

YEAR IN REVIEW BY EXECUTIVE DIRECTOR, JOSEPH “Chip” JOHNSTON, LMSW

A day prior to the announcement of Governor Whitmer's Executive Order, Stay Home, Stay Safe, Centra Wellness Network (CWN) was completing its last day of the CARF accreditation process. Here is an overview of the outcome:

CWN received its 7th straight 3-year accreditation from CARF.

The Commission on Accreditation Facilities (CARF) report noted the following: The organization has developed a committee structure that supports a relatively lean administrative structure, while ensuring that information is obtained, analyzed, used, and shared throughout. All personnel participating in the survey process were uncommonly aware of the data and information needed to support their work.

The executive and leadership personnel make particularly good use of data and input that are collected from a variety of sources and stakeholders. A forum in which stakeholders, including families and other service providers, from throughout the communities served come together and address unmet or emerging needs.

The organization has developed powerful, positive relationships with community partners and other stakeholders that consistently support the organization's ability to provide services that enhance the lives of the persons served and the well-being of the community. The collaboration with these stakeholders is exceptional, as is the organization's responsiveness to identified needs and creative solutions applied.

Centra Wellness Network manages health home programs in collaboration with Catholic Human Services, which offer health care management for persons with mental health disorders and chronic medical conditions. A third health home program, the Opioid Health Home, was created along with services for medication-assisted treatment as an enhanced level of care for persons with opioid addiction. The Opioid Health Home providers work with the person served to coordinate, support, and help manage the person's recovery along with other healthcare and social needs.



This review is consistent with the vision of the agency, and the creative abilities used to assure persons in the community receive the services either through treatment or partnerships in developing programs and services.



OUR MISSION:

ENHANCING FREEDOM TO
LEAD A MEANINGFUL LIFE
THROUGH QUALITY BEHAVIOR-
AL HEALTH CARE, LEADERSHIP,
PROMOTING
INDIVIDUAL WELLNESS AND
TEAMWORK WITHIN OUR
COMMUNITY.

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**7 Days a week /24
Hour a day Crisis Line:
1.877.398.2013**

Program Spotlight:

Centra Wellness Network (CWN) has identified a strategic goal to support the development and implementation of a trauma-informed system of care. As part of this overall goal, CWN has implemented clinical evidenced based practices as part of its service array.

Trauma Focused Cognitive Behavioral Therapy (TFCBT)

In 2009, responding to the increased awareness of trauma's impact on children and families in our counties, Centra Wellness Network began engaging in learning collaboratives for Trauma Focused Cognitive Behavioral Therapy (TF-CBT). Since that time, thirteen clinicians have completed or are currently training in the model. TF-CBT is an evidence-based treatment for children and teens impacted by traumatic events. It is an attachment-based model, meaning it includes caregivers in the therapy sessions and promotes healthy relationships between family members. To become trained, clinicians complete a 10- hour web-based training, followed by a webinar, 5 in-person trainings and monthly national coaching calls along with biweekly consultation. In order to become certified, clinicians must demonstrate mastery of the principles and complete treatment with three families. TF-CBT is a model that encourages creativity. The formats in which skills are taught include art, play, writing, technology and bibliotherapy. Over the 10 years of use, more than 350 families have participated in the treatment modality. Research reveals children who participate in therapy using this model experience a decrease in shame and abuse related fears, sexualized behavior, anxiety and depression and an increase in social skills and the ability to recognize and respond to abu-

sive situations. Parents involved in their children's treatment have been shown to experience a decrease in depression symptoms, Post Traumatic Stress Disorder (PTSD) symptoms and abuse related stress along with an increase in parenting skills and support to their children. One twelve-year-old participating in this therapy after a traumatic event reported "It feels like it is all falling out of me now and it isn't all stuck inside. I can talk about it" and following treatment reported "I feel like me again. I'm smiling and my stomach doesn't hurt". Clinicians at Centra Wellness Network who use this model meet with families once a week or every other week. They teach skills, practice together, and assign home practice. During treatment the child creates a narrative about their traumatic event that is shared with a trusted caregiver. The process for completing TFCBT may take between 8 and 25 sessions. Treatment ends in a celebration of completion.

