

**BRANCH COUNTY COMMUNITY  
MENTAL HEALTH SERVICES AUTHORITY  
(dba) Pines Behavioral Health  
FISCAL YEAR 2017  
ANNUAL REPORT TO THE COMMUNITY**



# Executive Summary

The Branch County Community Mental Health Authority (dba Pines Behavioral Health) is proud to provide high quality and cost efficient services to the residents of Branch County. Since 1974, Pines has been providing services and supports to adults with a severe mental illness, children with serious emotional disturbances, individuals with an intellectual/developmental disability (including autism), and persons with a substance use disorder.

This annual report serves to provide the highlights of Pines Behavioral Health during fiscal year 2017 as we learned to manage a series of challenges that met our community. These included the growth of children's needs that exceeded inpatient availability here and across the state. Also we saw, a continued increase in substance use disorders contributing to the overcrowding of our local jail, and on occasion death. Our unwavering perseverance in striving to meet these challenges despite competing threats to the mental health system, is made possible through the support of our Board and Staff, the voices of those we serve, the partnerships with community agencies and leaders, and the many advocates in our county assuring that we provide the best care for those most in need.

Toward that end, in Fiscal Year 2017, Pines Behavioral Health:

- Re-aligned staff positions to serve more children and persons with a substance use disorder.
- Increased our provider network to help meet the overwhelming need for inpatient care, autism services, and supportive residential settings.
- Maintained a local approach to care, with an emphasis on *community* despite the political and financial pressures to do otherwise.

## 2017 Operating Revenues

\$13,603,714

## 2017 Operating Expenses

\$13,544,909

\*As a result of the Authority Status, Branch County contributes a required match which is frozen at \$180,000, less than 2% of total revenue

