



ADULT MENTAL HEALTH SERVICES

SUMMARY - ADULTS WITH MENTAL ILLNESS

Adult Mental Health Services provides a wide variety of integrated services for adults and seniors with serious and persistent mental illness, who reside in Clinton, Eaton, or Ingham Counties. We serve approximately 1,852 persons a year with case management and psychiatric services. Much of the service provided is out of the office, in the individual's home, including initial assessments for shut-in seniors.

We provide 7,200 days of inpatient service, 4964 days of crisis residential service to 347 persons a year, and 49,237 days of residential service to 166 persons. Emergency Services sees about 4,000 persons a year, leading to about 1,200 hospitalizations. Our Crisis Response Team sees about 270 persons a year.

CRISIS SERVICES

Crisis Services is a 24 hour service providing crisis intervention, assessment and screening for voluntary and involuntary psychiatric hospitalization.

CASE MANAGEMENT / TEAMS I AND II

Multidisciplinary staff provide and coordinate a variety of counseling and case management services for recipients, including individual and group psychotherapy, counseling, psychoeducation, medication clinic, and assistance with housing and entitlements.

ASSERTIVE COMMUNITY TREATMENT (ACT)

Represents a non-traditional approach provided by a mobile treatment team of professionals to recipients of the program. In addition to medication monitoring and individual counseling, recipients are assisted with housing needs, money management, health care, shopping, and the use of leisure time.

OUTREACH CASE MANAGEMENT SERVICES

Multi disciplinary outreach team which provides a range of comprehensive outreach and case management services including housing and treatment for co-occurring disorders.

OLDER ADULT SERVICES: OUTREACH/CASE MANAGEMENT PROGRAM

The Older Adult component serves persons 60 years of age or older who are mentally ill. Included are the following services: Case management; counseling; outreach; day treatment/drop in center; residential; and medication clinic.

OLDER ADULT SERVICES: OBRA PROGRAM

OBRA provides nursing home mental health services (i.e., consultation, training, OBRA assessments, and counseling).

CHARTER HOUSE

Vocationally and psychosocially oriented day time program. Individuals are given opportunities and help to assume increased responsibility and self-direction, especially to prepare for the world of work. Participants begin by doing volunteer work in one of the three Charter House units (i.e., food service, member service, or clerical service), and then may advance to part-time work opportunities available through this component, enter vocational rehabilitation programs, or competitive employment. Vocational services are provided to others who can go directly into paid work situations. Case management is provided in the program to some members.

MASON RURAL OUTREACH PROGRAM

Provides comprehensive mental health services to seriously mentally ill out-county residents of Ingham County. This non-office program provides services to the client in their residence and home community. Clients meet individually and in groups to work on daily living skills, socialization, and normal integration into their community.

BRIDGES CRISIS UNIT

A 24-hour residential program which is also used as an alternative to hospitalization, as a bridge to the community, and as a means of brief, intensive crisis intervention.

RESIDENTIAL SERVICES

These programs provide a variety of services including room, board, personal care, supervision, and learning experiences in areas such as daily living skills, getting along with others, and using community resources. MAC, Arch, MLK, Orchard Court, and Supported Independence Program apartments are directly operated by CEI staff. Loretta Street, Coulson Court, Stoll and Eureka are operated under contract with CEI for the entire facility (type B contract). Greenville Acres, Homecrest Manor, Sunny Rest AFC, Simken, Strudwick, Divine Manor, Caring Hands, Country Creek, Elder Ridge, Good Shepherd, Graceland, Gracious I and II, Serenity Acres, and Willow AFC are operated under contract with CEI for individual beds only (type A contract).

COMMUNITY SERVICES FOR THE DEVELOPMENTALLY DISABLED

SUMMARY

Community Services for the Developmentally Disabled (CSDD) provides an array of local services and supports allowing consumers the opportunity to participate in the community and increase their level of independence. Services provided will help them grow, learn and change by meeting their unique needs. Together, staff plan for the consumer to become a full and equal citizen of their community.

