

MHIA
Mental Health America
of Dutchess County

2015 ANNUAL REPORT

Bringing Wellness Home



A Message from our Executive Director

Dear friends of Mental Health America of Dutchess County,

The year 2015 saw continued massive changes to our system of care, some positive and some not so positive. It is concerning that the safety net that once caught our most vulnerable mental health clients is slowly being stripped away. State hospital beds have been reduced and the ones left are nearly impossible for people who are in need of longer term psychiatric care to access. Inpatient hospital beds are becoming harder to access. Access to timely psychiatric interventions is not as available as in the past. This is no fault of the local mental health providers, as too often their hands are tied by the regulations handed down from the State or the Federal Government. These regulations, coupled with the shrinking pool of psychiatrists, make it impossible for clinics to offer timely psychiatric consultation when someone is in stage 1 or 2 of their disease. This leads to a delay in treatment and potential for Stage 4 of their disease. In stage 4, the recovery time is longer and tragic outcomes, such as jail or inpatient care, are required.

We are moving towards a system of care that hopes to greatly reduce the number of people who need to present themselves to the emergency room or who ultimately need inpatient care. Those goals have been identified by the state and there are payments associated with achieving those goals. Unfortunately, while we as a system are working toward those goals, we are doing so before the outpatient supports are bolstered to accommodate the interventions people need.

Thankfully our county has taken steps to add funding for some interventions we all see as lacking yet necessary. The new recovery center, set to open in November 2016, is a perfect example. Our local 9.39 hospital has provided funding to extend the reach of the mobile crisis team to 24/7 and our County Executive has embraced CIT training for all police officers in this county. These are great steps; however, these are steps taken by our county and not interventions that have been written into the requirements of New York State or the Federal Government. It is time for them to step up and be part of the solution.

I do however have hope. I have hope we will see an overhaul of the way this state addresses medical and mental health issues. I have hope that there will be regulatory relief in the way the state provides access and ongoing care and I have hope that the intervention, once known as Targeted Case Management, is bolstered and revered as it should be.

MHA of Dutchess is proud to work with strong IPA partners throughout the region, CBHS and CBHcare. Together, we provide the types of services that will support the individual and make this transformation successful. So while we, as the providers of care management, family support, CASA, homeless services and PROS, see firsthand this terrible gap that is opening during this transformation, we also know that sometime in the near future the regulatory agencies and the designers of a new and improved system of care will finally hear what we have been saying for three years. Stop taking the safety net away and start funding a much higher level of community support to the people in our community that so desperately need the interventions and services MHA provides.

Thank you,

Andrew O'Grady, LCSW-R

CARING FOR OUR COMMUNITY

Lisa Connolly, MA, Psy.D., Division
Director, Adult Services



In 2015

- Care management served 2,774 individuals, including 24,576 face-to-face visits.
- Housing services provided homes to 16 individuals.
- The Living Room was visited over 25,000 times and 667 people received services.
- Beacon PROS provided 28,278 units of services to 121 individuals.

Bringing wellness home

For the past 6 years we have hosted an Art Show at the Mid-Hudson Heritage Center at 317 Main Street in Poughkeepsie. Participants in our programs at MHA have their art on exhibit through the month of May. The experience can be life-changing and the show has helped our clients build confidence to explore their talents and reach their potential.

Adult Services. Dr. Lisa Connolly, Division Director

Dr. Connolly oversees the departments below assuring that MHADC is strategically positioned to provide the best care possible to our adult services clients, and that we are successfully meeting the needs of the people in our community. Within the Care Management Department falls our Supportive Housing Program, as well as Generic and Health Home Care Management.

Care Management. Mike Napolitano, Department Manager

Our growing staff of 65 care managers and support staff serve people with severe and persistent mental illness, as well as the chronically medically ill, and people with substance abuse issues. We help clients maintain their housing, find satisfying work, increase their social and recreational activities, and set a variety of personal goals. We coordinate with virtually every person in our clients' lives including families, psychiatrists, therapists, advocates, primary medical doctors, landlords, and parole or probation officers, legal aid, and specialists.