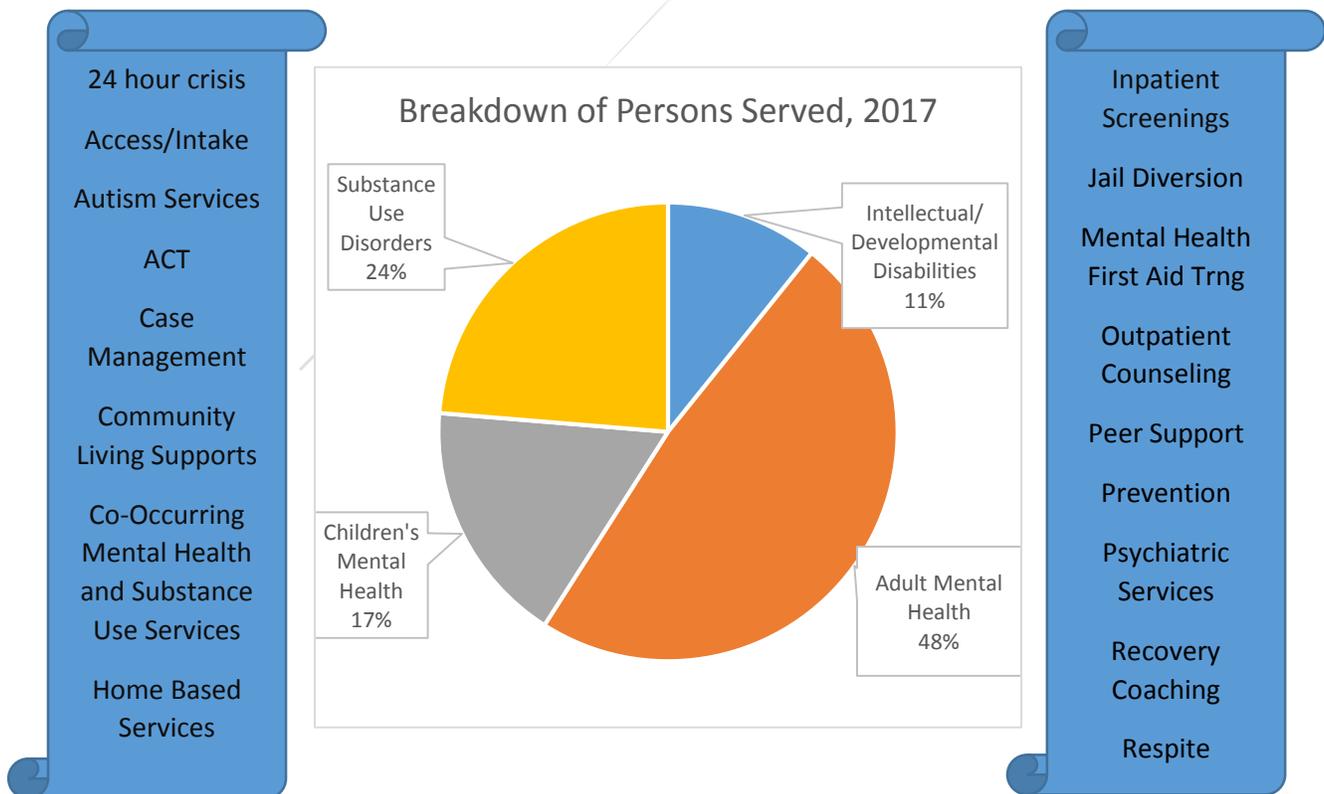
## Persons Served

	Adult Mental Health	Child Mental Health	Developmental Disability	Substance Use	Total
2017	1390	497	310	682	2879
2016	1487	428	222	591	2728
2015	1367	408	253	562	2590
2014	1553	406	277	426	2662
2013	1607	406	270	528	2811

# Pines Programs & Services

**Services for persons with a serious mental illness:** Serious mental illness is characterized by functional limitations and medical symptoms for a duration of 6 months or longer, negatively affecting a person's life in at least three different areas. A wide variety of services are available including case management to help the person connect to resources that will assist them with obtain their basic needs, as well as social support including help with employment, housing, budgeting, and decision making. Peer services to instill hope that recovery is and will be possible, as well as therapy to help with improved coping, symptom management, and skill building. Psychiatric services are also available to treat the medical nature of the symptoms.

