to be part of a CMH fully invested in helping persons have lives of meaning. We look forward to creating new opportunities and more successful school transitions for individuals as they near completion of their special education careers. We also look forward to implementing more improvements as a result of our recent pilot of the Recovery Enhancing Environment (REE) survey and developing the mental health court pilot in Traverse City.

We are determined to continue efforts on recovery, community inclusion, employment, and more independent living goals, even though we remain at risk to lose additional funding as a result of the state of the economy. The need for mental health services does not decrease in bad economic times. Any funding loss will be difficult and create significant challenges, but will not change our deep commitment to promoting the opportunity for meaningful lives in the community for persons with mental health conditions and developmental disabilities.

We hope our report will help you see what can be accomplished and that this may encourage additional thought and inquiry. Please feel free to contact us and/or visit our website, www.northernlakescmh.org, for more information.

Respectfully,

Greg Paiffhouse
Chief Executive Officer

Stress Takes its Toll: Tips to Protect Your Mental Health

Since the economy took a downturn, we have seen an increase in the number of people seeking services. With people locally and all over the nation losing their jobs and money from retirement and pensions, it's naturally depressing and it is stressful. It's hard for people to stay focused on the positives because there are so many negatives. However, there are some simple ways to enhance your happiness.

- **Exercise, maintain a healthy diet and a normal sleep schedule** – physical and mental health are connected.
- **Take charge of your immediate environment.** If you're troubled by media coverage and conversations about the worsening economy, change channels, turn the page or excuse yourself from the conversation.
- **Plan for the future as much as you can.** The more action you can take, the more in control you'll be and the less stressed you'll feel.
- **Try to take a long view.** Realize that it may have been bad yesterday, it may be bad today, but that things over time will get better.
- **Volunteer and look for ways to answer needs in your community.** Helping others will give you a sense of accomplishment and take your mind off your own worries.
- **Focus on positive aspects of your life.** Look to family and friends to support you.

If depression or anxiety begin to affect your relationships, work, sleep, or appetite, then you may need professional help. Contact Northern Lakes CMH at the numbers listed below.



Expect Recovery

Mental health issues are real, common and treatable

Did you know that mental illness is more common than heart disease, lung disease and cancer combined? We are fortunate to have grants to provide these initiatives **FREE** for anyone in the community who would like to participate. We invite you to join us!



Recovery Learning Community

A chance for the community to come together once monthly to learn about mental health.



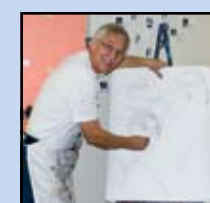
Pathways to Recovery

An in-depth, peer-led course on using your personal strengths in your recovery journey.



MI-PATH Chronic Disease Self-Management Program

A six-week course to help people learn how to self-manage their chronic diseases. Both mental and physical illnesses are included. We have nine facilitators trained to lead this class.



Art Groups

Meet every other week to learn a dynamic process to lead a less stressful life. No experience needed.

We can't change what comes at us, but we can change the way we react to it. If you can find good ways to respond to stress you will be better able to deal with adversity.

Connect with someone • Get out of the house • Do things for yourself • Eat healthy • Exercise • Relax, meditate or pray • Go for a walk • Get creative - knit, paint, journal, bake, play music • Break tasks down into little goals • Allow others to help you and look for ways you can help others • Remember natural mood lifters such as sunlight and foods high in antioxidants such as dark chocolate, vegetables and fruits • Turn negatives into positives • Try one of the free programs above • Seek support

What are CMH and PIHP?

Michigan's public mental health system has a long history of serving those in need. Here is how it is structured:

The Michigan Department of Community Health (MDCH) contracts with Community Mental Health (CMH) organizations to be the local community providers and/or managers of services and supports for persons with serious and persistent mental illness, developmental disabilities, and substance use disorders. In Michigan there are 46 CMHs.

The CMHs are grouped into eighteen regional Prepaid Inpatient Health Plans (PIHPs). Each PIHP is responsible for coordinating the mental health, developmental disability and substance use disorder services for people with Medicaid in their region. Some CMHs are under the authority of their local county government, while others exist as a separate entity referred to as a Mental Health Authority.