Mel's Place: The Living Room. Vernae Johnson, Program Manager
Mel's Place, also known as The Living Room, provides a safe haven, hot food, showers, and more to individuals and families who are homeless or at-risk of becoming homeless and struggle with mental health and/or substance abuse. Staff members offer support and referrals for housing, employment, help with addiction, and health benefits including weekly visits from representatives of the Veteran's Administration.

Beacon Wellness PROS. Kristina Hazleton, LMSW, Team Leader

Personalized Recovery Oriented Services is a comprehensive recovery-oriented program for individuals with severe and persistent mental illness. Support and rehabilitation aim to improve functioning, reduce the need for inpatient and emergency services and contact with the criminal justice system, increase employment, promote education, and secure preferred housing.

EDUCATING OUR COMMUNITY

Janet Caruso, M.S.L.S., Director,
Community Education



In 2015

- Kids on the Block taught 406 children about bullying, obesity, substance abuse, and more.
- Our library had 818 visitors.
- Our information and referral service responded to 602 calls.
- 3,931 people attended MHADC's classes, workshops, training sessions, and conferences.
- 23 students participated in Supported Education.

Bringing wellness home

We are pleased to provide free access to our library to the public and our participants. The library continues to serve more and more people each year as word of mouth has spread. Not only do people get access to great information but the staff at MHA are always willing and able to help out and enhance their visit.

Kids on the Block

Using nearly life-size puppets, Kids on the Block educates and entertains young children, stimulating communication between the audience and puppets. Programs on the following topics are available free to schools and youth groups: bullies and school safety, childhood obesity, multiculturalism, and learning disabilities.

Library

Community members can use a computer, read journals, borrow books, and browse the reference collection in the Library at Mansion Street and visit us online to browse the collection and order titles to pick up.

Information and Referral

With a phone call or a visit to our website, people seeking help or information are connected to a variety of resources including a private referral list of Dutchess County psychiatrists, psychologists, and social workers. We also participate in health fairs and hold depression screenings for adults.

Supported Education

Supported Education serves students whose post-secondary education has been interrupted or intermittent as a result of a disability. Ongoing support services are designed to help the student succeed. This is a cooperative program of MHADC, Dutchess Community College, and New York State's ACCES-VR.

Classes and Workshops

MHA routinely offers: How to Talk So Kids & Teens Will Listen, Your Defiant Child, Men Get Depression, P.E.A.C.E., and Take the Journey, as well as one-time workshops for the public.

STRENGTHENING FAMILIES

Lydia Edelhaus, MA, Ph.D.,
Director, Family Support and
Advocacy Services



In 2015 we served over 1,500 people including...

- 258 people in Family Support
- 121 parents and family members with psychiatric disabilities
- 152 children, youth, and young adults in Respite.
- 1313 people in Adult Advocacy
- 25 scholarships awarded to children with SED for summer camps
- 38 people in Compeer
- 27 children via Court-Appointed Special Advocates

Family Support and Advocacy Services helps families where one or more members has a mental illness, including families of adults who continue to live with parents or other family members. Stressing strengths, rather than illness, and emphasizing family involvement, we often collaborate with other community groups to provide skill-building, peer support, education, empowerment, advocacy, and opportunities for social interaction.

Mental Health Family Support Programs

Family Support offers peer advocacy and help to parents and caregivers of children with serious emotional disorders and other special mental health needs. Programs and services include: HOPE for Families, peer support groups, advocacy, and Medicaid-Waiver Family Support. The latter is provided through the New York State Office of Mental Health. MHADC also provides these services for families with children in residential treatment facilities.

Staff members work with parents to decrease their sense of isolation, help them access community and regional supports, and help them meet self-directed goals. In addition, to improve family relations and educate and support the siblings of children with serious emotional disorders (SED), MHADC offers two age-specific groups through our Sibling Support Program. These educational and recreational groups use an evidence-based curriculum to help children better understand their siblings who have SED while enjoying special fun activities for themselves.