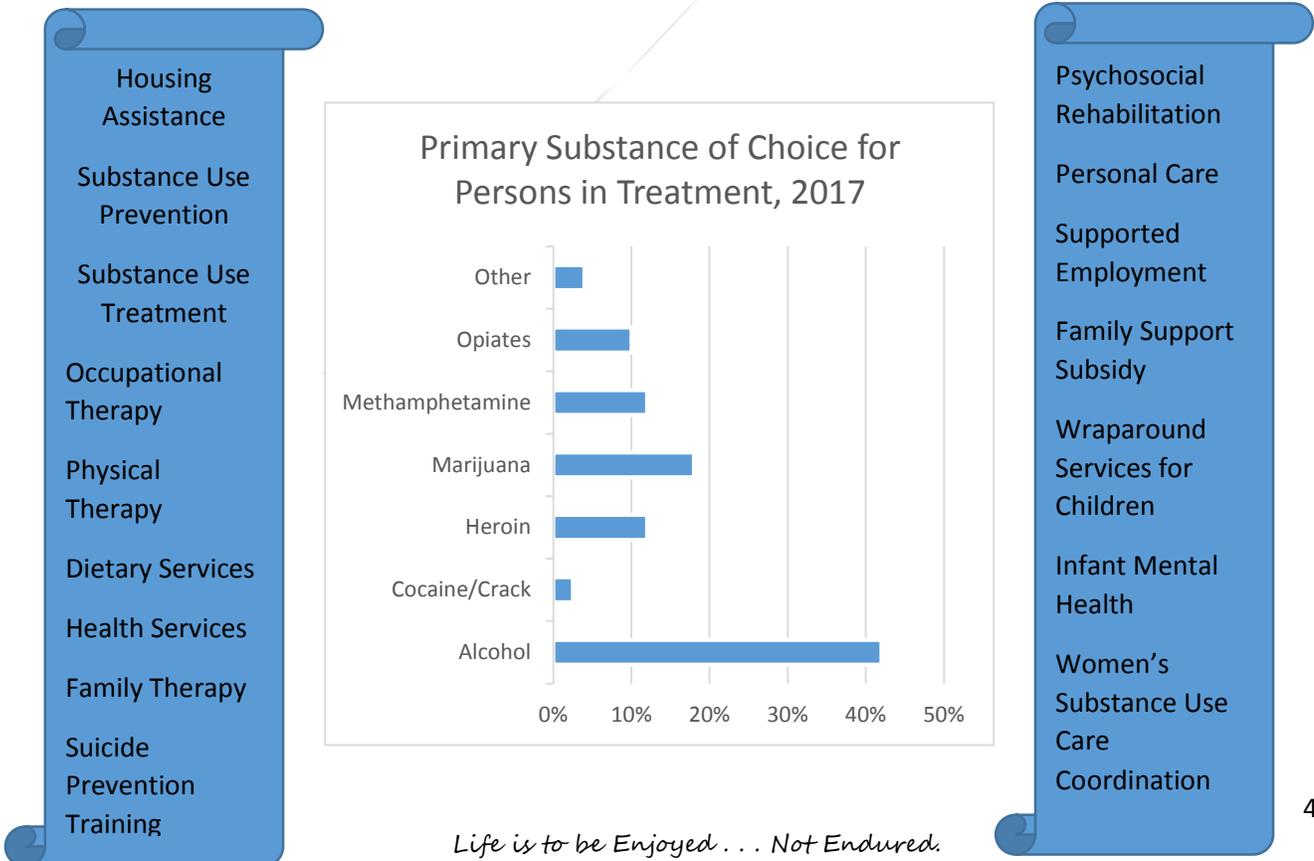
**Services for children with a serious emotional disturbance:** Serious emotional disturbances are characterized by behavioral, medical, or social concerns that affect a child or adolescent across multiple areas in life (home, school, and community), and persist for at least 6 months or longer. Case management services are available to children to assist the parents, as are traditional therapies such as individual or family counseling. Because symptoms in children are often displayed behaviorally, there are several intensive services available in the home including Home Based Services for children at risk of out of home placement, Wraparound to help coordinate multiple treatment providers, and Infant Mental Health when there is risk to the necessary bonding relationship between mother and child.



