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Funding
provided by:
NMRE



Dorothea Dix was an activist and through lobbying created the first generation of American Mental Asylums in the 1800's.

Vision Statement:

AuSable Valley Community Mental Health Authority envisions a future where consumers achieve physical and mental health sufficient to empower them to achieve their dreams and desires for greater independence, greater personal responsibility, and full participation in community life.

AVCMHA
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Mission Statement:

AuSable Valley Community Mental Health Authority provides quality prevention, education, and mental health services, in a fiscally responsible manner, in Iosco, Ogemaw, and Oscoda counties, which are aimed at improving the health and welfare of persons served, promote greater independence, and improve the quality of life for people in these counties with developmental disabilities, mental illness, and substance use disorders.

Home and Community Based Services: The Long Road to the Right Outcome

The first psychiatric institutions were established in the United States in the late 1700's. In 1840, Dorothea Dix began a 40-year campaign to improve conditions for those living in psychiatric asylums which resulted in the U.S. government building 32 state psychiatric hospitals. With advancements in medication treatments in the 1970's, the movement toward de-institutionalization began and Community Mental Health Programs were established.

Being present in the community is not the same as being a community member. Segregated living arrangements, isolated specialized training, and day programs essentially created institutions without walls, leaving consumers in a better circumstances, but not the best of circumstances.

Dorothea Dix initiated the first wave of progress; de-institutionalization was the second wave, followed now by the Home and Community Based Services: the third wave of progress in the long march to the right outcome for citizens living with disabilities. The right outcome is the ability to choose your residence, pick your roommates, eat what you prefer when you prefer, visit with friends day or night, worship, work, and yes, pay taxes just like the rest of us. Our work continues in support of the third wave with an eye toward the final wave when all citizens have equal opportunity under the law to fully enjoy the benefits and responsibilities of citizenship.

"In a world where there is so much to be done. I felt strongly impressed that there must be something for me to do." - Dorothea Dix

AuSable Valley
Community Mental Health
Authority

June 2017
Semi - Annual Report

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Serving Iosco County, Ogemaw County & Oscoda County



After a year of meetings, discussion, countless newspaper articles, and broadcast media reports, Lt. Governor Calley's 298 work group reported out a list of 71 core values and principles to guide the enhancement of the public mental health delivery system. Before the ink had dried on the report, the State Senate, in total disregard of the report's strong stance in favor of sustaining public funding, introduced budget boilerplate language (234) to turn all funding over to the private, for profit, Medicaid Health Plans by 2020. The battle continues, with this Agency, the NMRE, and the Board Association, along with countless advocacy groups fighting the good fight, and doing all things possible to retain public funding to ensure that money budgeted for care goes to care and not shareholder profits.

Closer to home, the five CMHSP Boards that comprise the Northern Michigan Regional Entity (our funding agency) are working together to create a rural system of health care management proposal for the legislators and Michigan Department of Health and Human Services consideration should pilots funding projects be called in the State budget. The pilot development creates a regionally controlled Medicaid Health Insurance Plan, with local citizens on the Board, making decisions consistent with local health and service needs. It will create the public safety net, and integrate health care and behavioral health care services to make access to care and the availability of care more convenient and cost effective. AVCMHA is committed to advancing care in a manner that makes sense for the citizens of rural Michigan.

The constant battle to secure and sustain sufficient public funding can become all-consuming. At best, we win battles in the war over funding and regulation: yet the battles never end. But, lest we forget, the real war is about helping people: helping citizens, living with disabilities, live the lives they desire, in the communities they choose, with the full extent of rights and freedoms we all enjoy and value. People living with disabilities are more than "persons-served"; they are value-adding members of the community. I was reminded of that at a recent meeting of the Board of Directors.

The Oscoda ROAR, a group of people living with disabilities and advocating for the betterment of all through education campaigns, anti-stigma campaigns, and political action, presented their latest project. ROAR members are not only citizens living and working in the community, they are now working to improve the community. ROAR has developed an active volunteer program taking time from their days to volunteer in long-term care facilities, soup kitchens, and other community venues. People living with disabilities are an asset to our community, not a liability. How much progress has been made in a very short period of time: from 50 years ago when institutional care was the standard of care for people living with disabilities, to today when those very same people are taking care of seniors and those who are hungry in our communities as volunteers. It is this type of progress that makes every battle worthy of our efforts to put up our best fight.

I would like to thank the members of ROAR for their efforts to make their community a better place to live and thank the dedicated staff of AVCMHA who make it possible for people living with disabilities to benefit from treatment and learn the skills necessary support such community minded contributions.

Respectfully,

Joseph Stone, Chairperson
AVCMHA Board of Directors



Shine Bright Like a Diamond

By:Bradley Sheppard
Case Manager

They often say that a diamond doesn't start as a diamond, it starts as mineral just like any other, and through heat and pressure is forged over time into a diamond. Ann's life then, is similar to that. Ann's life has been hard, with a traumatic childhood, abusive relationships, and a diagnosis of schizophrenia, alongside being a single mother to two children (and later dealing with them being removed), she has tried her hardest not to let it get her down. Of course, part of her illness included convincing herself she wasn't sick, so taking medications for treatment wasn't easy for her, and during one of those days Ann didn't try to treat her illness and followed advice that would land her in a state hospital for several years.