LIFE CONSULTATION

Case managers assist the consumer in planning for their future using person centered planning processes. The consumer will be asked who they want to have at their planning meeting and where they want to meet. The case manager will help consumers identify their strengths, needs and personal choices. The case manager can help with:

- linking and coordinating with community resources
- monitoring supports
- accessing entitlements
- assistance with legal representation (guardianship)
- assistance with life transitions
- assistance in finding housing or residential placement
- arranging supports to live independently in the community
- arranging and coordinating supports and services through CMHB as well as other public and private agencies

Family Support Services help families maintain their member with a disability at home. Many families qualify for the family subsidy program which is a cash assistance program. In addition to support coordination, services may include assistance with the purchase of specialized equipment or services, family skill development, and respite services. Respite services include “family friend” through which the family chooses their own care provider and is reimbursed in part or whole for the cost of care. Other options include assistance with reimbursement of specialized in home staff care and short term placement in licensed children’s foster care home that serve children with severe disabilities. The children’s waiver program provides intensive in home supports for children with very severe disabilities. Enrollment is limited and is determined at a state level.

The Supported Independence Team can assist the consumer to live on their own or with supports in the community. The consumer will work with a team of case managers and mental health workers who assist in community living activities such as budgeting, medication management, personal and social development, accessing community services, getting around in the community, grocery shopping, managing medical appointments, hiring personal assistants and problem solving. The program encourages personal empowerment and decision making. Consultation about community housing is also available.

CLINICAL SERVICES

The Clinical Services component addresses the consumer's needs in the areas of nutrition, nursing, psychology, behavioral support, occupational therapy, speech and language therapy, and physical therapy in a variety of settings - home, work, or community program. At the consumer's request, clinicians provide in-depth assessments, participate in the development of person-centered plans, and monitor and adjust plans based on progress toward identified goals. Short-term consultation and direct services are also offered in specific areas when indicated. Staff can provide the consumer and their family with education and training about specific supports and treatments.

Nutrition

In all settings, the consumers are encouraged to make healthy food choices and establish a lifestyle of healthy habits. With consumer and staff input, nutritionists will plan a menu for regular and all modified diets and give assistance with implementation of safe food handling procedures. CEI offers individualized nutrition counseling for the consumer and their family for any special nutrition needs such as diabetes, swallowing problems and weight control. All nutrition plans are closely monitored.

Nursing

Staff will provide health assessments for the consumers, develop and monitor the consumer's plan and changing health care needs. Staff will consult and coordinate with physicians and psychiatrists when needed to assure that a consumer's health needs are adequately addressed. Staff also provide the consumer with health teaching and direct nursing services when ordered by physicians.

Speech and Language Pathology

Staff will provide the consumer with assessments in the areas of articulation, voice, fluency, language, augmentative communication, the Picture Exchange Communication System, swallow function, and hearing screenings. The consumer will be provided treatment and/or consultation for their speech and language needs. Consultation and inservice training is provided to staff, families, and others to assure that the consumer's communication needs are met.

Occupational Therapy

Staff will provide the consumer with an evaluation, treatment, training, and consultations according to the consumer's unique occupational therapy needs. Areas that may be addressed include sensory integration dysfunction, activities of daily living, job modification to meet specific physical challenges, mobility issues, and consultations with other professional staff to assure maximum functioning in all environments.

Psychology

Staff will provide the consumer with direct and consultative services in the areas of psychological and behavioral assessments, functional analysis of behaviors, and the development, implementation, and monitoring of behavior treatment plans. Staff also provide court ordered psychological evaluations for guardianship hearings.

TRANSITIONS

Transitions provides a variety of personal and vocational training experiences for the consumer, focusing on community inclusion. This service provides gradual steps of increased independence while emphasizing the consumer's rights and responsibilities in conjunction with identified skill acquisition needs.

Transitions operates two specialized adult day programs offering the consumer several choices including opportunities to promote personal growth, enhance social development, increase developmental skill acquisition, receive vocational training and participate in paid work experiences. A third program focuses exclusively on the consumer's community service, volunteer, academic, social, recreational and vocational community inclusion desires.

Additional work services are purchased under contract with Peckham Vocational Industries.

VOCATIONAL SERVICES

Job developers from Vocational Services will assist the consumer in locating employment in the community. Job coaches are available to be at the work site with the consumer to ensure a smooth transition into their new occupation. Services begin with an assessment of the consumer's interests, likes and dislikes to help guide the job developers in finding the best job that matches the consumer's interests and skills. Variables such as work site location, hours, and transportation availability are all considered when job options are explored.