CENTRA WELLNESS VALUES:

**Client Focused, Transparency
in Decision-Making,
Positive Work and Team Environment and Responsive to
Stakeholders Needs.**

Program Spotlight Continued:

TREM (Trauma Recovery and Empowerment Model)

The Trauma Recovery and Empowerment Model (TREM) is a gender-based trauma model designed to address issues of sexual, physical, and emotional abuse in the lives of women who have been economically and socially marginalized and for whom traditional recovery work has been unavailable or ineffective. (A version for men is known as “M-TREM.”) The model was developed by clinicians at Community Connections in Washington, D.C., with considerable input from clients. TREM uses a psycho-educational focus and skill-building approach, emphasizes survivor empowerment and peer support, and teaches survivors techniques for self-soothing, boundary maintenance, and current problem solving. TREM is a 24-29 session group intervention using a closed group format that is approximately 6-7 months in duration. There are weekly sessions lasting 60-75 minutes. Topics during these weekly sessions are designed to address recovery with the emphasis on empowerment and skill building (i.e. Physical Boundaries, Self-Esteem, Intimacy/Trust).

Group sessions are facilitated by a main facilitator and a co-facilitator. At least one facilitator must be a master’s level clinician. The other facilitator can be a limited licensed master’s level, a bachelor level, a peer support, or a certified addictions specialist. They are expected to attend a three-day training and implement, conduct (1) TREM or M-TREM group within the year and participate in monthly national coaching calls.

In 2014, Centra Wellness Network sent their first group of clinicians to be trained. Since 2014 there has been a total of 4 TREM groups and 2 Advanced TREM groups held with the participation of about 30 women from our communities.

Our Vision: *To see a community where everyone’s life is valued, has meaning and each person is treated with dignity and respect.*

CUSTOMER AND PROVIDER SERVICES (CAPS):

Beside being the access center for all calls and referrals coming into Centra Wellness, CAPS also includes Quality Assurance and Oversight, Data Management, Records Management and Contract Development, Implementation and Management.

All services are important, however we want to highlight some important information about our Contracted Services.

Centra Wellness Network currently has 197 contracts with providers in Manistee and Benzie Counties. Additionally some contracts are from out of the area to assure we have access for specialized treatments and services that may be needed. As a smaller provider in this area, these contacts help to assure we meet the needs identified for the persons we serve.

CENTRA WELLNESS NETWORK HOLDS INFORMATIONAL MEETINGS ON RE-DESIGN PROPOSALS BY MDHHS.

The start of 2019 brought much anxiety and concern regarding the proposed changes to the Community Mental Health Systems in Michigan. For numerous reasons the new administration at Michigan Department of Health and Human Services (MDHHS) started their year sharing ideas of a major change to behavior health services in Michigan. The basics of the design involved restructuring the service delivery of local community mental health agencies and the management responsibilities of the Regional Prepaid Inpatient Health Plans (PIHP). Almost two decades ago PIHPs were developed as a response to the States restructuring at that time, when closing State run Regional Centers throughout the state. The new system developed was the regional PIHP which replaced the regional centers and became the conduit from the State to local CMH agencies. The PIHP assumed many duties, the most important being the contractual roles for financial and quality assurance oversight. Over time the PIHPs worked to build their support systems, develop working relationships with their regional CMHs and managing their role between the State and Local CMH agencies. Unfortunately as time went on, some of the Regional PIHPs became fiscally unstable, in turn impacting budgets for CMH agencies at the local level. As the deficits for CMHs and the PIHPs grew, MDHHS attempted to address the losses. After several attempts to rectify the issue and reverse deficits, the plan to restructure the local CMHs and eliminate the need for PIHPs began to surface. The new proposed plan by MDHHS involved dividing services among several providers, including a portion left to local CMH agencies. The plan allowed for a state wide bid process. Private non-profits would be allowed to bid on the array of services along with CMH, however it remained the CMHs responsibilities to continue to provide 24/7 crisis services, and an array of other mandated services, while the rest would be considered for bid. The new leadership at MDHHS believed that allowing for a combination of providers including private non-profits would improve efficiencies and fix the financial deficits occurring in the mental health system. In our Northern Region (21 Counties below the bridge) both the PIHP and CMH Directors saw the flaw in this process. The changes would “de-rail” the efficient and fiscally stable regions such as our PIHP, Northern Michigan Regional Entity (NMRE) and the PIHP in the Upper Peninsula. Chip Johnston, E.D. at Centra Wellness and other Directors quickly started breaking down identified problem areas in this proposal. Demonstrating the negative impact it would have on local services delivery, and potential harm to local county budgets. Additionally identifying that the biggest difficulty for PIHPs and CMHS remains the inconsistencies in identified service costs and actual reimbursement. The additional items that were pointed out to the new administration was the enormous “add on” responsibilities of data and reporting being mandated with no additional financial supports. Also the rapid ongoing changes in billing and coding throughout the entire CMH system. The numerous changes in a year never allows for clean data collection therefore studies on successes remain difficult to support.