Northern Lakes CMH is a Mental Health Authority and also holds the contract with MDCH to be the PIHP for nine counties in Northwest Michigan. This regional PIHP entity is called the Northwest CMH Affiliation; it includes West Michigan CMH System.

Reinvesting in the Community

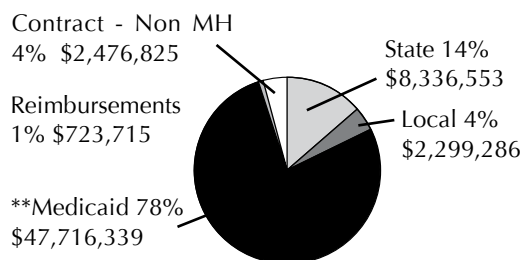
In our six counties, Northern Lakes CMH served during Fiscal Year 2008 (10/1/07-9/30/08):

- 1,036Persons with Developmental Disabilities
- 3,640 Adults with Mental Illness
- 1,094Children with Serious Emotional Disturbance
- 1,788Individuals in Crisis face-to-face
- 10,000+ ..People in the Community with education and prevention programs

People Employed by Northern Lakes CMH in FY 08..... 305

Revenues \$61,552,718

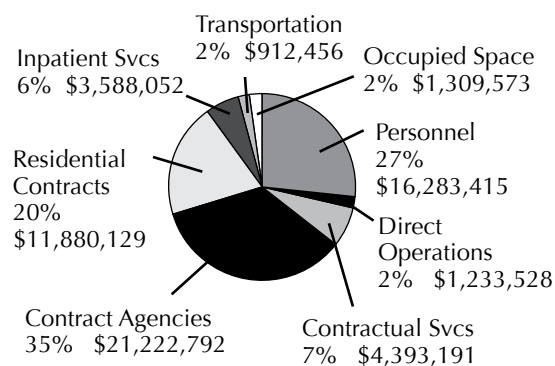
Northwest CMH Affiliation (9-County)



**Of the total Medicaid funding, \$13,188,094 went to West Michigan CMH System and \$739,197 to Northern Michigan Substance Abuse Services.

Expenditures \$60,823,136

Northwest CMH Affiliation (9-County)

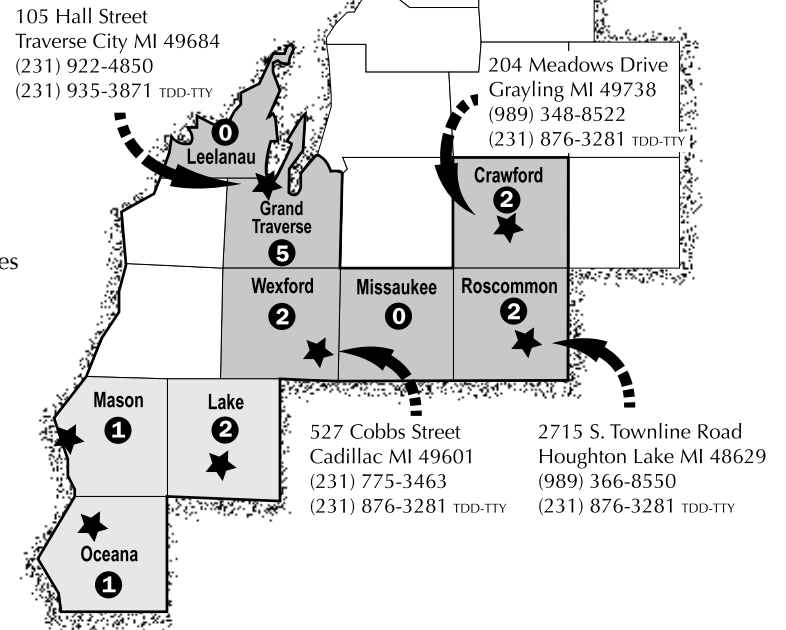


- ★ CMH Office
- Number of Substance Abuse Treatment Offices

Need assistance? For free interpretive services and other general inquiries, please call Customer Services at 800.337.8598 Monday through Friday, 8:00 a.m. to 5:00 p.m. TTY 231.935.3871 or 231.876.3281.