Staff of Vocational Services will continue to provide the consumer follow-up and support, based on their needs. This assistance may range from occasionally checking in with the consumer, to additional job coaching.

There may be job placement services available to the consumer from other community agencies. CSDD has established partnerships with Michigan Rehabilitation Services, Michigan Commission for the Blind, and Peckham to ensure the consumer's services are well coordinated. This collaborative effort allows CEI staff to provide the consumer with the best services and placements available.

RESIDENTIAL SERVICES

There are a variety of residential programs to meet the consumer's needs, such as community living group homes providing 24-hour care, individual treatment and supports focused on enhancing domestic, personal care, community living, and leisure/recreational skills. Some of these homes are directly operated by CSDD, but the majority are operated under contract by private providers with monitoring and supervision provided by CSDD staff.

Several community living homes are specialized to meet the consumer's unique needs by being highly structured and employing specially trained employees to provide the consumer with intensive behavioral or medical supports.

Opportunities for the consumer to establish their own residence are provided in several ways. If the consumer lives in a supervised apartment, support staff will work with them providing group and individual training addressing meal preparation, home care, health care, interpersonal relationships, community awareness and safety. The consumer may choose to hire and supervise their support staff, or the consumer may have this service provided in conjunction with another provider. Supervision supports are provided as determined with the support team the consumer selects.



ADMINISTRATION AND CENTRALIZED SERVICES

ADMINISTRATION

Costs in this category include those for two types of administrative functions:

1. Community Mental Health Services Program (CMHSP): Those which represent costs associated with centralized administrative activities and functions serving all program elements in the management of the Community Mental Health Services Program, which serves the counties of Clinton, Eaton, and Ingham.

2. Prepaid Inpatient Health Plan (PIHP): Those which represent costs associated with the centralized administrative activities and functions serving all of the affiliates in the CMH Affiliatin of Mid-Michigan, which serves the counties of Benzie, Clinton, Eaton, Gratiot, Ingham, Ionia, Manistee, and Newaygo.

Costs include those associated with the Board of Directors; Executive Director; Medical Director; Director of Affiliation Operations; Finance Director; Information Services Director; Human Resources Director; and the Director of Quality, Customer Services and Recipient Rights and the staff associated with the departments.

CENTRAL ACCESS

This is the central access point for all persons seeking services at the Community Mental Health Authority, Clinton, Eaton, and Ingham Counties.

UTILIZATION MANAGEMENT

The Utilization Management Department applies standard program review criteria to actual service provided to ensure that consumers receive the "right service" for the "right cost" at the "right time." UM must match and balance consumer needs and services to assure efficiency, efficacy and excellence in consumer care. In addition to conducting reviews, UM monitors QI reports and data, participates in Medicaid audits and collaborates with hospital providers, Affiliates, the CMH Board Association and DCH as needed.



CMHAMM AFFILIATION

History

The CMH Affiliation of Mid-Michigan (CMHAMM) is made up of five CMHs, covering 8 counties, and has the responsibility for managing the Medicaid mental health, substance abuse, and developmental disability services for the 70,000 Medicaid lives in the region. The Affiliation, made up of the CMHs serving Gratiot, Ionia, Manistee, Benzie, Newaygo, Clinton, Eaton, and Ingham counties, was formally created in February 2002 to ensure that the members of the Affiliation, via joining together into an affiliation, would meet the size requirements of the Michigan Department of Community Health's (MDCH) AFP for consideration as the Medicaid Prepaid Health Plan (PHP) for the region.

While meeting the size requirements was the catalyst for the formation of the Affiliation, a much more aggressive and robust vision emerged and has driven the work of the Affiliation over the past 18 months.

The Affiliation Vision and Values

The Affiliation's vision and values are central to its formation and day-to-day operation. The Affiliation's formation, in fact, was driven by the similarity of values among the Affiliation members. The Affiliation exists to ensure and promote: Consumer choice and empowerment; High quality services and supports; Sound care management systems and practices; Local community-driven control and responsiveness; and Outcome and data based decision making.

The Affiliation Model

The Affiliation fulfills these values - core to its approach and operations - by capitalizing on the strengths of its members; strengths honed over three decades of community-based practice. The integration of a set of responsive, nimble, locally-based CMHs into an efficient Affiliation, utilizing best practices, is made possible through the use of a number of design features, listed below.