Court-Appointed Special Advocates

CASA volunteers are trained citizens who advocate for children at risk for foster care placement and monitor foster care cases involving abuse or neglect. The aim is to ensure that children in foster homes are well treated and that their cases progress through the system promptly. MHADC's CASA is part of a nationwide network that sets standards for quality and performance, and a state organization that provides support and pass-through funds when available. Dutchess County Family Court judges speak publicly about the value of CASA and the importance of maintaining its funding.

Compeer

Compeer pairs adults with community volunteers for weekly activities and companionship. There are social events for these teams, those on our waiting list, volunteers, and advisors. Those on the waiting list also receive a weekly phone call from Compeer's Coordinator. Volunteers are needed and receive training designed to help ease isolation, build trust, and offer support.

Adult Advocacy

MHADC's Adult Advocacy Program has expanded from providing information and advocacy to offering peer support groups. We also have added a family support component because we heard from so many families who needed help finding resources for 18-25-year-old adult children who had "graduated" from the children's mental health system and were having difficulty engaging the adult system or had never been involved in any mental health program at all.

Programs for Parents with Psychiatric Disabilities

EMERGE uses evidence-based curricula to support, advocate, and educate, and to provide parenting skills to help achieve self-directed goals. Parents learn skills and strategies from several evidence-based curricula to prepare their families for disruptions that may arise from their illness. MHADC also offers peer support groups, socialization activities, and advocacy.

Respite Programs

MHADC's Respite Programs offer a wide array of services for families with children who have serious emotional disorders (SED). Although technically respite services are for parents, the primary interaction occurs between trained respite workers and children through individual excursions and group recreation that provide parents with a break. Individual Respite also serves families involved in New York State's Bridges to Health Program and Office of Mental Health Waiver Programs. MHADC also provides summer camp scholarships for children with SED.

Teen Challenge

Teen Challenge is one of two transition programs for young people preparing for life after high school. Teen Challenge offers a curriculum-based, skill-building, support group for 14-19-year-olds with SED. Eligible youth meet in dynamic weekly groups to work through evidence-based life skills curricula. They also perform regular community service activities and enjoy monthly recreational activities. The goal is to prepare them for life as young adults and to integrate them into their communities.

Young Adult Transition Program

Young adults, aged 18-25, with a mental illness, are offered a rich program of weekly life skills training, including wellness self-management and job skills. Participants can also take part in community service, internships, and develop affiliations in the business and retail community. The Young Adult Program was funded in 2013 by the Dyson Foundation. The program has been successful and received grants and funding from additional sources to continue through 2016.

ADMINISTRATIVE SERVICES

Jennifer Nelson, Director of Finance and Human Resources



The Administrative Department continues to work toward an effective billing model with the upcoming transition to Health Home billing. Our next Electronic Health Record System is a major part of this process and promises to provide all necessary information to us and to the Health Homes with which we contract. We can confidently say that our Health Home “report card” is excellent.

As a department we are increasing the size of our staff to take on the challenges of being an \$8 million and growing agency. We have comfortably adjusted to our new payroll software ADP and our new bi-weekly pay schedule. As each year brings more growth and change, our processes are being strengthened.

The mental health bell: *Cast from the shackles which bound them, this bell shall ring out hope for the mentally ill and victory over mental illness.*

In 1950, the National Mental Health Association (now Mental Health America) chose a bell as its symbol. The association’s leaders had worked in state mental hospitals during World War II. Shocked at the treatment they saw—including patients chained to walls—they vowed to improve the lives of all who suffered from mental illness.



Volunteers collected metal restraints from hundreds of hospitals across the country. They shipped them to the McShane Bell Foundry where they were dropped into a crucible and cast into a 300-pound bell. The 1953 photo at left shows Maryland Governor Theodore McKeldin and Mrs. A. Felix DuPont at the foundry.

FINANCIAL REPORT

Program Highlights

Mel's Place utilizes every resource available to help people stay off the streets and get them back on their feet.