CWN Executive Director,
Joseph “Chip” Johnston



Senator Curt Vanderwall

The rapid application of this plan and limited information provided causes those PIHP and CMH agencies that were solvent and stable to be condemned and would be a potential disruption of services for thousands of Northern MI residents. After months of advocacy the discussions on state wide change ceased in April when the project was defunded due to COVID-19 pandemic and the financial impact that was hitting Michigan. The plan has not resurface and appears defunded for now.

Collaborative Efforts Increases services to Jails:

After a brief meeting it was clear that the Jails were in need of additional services to address the opioid epidemic which continues to occur in our communities. With persons arrested who have addiction issues and placed in jail it was apparent that enhancement of services were needed. Meeting with the Jail Administrator and Sherriff, CWN was able to work with Catholic Human Services to coordinate an expansion of Jail services to include Substance Use Disorder for persons identified with an addiction while in the jail. By providing SUD services the person arrested will be able to be assessed and even start treatment during their time in jail. They will be connected with services in the community by the time they are released hoping to allow for continued treatment once released.

2019 Community Services and Relations

Over the year, the Staff and Board of Directors for Centra Wellness Network (CWN) take time to recognize partners throughout the community and beyond who contribute to improving the lives of individuals living with mental illness and/or intellectual/developmental disabilities.

The work of these individuals and organizations assist with the daily needs, resources and treatment options are accessible to clients working with CWN. They provide support for initiatives and programs that can make a significant difference in the life of a person living with illness and/or disabilities. Centra Wellness over the year has made significant efforts to assure community partnerships and collaboration efforts.

It is the work of our partners that allow us to provide positive outcomes for many of our clients. Living in rural Michigan, resources such as transportation, housing, medical services, and behavioral health services are difficult to access due to numerous factors such as finances, location of services, lack of transportation, and difficult and complex systems all hamper a persons access. These community partners allow us to find answers for these barriers and build bridges that allow clients to access the services needed throughout the community.

We appreciate our Partners!

COLLABORATION BUILDS SUCCESS



*Deidra Robinson ,
Manistee Co.
District Court Administrator*



*Kathy Hockey,
Moore Living Services*



*Becky Gray,
Great Lakes Water Lab*

COMMUNITY COLLABORATION BRINGS ADDITIONAL

BEHAVIORAL HEALTH SERVICES TO MANISTEE AREA PUBLIC SCHOOLS SYSTEM:

Over the past year Centra Wellness has worked with Manistee Area Public Schools (MAPS) and Northern Michigan Health Services (NMHSI) to build a program based on the ideas that children in the MAPS system need easy access to health care and behavioral health services. Through this group's discussion all members identified that the easiest access available to children would be to have the physical and behavioral health services available at the school.

After a year of planning, and grant writing the program **CARE CONNECT** became a reality. MAPS through application of a grant through the Michigan Education System asked to contract with CWN for a Behavioral Health Specialist to provide full-time therapy services at the school. Another partner, NMHSI, a Federally Qualified Health Care agency, also received a Health Endowment Grant to provide a second full-time Behavioral Health Specialist, a Nurse Practitioner, some Dental Service and a Community Health Worker, also all available at the school.