Throughout this time Ann kept working, she attended therapeutic sessions, learned new skills, but couldn't help but miss the freedom she used to have, outside of the psychiatric facility. Eventually Ann was moved to AFC (Adult Foster Care) where she had the freedom to start working on herself and her family again. She was able to attend her son's wedding, and watch the birth of her grandchild. She also started working again, through a supportive employment program as well as involved herself more in the community by starting to go to church and developing friendships. Ann has shared with this staff that her quality of life has improved so much that she doesn't want to

leave Bay City anymore, unless it's to move closer to her family.



Ann has come a long way in her treatment at AVCMHA. She has worked very hard and learned many new skills that will help her achieve more independence in the future.

Brothers Making Progress

By: Lisa & Kelly Revall

Sam and Zac are teenage brothers who have been involved with AVCMHA for the past 10 years. They are unique individuals with loving hearts, creative spirits, and bright minds. A stable and loving home gave them foundation, but their early emotional instability rocked them and their family's worlds. The boys saw Dr. Barba for medical help and were hospitalized many times when safety was a concern. Zac has been in every children's mental health hospital in Michigan. We participated in counseling and every program

that could support them in those precarious and unpredictable times.

In their teens each decided to go off their medications, presenting another challenge. Zac "hibernated" in his room and only came out at night for almost a year during this time. Although when he began interacting again, he was more calm and introspective. We continue to see growth. Sam went off his medications a year after Zac and is still adjusting, but he is working through his feelings and emotions, thankfully now without aggression.

AVCMHA has done their best to be supportive to our family. Currently Zac and Sam are finding success with ABA (Applied Behavior Analysis) therapy. The boys were both diagnosed with Autism and have been the key to understanding their behaviors. A worker comes into our home five days each week and spends time with them. The boys have bonded with a wonderful respite care worker who loved and cares for them and also gives their dad and I time away. We appreciate all of the help Fran Sullivan has given us. Life has greatly improved these days and we are thankful.



Sam and Zac (not pictured) Revall have both been in services with AVCMHA for the past 10 years and their family is thankful for all of their progress.

"CMH has helped my family so much I would not know what to do without them."

Medicaid Verification Audits

On a quarterly basis, the Northern Michigan Regional Entity (NMRE) conducts a Medicaid service verification audit. The audit is inclusive of service validation as well as coinciding Medicaid dollars for those services. The service validation process for all past three quarters audited including Q1 for FY'17 for Medicaid services indicates a verification rate of 100% of total services audited and 100% total dollars audited, well above the 95% threshold. The chart below shows AVCMHA's continued high performance/quality and also compares the agency to the NMRE as a whole.

Medicaid Service Verification % Validated				
	Q2 FY'16	Q3 FY'16	Q4 FY'16	Q1 FY'17
AVCMHA	100%	100%	NO AUDIT CONDUCTED	100%
NMRE	98.6%	96.6%		97%

Medicaid Service Verification Dollars % Validated				
	Q2 FY'16	Q3 FY'16	Q4 FY'16	Q1 FY'17
AVCMHA	100%	100%	NO AUDIT CONDUCTED	100%
NMRE	98.3%	97.6%		99.3%

Technology Updates from our IT Department

The IT staff, as well as many other AV staff, has kept very busy this past year with the implementation of the new Electronic Health Record (E.H.R.). In the spring of 2016, after a four-month search, PCE was selected as our E.H.R. vendor. THOR (Trustworthy Health Online Record) was adopted as the name of our E.H.R. and an implementation team was selected, with staff from Consumer Services, IT, Quality, Finance, and PCE and met every two weeks started on August 1, 2016. With the scheduled "Go-Live" for March 1, 2017 the team needed to make decisions with the set up and configuration of THOR. A forms committee was also created to go through all forms and streamline them where possible.

The implementation of THOR, combined with the new workflows and processes, was a major change for all staff. To help prepare the staff for the THOR, PCE trained staff on THOR. PCE wrote and installed over 30 documents of instruction online in THOR. A super-user team and a residential champion team were formed to assist all staff with the transition and staff members were trained on the changes to workflow and processes by their

supervisors.

Overall, the implementation of THOR has gone very well. From the first few days of using THOR, the efficiencies have continued to grow. Now that Phase 1 of the THOR implementation is live, we are looking at adding additional packages to THOR in Phase 2. Included among these packages are HIE (Health Information Exchange), SUD (Substance Use Disorder), Recipient Rights, and Reporting. In conjunction with the THOR project, two pilot groups have been started, one of which is using Jetpacks (Wireless Hotspots) with laptops for staff who work primarily in the field and the other is using Tablets with WIFI for CLS (Community Living Support) staff. Converting to THOR was a large investment by AV in terms of cost, time, and effort but the benefits for staff and consumers now, and in the future, make the investment worthwhile.



"When I am in crisis mode I can call and talk to someone always and they follow-up. I've got a good quality of life because of AVCMHA."