CASA helps children in the foster care court system and it is almost entirely volunteer driven. These volunteers perform amazing deeds, representing children who do not have their own adult advocate in court.

MHA's supported education program benefits college age students. We have a specialist works with students to help them acclimate to school. They are given the support and direction needed so they can focus on their studies.

Statement of Support, Revenue & Expenses For Year Ending December 31, 2015 Figures are pre-audit

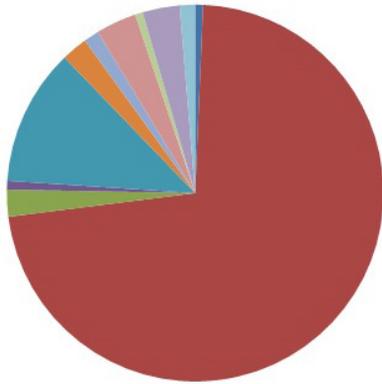
Public Support & Revenue

United Way Donations	\$7,347
County Contract Reimbursement	\$2,662,552
Program Income	\$42,897
Special Events	\$50,934
Membership Dues/Donations	\$44,941
Interest Income	\$4,431
Grants/Contract Reimbursement	\$397,712
Medicare	\$2,927
Medicaid	\$5,099,489
Investment Activity	(\$15,203)
Deferred Medicaid Revenue	\$434,733
Total Public Support & Revenue	\$8,732,760

Summary

Total Expenses	\$8,641,792
Excess of Support	\$90,968
Fund Balance 1/1/15	\$409,879
Fund Balance 12/31/15	\$500,847

MHADC receives funds from Dutchess County Dept. of Mental Hygiene, Dutchess County Division of Youth Services, Dyson Foundation, NYS Office of Mental Health, NYS Dept of Education, NYS Office of Children & Family Services, United Way, federal grants, private donations, and memberships.



- CASA
- Care Management
- Children's Respite
- Compeer
- PROS
- Education
- Family Support
- Mel's Place
- Young Adult Transition
- Supported Housing

Program Services & Additional Expenses

CASA	\$46,900
Care Management	\$6,382,518
Children's Respite	\$160,098
Compeer	\$48,224
PROS	\$944,038
Education	\$167,458
EMERGE	\$100,200
Family Support & Advocacy	\$213,931
Mel's Place	\$220,742
Supported Housing	\$264,965
Young Adult Transition	\$44,224
Total Program Expenses	\$8,593,298
Association Expenses	\$48,493
Total Expenses	\$8,641,792

2015 MHADC Board of Directors

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A Message from our Board President

Dear Friend of MHADC,

Thank you for joining us today for our annual meeting. This happens to be one of my favorite events for MHA because nothing makes you feel greater pride than to review the year with all of MHADC's accomplishments and achievements. I firmly believe one of MHA's greatest achievements this year and every year, is the assembly of a strong, knowledgeable, and hard-working staff.



This agency has been growing in leaps and bounds over the past few years, and it is extraordinary to watch. As I enter my fourth year on the board and second year as President, the staff of MHA never ceases to amaze me. Their passion and dedication to the work they do and clients they serve is unwavering. I am continually inspired by their stories and outreach and cannot help but think about how far they do in fact reach. Mental health does not just affect the individual, but can affect their family and friends. I often think of the staff having a ripple effect, similar to throwing a stone into the water, it starts as one ring and grows from there. They are impacting their clients, and as a result, impacting our community for the greater good.

This past year, a new movement of sorts emerged surrounding a semicolon “;” and raising awareness for mental health. It is stated that “a semicolon is a pause in a sentence, not the end of one” symbolizing those who struggle with mental health have more to their story. Mental health does not make up the whole of who they are, and with the help of people like the staff of MHADC, they are continuing their stories and living their lives.

On behalf of the Board of Directors, I send my sincere and deep gratitude to the staff of MHADC for their commitment to their clients and to the agency. I consider it an honor to serve on this board, and I look forward to what the upcoming year holds for MHADC, our amazing staff and the clients they serve ;

Sincerely,

Teresa Gasparini
President



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