The entire program was operational in November, and then Michigan experienced the spread of COVID-19 and an Executive Order requiring schools to close and all Michiganders to Stay Home, Stay Safe was imposed. The CARE CONNECT team had to quickly find ways to adapt the behavioral health services to assure continued access to the therapist and community support worker. All services remain active and therapists continue to take referrals and provide therapy and contacts with students and families. The CARE CONNECT team hopes to see this program grow over the next year. Stay Tuned!!!



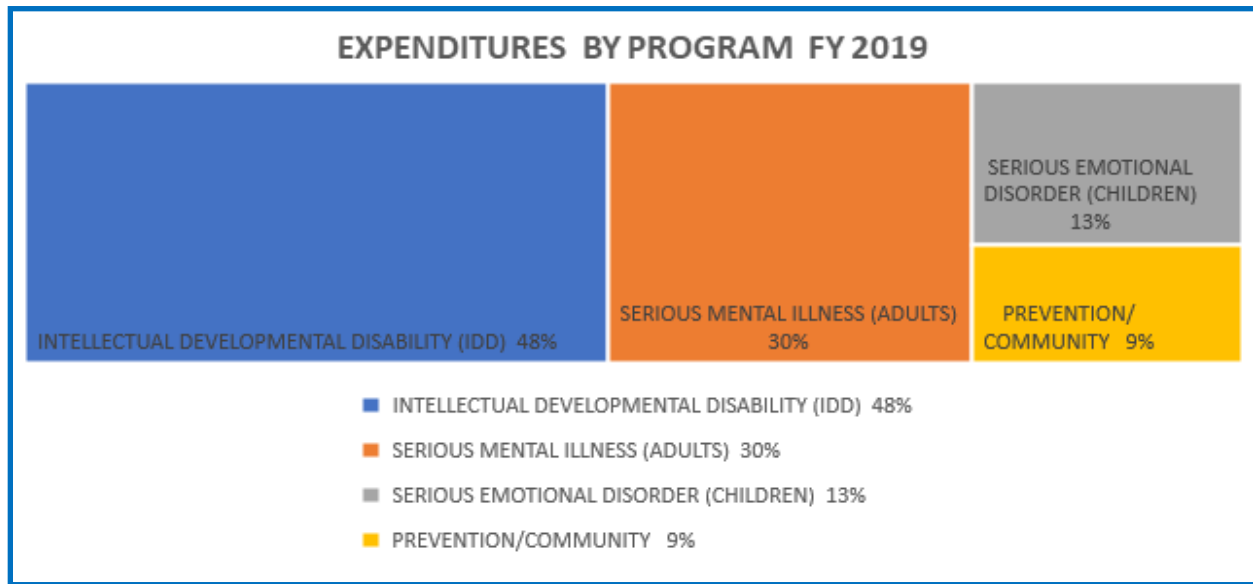
Providing Services and Protecting Staff During COVID-19

Though the Coronavirus did not hit a pandemic level in our last year operations cycle we thought it would be important to report on this, and some of our efforts as we work to find ways to assure we continue to provide services to our communities while keeping our clients and staff safe.

With COVID making its way to the United States and into Michigan at the end of February, the last three months have been consumed with developing and implementing plans and process to assure staff safety and client services continue to be available. It also identified areas of weakness within the mental health system when fighting an enemy that spreads so rapidly. Typically most mental health organizations do not keep large supplies of protective equipment, such as specialized masks, face shields, disinfectants and sanitizers. We quickly realized we did not have the amount of specialized equipment needed. Luckily we found our partners such as Health Department, Emergency Management Offices and local community groups responding to our need and providing us with some supplies. However, the need for masks (non-surgical) became enormous. Community groups, quilting groups and many other citizens answered the call for masks by making hundreds of fabric face masks for numerous groups and the hospital. We were so grateful for all their assistance. Additionally and in the traditional CWN problem solving way.... Two staff, Jane and Judy, took it upon themselves to make cloth masks for our CWN team. Before we knew it our supply grew expediently. Jane and Judy made over 80 masks for staff. Through their dedication and skill we were able to assure everyone working within the community had a mask to use to protect themselves. TEAM WORK!!! THANK YOU ALL FOR WHAT YOU DID TO HELP SO MANY!! *We are blessed to have such a supportive community.*