- X Locally-driven federation-style affiliation, with is virtually transparent to consumers and other stakeholders
- X Integrated care manager and provider (using a "smart provider" model)
- X An active Affiliation-wide Consumer Advisory Council
- X Locally-responsive Boards of Directors
- X Strategic and conscious use of centralization, standardization, and autonomy



COMPREHENSIVE SUBSTANCE ABUSE TREATMENT SERVICES

ADMINISTRATION

Supervision of all SAS, Corrections Mental Health and Jail Diversion Programs; budget responsibilities, maintenance of policy and procedure manuals for all programs, supervision of coordinators and supervisors, development of programs and securing funding.

TREATMENT: Outpatient

Outpatient treatment for clients who are looking for a drug free lifestyle. Outpatient treatment consists of both group and individual sessions. As the complexity of problems encountered by individuals in this population escalate, we have been able, with the support of MSSAC to develop an intensive case manager and a Homeless Outreach specialist to work to increase treatment outcomes and work in individual treatment planning. These programs are supported through Mid-South CA, (BSAS and Medicaid) Medicare, Private Insurance and self-pay.

CATS

This drug free outpatient program is for inmates at the Ingham County Jail, Mason, Michigan . The program runs individual sessions and group sessions for both men and women while incarcerated in jail. The program is structured through a cognitive behavioral approach to treatment. MI Department of Corrections contracts with CSATP to run a program in the Ingham County Jail for Parole violators in a 30 day program aimed at critical thinking issues and the impact of substance abuse in their daily lives.

METHADONE CLINIC

Methadone Clinic is responsible for the medical aspect as well as the clinical treatment aspect of those individuals placed on Methadone. Methadone is used for those persons with an opiate dependence who are 18 years of age or older and have had this dependence for longer than a year. Clients are followed medically by staff physicians trained in Methadone treatment and licensed by the Drug Enforcement Agency and the State of Michigan to dispense Methadone. Clients are followed clinically by a MHT according to guidelines set by the State of Michigan and followed by Mid South CA. They are subject to guidelines for treatment by the above agencies and work from a managed care process.

CLINTON COUNTY COUNSELING CENTER

Treatment: This is an outpatient, drug-free treatment that serves the Clinton County community. The MHT serve clients in both individual and group sessions at the counseling center and at the Clinton County Jail. MI Department of Corrections contracts with CSATP to run a program in the Clinton County Jail for Parole violators in a 30 day program aimed at critical thinking issues and the impact of substance abuse in their daily lives.

These programs are supported through Mid South CA as well as commercial insurance and self-pay. Student Assistance Programs are available to some schools in the Clinton County area. This is a one time screening assessment with referral for additional services for students who are identified as being at risk for use/abuse of AOD.

Prevention: This program was developed for dissemination of information to families and children about the effects of AOD in the community. There are multiple areas of service types: (1) Information

dissemination; (2) education; (3) alternatives to AOD; (4) problem identification and referral; (5) community based process; and (6) environmental issues in the community.

HOUSE OF COMMONS

HOC is a residential unit that is supported by the Office of Community Corrections, the Department of Corrections and the Mid South CA. Residents are referred by these two sources for up to a 90-day residential treatment program with a 90-day aftercare program for clients referred from the Office of Community Corrections. Residents are treated in a cognitive-behavioral approach to recovery using behavior modification, group and individual counseling treatment. Financial support is through multiple areas from SDA, Mid-South, OCC, DOC, and FIA. Currently, the program houses 40 beds.

House of Commons-DETOX UNIT

This clinical model for detoxification from alcohol and other drugs has six beds and is supported by a medical physician, Registered Nurse and residential technicians. The length of stay is from 3-5 days with referral for treatment to residential, intensive outpatient and outpatient at the end of treatment.

DEPARTMENT OF CORRECTIONS / OUTPATIENT

This is an outpatient program for individuals on parole through the MDOC in the tri-county area. These individuals are screened, assessed, and treated for AOD in a drug-free environment. Individual and group sessions are used to educate and work towards a drug-free lifestyle while on parole to prevent relapse and return to prison. This program is supported through a contract with the Department of Corrections.