**Services for adults and children with Intellectual/Developmental Disabilities:** A

developmental disability is defined in Michigan as a physical and/or mental condition acquired before the age of 22 that is expected to last a lifetime. Persons with an intellectual or developmental disability often require specialty services such as health services, rehabilitation services, and assistance with their day to day living skills. The need for communication and social skills are also commonplace. Time outs for families and caregivers is also a much needed services. Case management services assist in connecting, acquiring, and monitoring the availability and provision of all of these specialty services.

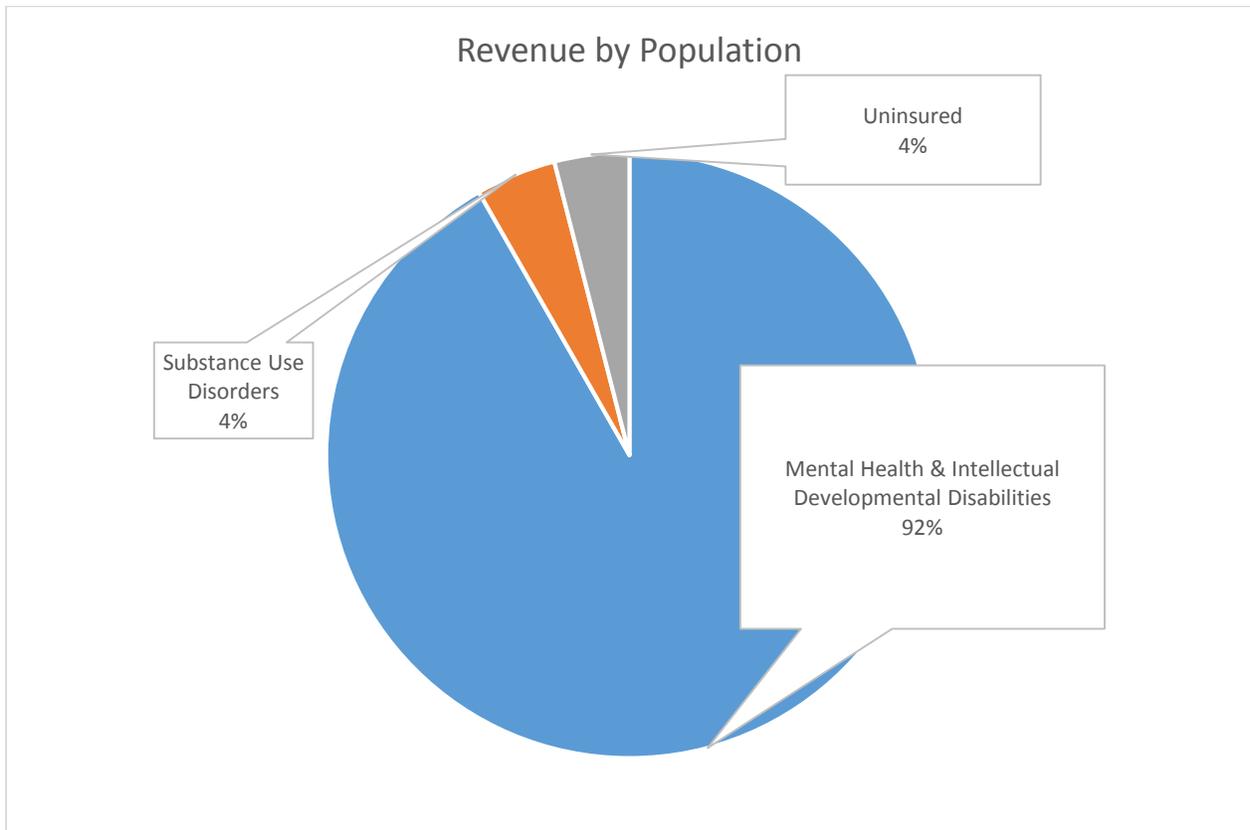
**Services for adults and adolescents with Substance Use Disorders:** Pines provides an array of evidenced based substance use services, including prevention, intensive and traditional outpatient, case management and recovery support. Staff are dually certified to provide a combination of mental health and substance use treatment interventions at the same time, so that the person does not have to have two different therapists, but instead receives integrated treatment. Group and individual services are provided at intensity levels to match a person’s severity of need, as well as their motivation for change. Additionally, support services are provided to assist with other life essentials affected by addiction such as housing, employment, school and social connections.



- Housing Assistance
- Substance Use Prevention
- Substance Use Treatment
- Occupational Therapy
- Physical Therapy
- Dietary Services
- Health Services
- Family Therapy
- Suicide Prevention
- Training

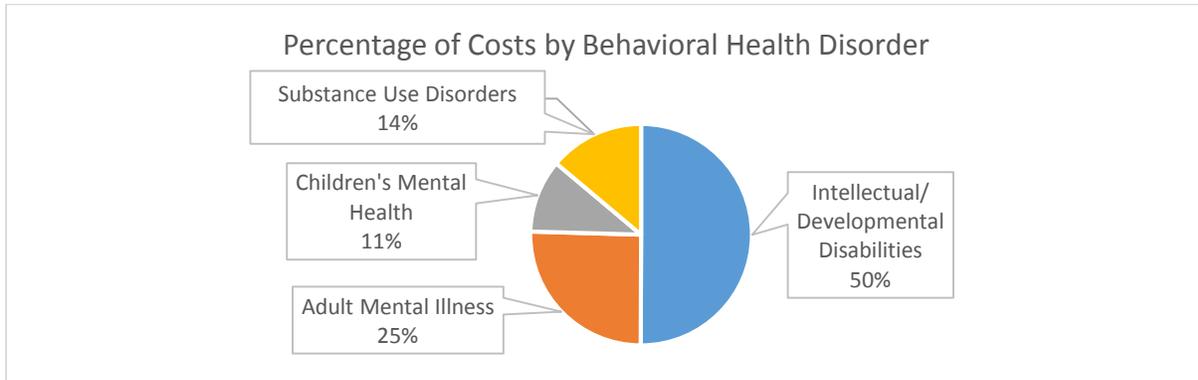
- Psychosocial Rehabilitation
- Personal Care
- Supported Employment
- Family Support Subsidy
- Wraparound Services for Children
- Infant Mental Health
- Women’s Substance Use Care
- Coordination