OUR PIHP AREA OF RESPONSIBILITY

- Northern Lakes CMH Authority
- West Michigan CMH System



Accessing Services

When you contact us you can expect prompt answers to your questions about our services and eligibility requirements. If you do not meet eligibility requirements as outlined in our contracts with the Michigan Department of Community Health, we will assist you with referrals to other service providers.

A qualified Mental Health Professional will complete a telephone screening when you call to request services and, if you qualify, will arrange for a face-to-face interview at a time and location convenient for you. (Emergencies will be promptly addressed by professional staff in one of our local office locations.) After your confidential interview we will review your concerns and findings with you and help you decide on an appropriate course of care.

If you qualify and are interested in ongoing behavioral health services, we will link you to the programs/services best suited to your needs. In most cases we will arrange your first appointment within 14 days. We will also answer questions about your benefits and costs for services. We coordinate care with your doctor and your health plan to make sure the services you receive are efficient and effective.

Range of Services

Northern Lakes CMH provides and manages a wide range of services for individuals with developmental disabilities, adults with mental illness, and children with severe emotional disorders. A complete list of services may be found at www.northernlakescmh.org and includes:

- Assertive Community Treatment (ACT)
- Assessment & Evaluation
- Behavioral Management Review
- Clubhouse Programs
- Community Inpatient Services
- Community Living Supports
- Crisis Intervention/Emergency
- Crisis Residential Services
- Enhanced Medical Equipment/Supplies
- Environmental Modifications
- Extended Observation Beds
- Family Skills Development/Training
- Fiscal Intermediary Services
- Health Services
- Home Based Services
- Housing Assistance
- Medication Administration/Review
- Mental Health Therapy and Counseling
- Nursing Home Mental Health Monitoring
- Occupational and Physical Therapy
- Partial Hospitalization Services
- Peer-Delivered or Peer-Operated Services
- Personal Care in Specialized Residential Settings
- Personal Emergency Response System
- Prevocational Services
- Private Duty Nursing
- Respite Care Services
- Skill-Building Assistance
- Speech and Language Therapy
- State Hospital/ICF/MR
- Supported/Integrated Employment
- Supports Coordination
- Transportation
- Treatment Planning
- Wrap-around Services for Children and Adolescents

Northern Lakes CMH also manages an array of substance abuse services through a nine-county contract with Northern Michigan Substance Abuse Services (NMSAS). To access substance abuse services, call (800) 686-0749 or visit <https://www.nmsas.net>.

Board of Directors

The Board acts as the informed agent of the public and is responsible for ensuring appropriate organizational performance. To promote excellence in governance, the Board establishes an annual activities workplan which includes educational events, study sessions, stakeholder meetings, presentations by experts in relevant fields, and other enriching activities that are designed to provide Board members with the greatest possible insight into Board governance policy options. Topic examples include Integration of Health Care, Recovery, Anti-Stigma, Post Traumatic Stress Disorder, Michigan Prisoner ReEntry Initiative, Children's Mental Health, Mental Health Parity, Poverty, NLCMH Services, Federal and State Legislation, and Policy Governance. The Board is annually updated or receives training in the following program areas: Finance and Compliance, Compliance and Monitoring, Person Centered Planning and Self-Determination, and Recipient Rights.

CURRENT BOARD MEMBERS – Crawford County: Jack Mahank, Dave Stephenson. Grand Traverse County: Herb Lemcool, Melissa Fournier, John P. McLaughlin, Mary Lee Pakieser, Frank Tosiello, Armandina "Nina" Zamora. Leelanau County - William Bunek, Helen Stimson. Missaukee County: Juanita Farr, Don Halvorsen. Roscommon County: Bill Ancel, Al Cambridge. Wexford County: Les Barnes, Phyllis Howard.

RECENT BOARD MEMBER – Grand Traverse County: Richard Crowe; Roscommon County: Peggy Rose.

What Consumers Say

Fifty people have come forward to share details of their recovery stories in order to help others. Their stories are intensely personal and inspiring. See the "Recovery Stories" on our Virtual Recovery Center blog at northernlakescmh.org.

Other recent comments:



I can't tell you what the Pathways To Recovery classes have done for my life. I've changed my whole focus and attitude toward pretty much everything. I dealt with bipolar disorder for 15 years downstate but I never heard the word recovery until I got to CMH here. The Pathways classes were about grabbing hold of some ideals and tools and then developing a very substantial recovery for myself. I accept the fact of who I am and what I have to deal with and I have set positive goals for myself. I just take things in stride now. I am positive.