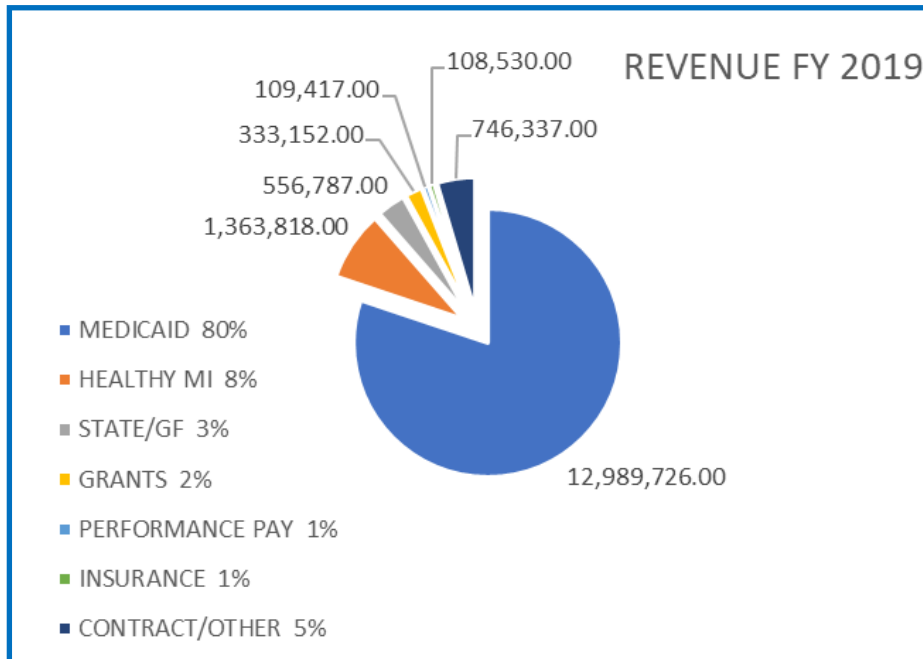
FINANCIALS FOR FY 2019



Expenditures per Population:

Intellectual/Developmental Disability (I/DD)	\$ 7,781,106	48%
Serious Mental Illness (Adult SMI)	\$ 4,874,772	30%
Serious Emotional Disorder (Children SED)	\$ 2,070,653	13%
Prevention/Community (Community/Grants)	<u>\$ 1,528,203</u>	9%

Total Expenditures per Population: \$16,254,735



MEDICAID	\$12,989,726.00
HEALTHY MI	\$ 1,363,818.00
STATE/GF	\$ 556,787.00
GRANTS	\$ 333,152.00
PERFORMANCE	
PAY	\$ 109,417.00
INSURANCE	\$ 108,530.00
CONTRACT/OTHER	\$ 764,337.00

TOTAL REVENUE \$16,225,767.00

CENTRA WELLNESS BOARD OF DIRECTORS:

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Dennis Risser, Manistee County, Vice Chair
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James Wisniski, Manistee County
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Leslie Wilson, Manistee County
Rhonda Nye, Benzie County Commissioner, Sec.
Richard Schmidt, Manistee County Commissioner
Terry Pechacek, Manistee County (*New Member*)



Thank you

Annie Hooghart

You have spent many years advocating and representing community members in Manistee County and the staff of Centra Wellness Network.

CENTRA WELLNESS NETWORK COVID-19 PREPAREDNESS AND RESPONSE PLAN

Throughout the past few months staff and leadership have had to adapt the manner in which we provide services to clients and interact with our partners and community members.

Adjusting to the pandemic while assuring safety to staff, clients and others required an ability for CWN to be nimble and responsible in its actions. We made swift adjustments, reviewed our service delivery, and found ways to continue to treat clients and community.

CWN's full plan can be found on our website:
www.centrawellness.org.

The full plan is located under Resources.

CENTRA WELLNESS NETWORK

Administrative Offices — 310 Glocheski Drive, Manistee MI 49660
Manistee Wellness Center — 2198 US 31 South, Manistee MI 49660
Benzie Community Resource Center, 6051 Frankfort Hwy., #200, Benzonia, MI 49616