# Revenue

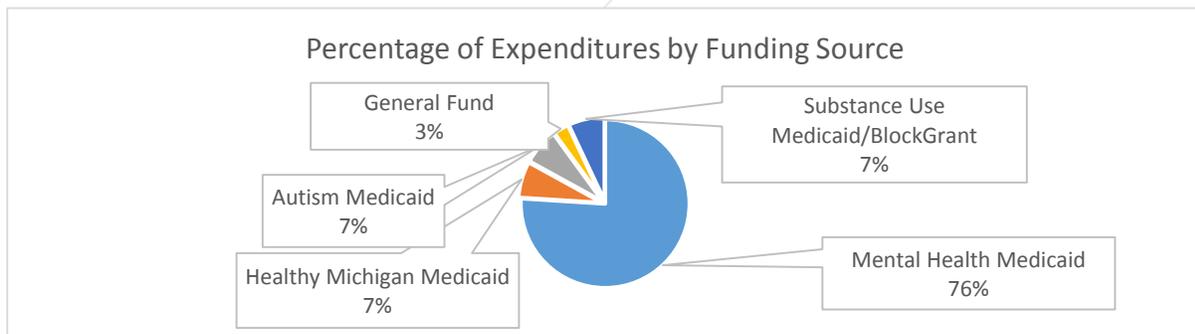


At least 92% of Pines revenue comes from Medicaid (combination of Medicaid and Healthy Michigan Plan). Only 4% comes from the state's general fund, which is intended to serve persons without Medicaid, or services not covered by Medicaid. Given the increased crisis needs throughout the community, the ability to use general fund for the underinsured has significantly decreased. It is important to note that despite growing substance use needs, the funding for such services remains less than 5% of the total revenue received by the State.

# Expenditures



Pines is required by the Michigan Mental Health Code to serve persons who are Seriously Mentally Ill, Children with Emotional Disturbances, Persons with Intellectual/Developmental Disability and Persons with Substance Use Disorders as priority populations. Services for persons with intellectual/development disabilities is more than half the budget given their complex conditions.

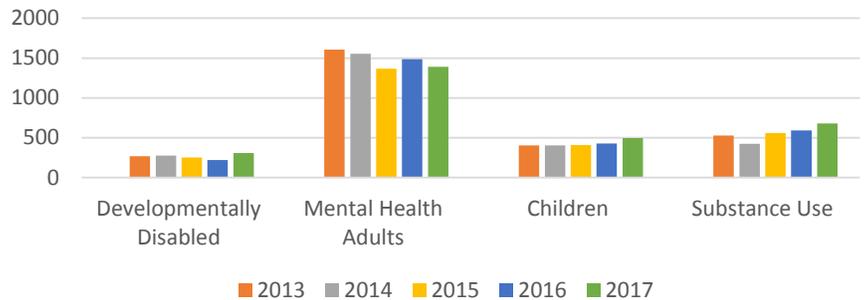


Medicaid (including Healthy Michigan Plan) is by far the largest funding source for public behavioral health services. Of note, is the increase in autism expenses. The increased need for autism services has tripled in a year's time which has been the trend across the state resulting in a provider shortage.

# Comparison Data

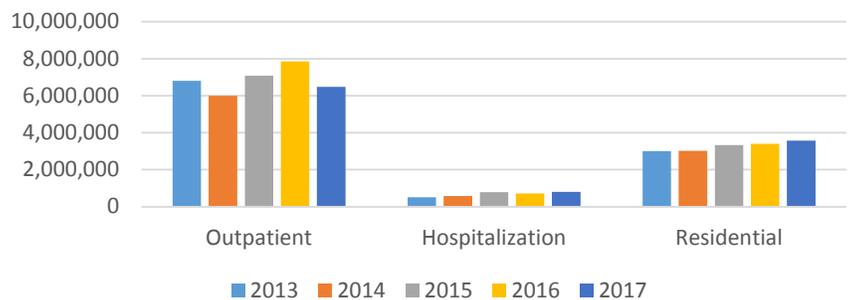
From 2013 to present, there has been a consistent increase in persons who have a substance use disorder, but 2017 also saw an increase in persons with developmental disabilities (autism) and children in crisis. Despite the high prevalence of substance use in Branch County and across the state, substance use funding is one of the lowest funding streams from which to provide services.