Our family was involved in the first Multi-Family group at CMH three years ago. Our son was beginning his recovery from his second breakdown and though we had some reservations about sharing our "mental illness" story with others, we decided it was a healthy and safe place for him to come to terms with his illness. Right away we found another family who was also recovering and so we all began to open up to each other with our fears, frustrations and realities of schizophrenia. The young men took time to become more comfortable with each other and listened and learned from the other parents and supporters. Our son slowly realized he was not alone in his sadness and confusion and, throughout the next two years, gained physical, mental and emotional strength. He has just completed his Liberal Arts Associates Degree and is continuing his education towards a Bachelor's Degree. He has been able to maintain employment as a cook in several fine dining restaurants, moved out of state and is in a loving, healthy relationship with a beautiful young woman. His recovery has not been a piece of cake. He must be careful of his stress level and works hard to keep physically active and is faithful in taking his medication. We are so proud of our son for his hard work in accepting and learning about his illness. We are also very grateful for having been part of the Multi-Family group. It was a blessing for all involved.



I truly was at a point with my illness that I may not have made it without my Peer Support Specialist, Stacey. She has gone above and beyond my wildest expectations and kept me out of the hospital, in my home, and moving towards getting well. I don't know what I would have done without her.



I learned from my education in mathematics that you can touch a person's intelligence, but when you can touch their heart that's the thing that makes change. My goal is to help someone else to recover from mental illness and anything I can do to help, that's what I want to do. I'm finding that giving presentations with love, sharing my personal knowledge and direct experiences, helps change public opinion and hopefully helps someone find joy in the present moment and hope for the future.



Our family and seven-year-old son have learned a lot through the PMTO (Parent Management Training-Oregon model) program. We have better relationships as a result and our son has been able to be taken off his medications and continues to improve his behavior. We are now able to move forward on our own.



I love the Fun Nights that my case manager organizes once a month on Friday nights. The bingo nights are fun and the dances are my favorite. I love the flashing lights, the music, and the food. I live in a group home and it's really fun to be able to get out of the house and do some different things with my friends.



I am glad that I am my own guardian now, and I appreciate everyone who helped me get here. I love the group at my new home and making my own decisions, and I really like my teachers and my case workers. Life is good!

What Staff Say

I am proud knowing that we as an agency are improving or helping to improve the lives of consumers of the agency. I am proud when I see a consumer smile when I greet them. I am proud when a consumer says they feel good and "thank you" for just being there for them. I am proud when a consumer looks forward to returning to see us again, when someone says that they have heard good things about us. I am proud of the hard work of many people.

I am proud to have helped a person progress first from Caro State Hospital to the most restrictive home we work with, then to semi-independent living, and finally to independent living in peer-supported housing. I am proud that he has gone from no high school credits to college. I am proud that he no longer needs me.

I am honored to have had the opportunity to support individuals with developmental disabilities who have a terminal illness to pass away peacefully in their own home with the assistance of hospice.

I am proud to work with people that believe in recovery and are eager to help and instill hope.

I am proud of our MI-Choice Medicaid Waiver program team, which has directly helped 150+ seniors with more services and placement out of nursing homes.

I am concerned that the demand for services will continue to outpace funding and put more pressure on me as a clinician and Northern Lakes CMH and our other providers as a system to do more and more with less and less. Sometimes I worry I won't be able to provide the time and attention required to the people who need me.

Results... one person at a time

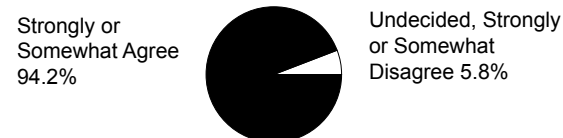
While each person's needs vary, everyone we serve has the same goal as people the world over: to have a happy life. By following our Mission – "To promote the behavioral health of our individuals, families, and communities through programs that promote recovery, build resilience, create opportunity, and improve quality of life" – we hope one day to achieve our Vision of: "Communities of informed, caring people living and working together." Below are our organizational ends which we hope are achieved for each person we serve:

- **Enhanced overall quality of life**
- **Children and families have rewarding family relationships**
- **Meaningful relationships** (circle of support)
- **A reduction in psychiatric symptoms**
- **Managing mood and substance use** (dual-focused recovery)
- **A safe living environment of your choice**
- **Meaningful and satisfying work**
- **Community membership, inclusion and participation**

What the Community Says

A recent telephone survey conducted by Northwestern Michigan College shows we have a very supportive community which believes treatment helps. However, we still have work to do to dispel the myth that people with mental illness are dangerous (last chart below).