SAS MEDICATIONS CLINIC/PSYCH SERVICES

This program is for individuals with co-occurring disorders: mild to moderate mental illness and an AOD diagnosis. Individuals are seen by a psychiatrist for medication evaluation and follow-through services. Individuals must be involved in treatment at SAS, Jolly Rd. This program is payed through MH dollars directed to SAS.

EMERGENCY SERVICES JAIL/ Jail Diversion

The county commissioners, along with representative sheriff departments in the tri-county and the Lansing Police Department, look to CMH-CEI for help with inmates with SMI and those with mild to moderate mental illness. Each program works with the specific county Sheriff Office in jail diversion who meet the criteria set by the state mental health code and supported by each county prosecutors office. We also work with individuals in jail/lockup with impending personal life crisis. Mental status / screening for suicidal ideation, as well as homicidal ideation, are staffed for issues of housing / treatment, and diversion. This is a 24-hour, 7 day per week program available to the three county jails, and a Friday night to Monday morning program with the Lansing Police Department.

CHILDREN'S SERVICES

INTENSIVE OUTPATIENT SERVICES

Locations: Ingham Counseling Center Eaton County Counseling Center
5303 South Cedar Street 551 Courthouse Drive, Suite 5
Lansing MI 48911-3800 Charlotte, Michigan 48813

Clinton County Counseling Center
1000 East Sturgis Street Suite 3
St. Johns MI 48879

Population Served: Children ages 2 through 18; residents of the tri-county area.

Purpose: To provide outpatient counseling to children, adolescents and their families who are experiencing disruptions in their functioning within the home, school, and/or community.

Services: Strength based, solution oriented approaches are utilized in an office based setting to develop family-centered plans that support and enhance the family's functioning and to build on their strengths and problem solving capabilities. Intervention generally focuses on the entire family, utilizing a family therapy approach with individual and/or group therapy as needed and available. In addition, for those with more intense needs, also available are referrals for psychiatric consultation, parenting or other groups, family support workers and respite care/activities, as well as consultations with schools, court, FIA and other involved agencies..

FAMILY GUIDANCE SERVICE

Location: Outreach to Clinton, Eaton, and Ingham Counties

Population Served: Children and adolescents with serious emotional and/or behavioral disturbance, who are at risk for out-of-home placement, and their families.

Purpose: Family Guidance Service provides a wide array of supports designed to maintain a child with severe emotional or behavioral problems within their home and community. Emphasis is placed upon family-centered planning and identifying the family's goals for service, utilizing their strengths to facilitate their child's adjustment.

Services: Driven by the changing needs of the family, a variety of intensive home- and community-based supports are available, including: intensive home- and community-based individual, family, and group psychotherapy; case management and collaboration with community partners; psychiatric and psychiatric nursing services; children's emergency

services; behavior management consultation; parent training and support (Love and Logic®); transitional youth services; social/recreational services; and therapeutic respite services (family support workers, overnight respite foster care, planned residential respite, crisis residential placement). Family Guidance Service also collaborates with courts and schools to identify youth involved with or at risk for involvement with the juvenile justice system who have mental health or substance abuse problems, and to refer them to appropriate community resources for services.

PARENT INFANT PROGRAM

Location: Outreach in the three counties

Population Served: The Parent-Infant Program (PIP) serves families throughout the tri-county area who have a child under the age of three or who are expecting a baby. To be eligible for services through PIP, the primary referral concern must center around the parent-child attachment/relationship and, in addition, at least one of the following criteria must apply:

- 1) the parent or child is experiencing psychiatric or emotional distress;
- 2) the family has difficulty with daily living skills or social/interpersonal functioning which adversely affect their ability to attend to the child's social, emotional, or developmental needs;
- 3) there is risk of abuse or neglect of the child or, if the child has been removed by the legal system, there is a plan for reunification;
- 4) the child has medical problems, disabilities, or developmental delays which are causing significant distress in the family system.

Purpose: The Parent-Infant Program provides home-based assessment and interventions to help families meet their infant's emotional and developmental needs.

Services: Assessment and intervention are provided in the home or, when appropriate, at a location in the community. Interventions are strength based and include parent-infant therapy; psychiatric evaluation and consultation; referral to and consultation with community resources; parent skill training; stress management groups; and crisis resolution.