A Comparison of Populations Served over Time  
2013 - 2017



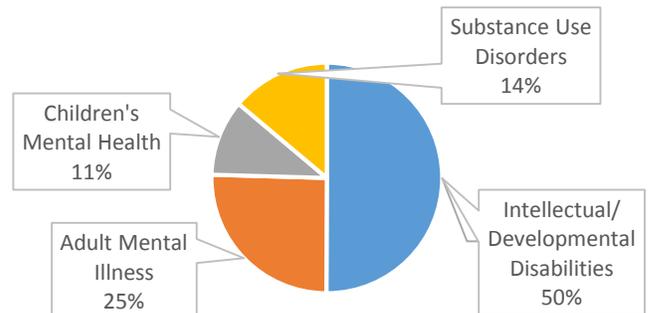
The amount of social support needs in addition to the acuity of symptoms have resulted in the need for high cost care such as intensive therapy, hospitalization, 24 hr. supervision in a residential setting, and community support to avoid relapses. The need for traditional outpatient services (office-based therapy) is being shifted to more community based supports to address acute symptoms.

Comparison of Costliest Services



Although the number of persons diagnosed with an intellectual/developmental disability are few, the complexity of needs and medical concerns require the need for costly services to provide the level of support needed. In comparison to last year, the costs associated with substance use treatment and children's mental health have increased.

Percentage of Costs by Behavioral Health Disorder



# Satisfaction / Outcome Results



*Life is to be Enjoyed . . . Not Endured.*

# Future Directions

Over the past several years, behavioral health has increasingly gained national attention in the importance to recognize early signs, provide timely access to care, and to build a set of services that are individualized to meet the diverse needs of citizens. Within the State of Michigan, legislators continue to press the State to look at ways to improve the mental health system in order to better integrate both mental health and physical health needs, focus on “social determinants” such as housing and employment, and increase efficiency through the use of technology. While the “how” to accomplish these goals are often debated, Pines has made the following accomplishments relative to the outcomes desired:

- **Increased children’s services** to include another full-time home based worker as well as Wraparound Coordinator services for children with intense needs.
- Provided psychiatric services through the use of **telemedicine** when physician resources were low.
- Hired a **behavioral specialist** to assist with persons, who as a result of aggressive or intrusive behaviors, find it difficult to live independently or experience positive social interactions with others.
- Provided **services within the jail setting** including group therapy, and linking a person to post-release services including employment and housing.
- Re-established the **student internship program** to enhance the skills of future mental health providers.

The intended transformation of the public behavioral health system will undoubtedly include challenges, but Pines is not afraid to walk into the unknown if the end goal is to improve what we can offer to the community. As a result, Pines will move ahead on its own as we implement the following initiatives:

- Add a **County Jail Diversion Coordinator** to provide Crisis Intervention Training (CIT) to local police officers, and work with the legal and correctional system to divert persons with a serious mental illness from incarceration when appropriate.
- Add **Medication Assisted Treatment (MAT)** for persons with an opiate use disorder, in response to the opiate crisis, through telemedicine with a Board Certified Addictionist.
- Increase focus on **trauma specific services**, especially for children and caregivers.
- Add emphasis on **community education** to improve the awareness, understanding and acceptance of mental illness, developmental disabilities and substance use disorders.

# Board of Directors & Leadership Team

## Board of Directors

Tom Schmelzer, Chair  
Audrey Strong, Vice-Chair  
Jon Houtz, Secretary  
Leonard Kolcz  
Ericka Kruszka  
Joe Scheid  
Maureen Hutchinson  
Bing Johnson  
Karen Hargreave  
Carrie Stout  
Stan Bushouse  
Karl Duda

## Leadership Team

Sue Germann, Chief Executive Officer  
Sue Enos, Executive Assistant  
Robbin Wilber, Chief Financial Officer  
Dr. Julianna M. Zei, Medical Director  
Jean Weber, MH Outpatient Director  
Penny Lawrence, Substance Use Director  
Tammy Winchell, I/DD Support Director  
Kim Molnar, MH Support Director  
Shelley Cizio, Network Mgr & Compliance  
Darren Moore, CHC Inpatient Director  
Doug Baker, Office Manager

This report is respectfully submitted by:

Sue Germann, MPA, LLP, CAADC, CCS-M, CPC  
Chief Executive Officer  
June 29, 2017