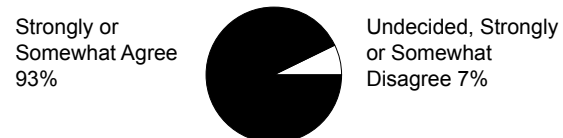
Medical and psychological treatments can help people with mental illness.



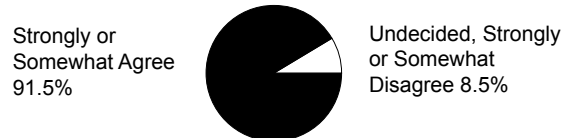
Children with serious emotional disturbance can be helped with treatment.



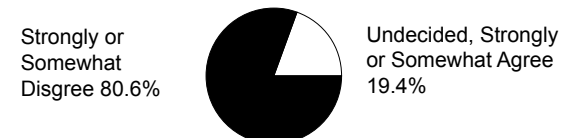
Health insurance plans should be required to provide equal coverage for people with mental illness and for those with physical illness.



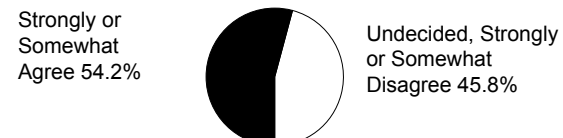
Treating people with a mental illness or developmental disability in their own community, instead of in an institution, is good.



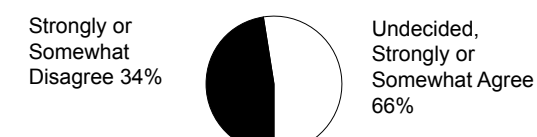
I would try to avoid a person with mental illness.



If I were a landlord, I would rent an apartment to a person with mental illness.



Persons with mental illness pose a risk to other people if they are not hospitalized.



2008 HIGHLIGHTS AND SPECIAL INITIATIVES



We're transforming our office spaces into places of hope and inspiration. Consumer artwork and recovery stories are motivating people to believe in recovery and realize their potential.



We were able to get Janssen Pharmaceutical's "Mindstorm" virtual reality device for a week last fall. This device simulates what it might be like to experience a hallucination. Trying it is powerful and helps increase understanding. Law enforcement and court personnel in Crawford and Roscommon Counties were able to experience it at their Sheriff's Offices. We also had it available at our fall art show for the public.



Our second annual *Art of Recovery: The Human Journey Show* at Traverse City's Inside Out Gallery had over 100 pieces of art; including the donation of the piece on the left by Frank Tosiello, a copy of Rembrandt's *A Woman Bathing In A Stream*. This donation raised \$510 toward art supplies for our free art groups which are open to the public. The show was a huge success and demonstrated that everyone recovers from something sometime and we're all in this journey together.



Many people participated in our Suicide Awareness Walk in Cadillac last fall. The event offered the opportunity for people to remember those they have lost and culminated in releasing doves and hanging ribbons of remembrance by the bridge near the Cadillac Rotary Pavillion.



At the same time we are being challenged with increased demand for services and decreased funding, we are fortunate to have received several grants to allow us to focus attention on some important initiatives.

Recovery for Adults with Mental Illness

Using adult mental health block grant funds, we formed a Recovery Council and four Recovery Learning Communities to focus on individual and system transformation based on the expectation that recovery is possible for everyone.

Through the work of these groups, we adopted our official definition of recovery, which is: **"Recovery is a personal journey of hope, purpose and growth. It is the process of setting our own directions in life. We accept the responsibilities of meeting challenges, using our own abilities, strength and determination."** Recovery does not mean a permanent "cure." It means that people can find ways to have a stable, productive, happy life with their mental illness.

One of the most important ingredients in a successful recovery is hope, and people who have "been there" and developed a substantial recovery are the best "hope givers" to those who are still struggling. In the past year, six people who have experienced a mental illness became Certified Peer Support Specialists, bringing the total number of peers working in our system to 20.

We have developed a series of classes and groups which are open to both people who use our services and the general public (see front page). The newest of these is the MI-PATH Chronic Disease Self-Management Program. First developed for diabetes, the program focuses on teaching ways people can self-manage their own chronic diseases, including mental illness. We have nine staff trained to be leaders of these groups through TIPDON, Northern Michigan's Diabetes Outreach Network.

We expanded our capacity to provide the Family Psychoeducation evidence-based practice with two staff members certified as statewide trainers and supervisors. This program convenes teams of families dealing with similar issues such as schizophrenia to learn and support each other over an extended period. The results of this program have been nothing short of phenomenal.

Family-Driven, Youth-Guided System of Care for Children with Serious Emotional Disturbance

We were awarded a Children's Mental Health Block Grant to plan a system of care for children with serious emotional disturbance (SED) in six counties. In a system of care, mental health, education, child welfare, juvenile justice, and other agencies work together to ensure that children with mental, emotional, and behavioral problems and their families have access to the services and supports they need to succeed. The goal is to support children and youth to help keep them at home and in school.

This year we are working with Patricia Miles, national expert on parent-professional partnerships and Systems of Care, to train on Family-Driven, Youth-Guided care, and specifically how families and professionals can work together in achieving the most effective outcomes for children with SED and their families. The work will continue throughout the rest of this year with small group trainings across our six counties.

Integrated Dual Disorders Treatment

Historically, treatment systems for substance abuse and mental illness have been separate: one needed to get his or her substance use issues under control before being treated for a mental illness, or vice versa. Now,

there is a recognition that both issues are most effectively treated at once. This year, 15 staff received training to become Dual Diagnosis Capable (DDC) and develop Dual Diagnosis Enhanced (DDE) competencies. Two staff were selected to be Motivational Interviewing trainers in a highly competitive process.

Evidence-Based Practices

In addition to the evidence-based practices mentioned above, Northern Lakes CMH provides other treatments proven by research to work, including Assertive Community Treatment, Dialectical Behavior Therapy, Cognitive Behavior Therapy, and Parent Management Training-Oregon Model.

Suicide Prevention

Northern Lakes CMH has been active in the statewide Suicide Prevention initiative. We have participated in "gatekeeper" and "train the trainer" trainings for those most likely to be in a position to help people thinking of suicide on how to assess and manage suicide risk, educating communities about warning signs, identifying ways to improve access to services for those with depression, and exploring models for follow-up intervention with family and significant others after a suicide. We sponsored a suicide awareness walk in Cadillac last fall which will be repeated this September, and are facilitating a support group for suicide survivors.

Homeless Prevention

Our Homeless Prevention Coordinator and two assistants use Projects for Assistance in Transition from Homelessness (PATH) grant funds to help people connect to appropriate housing and other resources. Some very limited dollars also help with security deposits and first month's rent. In addition, we have Supported Housing Programs in four of our six counties with Peer Specialists providing support. In Traverse City, the Foundation for Mental Health (FMH) works closely with Northern Lakes CMH to provide housing options for homeless individuals and their families that we serve. Additionally, FMH continues to plan and advocate for securing additional resources to expand the continuum of housing options available to our consumers. The partnership has resulted in many successful independent and/or supported independent living arrangements for Northern Lakes CMH consumers. We provide the support services to assist consumers in maintaining their own housing.

Anti-Stigma, Advocacy, Community Education

Anti-Stigma, advocacy, and community education all work in tandem to increase understanding of mental health and developmental disabilities issues among the general public, and provide people with an opportunity to give back to their community and be part of something greater than themselves. During May is Mental Health Month, we helped sixty consumers participate in the annual statewide Walk A Mile in My Shoes rally in Lansing. Our Consumer Advocacy Council also co-sponsored successful candidate forums which helped build better relationships with legislators and county commissioners. People are stepping up to share their experiences in public presentations, displays, and community education events as a means to shed light on what it means to live with a disability, explain the importance of treatment and support among lawmakers, and encourage people to seek help if they need it.



www.northernlakescmh.org