

SCCMHA FISCAL YEAR 2021 - ANNUAL SUBMISSION

COMMUNITY NEEDS ASSESSMENT, PRIORITY NEEDS, AND PLANNED ACTIONS

EXECUTIVE SUMMARY

INTRODUCTION

The purpose of this overview is to provide the reader with a general understanding of the Annual Submission and its function in the Michigan's Community Mental Health Service Program's public mental health program planning and policy implementation. The annual submission is required in the Michigan Mental Health Code and in the CMHSP contract with the Michigan Department of Health and Human Services. The submission is a requirement of the CMHSPs but not of the PIHPs.

The annual submission cover date is always referred to as the year prior to its submission date because the CMHSPs are asked to provide data from the previous year. The submission includes very specific forms. On alternating years, a community needs assessment is done; with the off years in the cycle requiring an update of priority planned actions which were derived from the need's assessment from the prior year.

SUMMARY OF ANNUAL SUBMISSION CONTENT

There are four forms included in the annual submission this year, they are as follows:

- **Waiting List (Attachment A):** The CMHSP contract requires that all persons who are not Medicaid eligible and who cannot be served within the existing available General Funds be offered the opportunity to be placed on a wait list. This form reports the point in time count of persons yearly from: the start of the year, added to the list during the year and either served or otherwise exiting the list during the year with a count of persons remaining on the list at the end of the time period covered.
- **Report on Requests for Service and Disposition of Requests (Attachment B):** This form is a waterfall metric which counts persons who request service in each of the three populations served by the CMHSP and at each level of inclusion as they progress from request for service to actual start of service.
- **Community Data Set (Attachment C):** This form is a set of ten metrics which are deemed by MDHHS as indicators of the need for mental health service. The form is submitted without any required narrative, but a local analysis of the data is expected to inform the needs assessment. We have prepared a Community Data Set Analysis for Board reference this year.
- **Priority Needs and Planned Actions (Attachment E):** This form is used to report the priority needs. It identifies these needs and the plans to address them.

2022 SCCMHA STAKEHOLDER SURVEY

The Saginaw County Community Mental Health Authority is required to conduct an assessment of the mental health needs of our community. This assessment must involve public and private providers, school systems and other key community partners and stakeholders. We understand that the mental health needs of our community often manifest themselves in various ways. In order to better understand these needs, we asked our community partners to share with us the trends and needs that they may be related to, or indicative of, a mental health need.

STAKEHOLDERS

The stakeholders whose feedback was received consisted of the following community partner type:

Partner Type	Surveys Received
MH and SUD Providers	15
Justice System	8
Consumers and Advocates	4
Public Health	3
Other	3
Hospital / acute care	2
Outpatient Mental Health Agency	1
Non-Profit	1
Autism service provider	1
Primary Health Care	1
DHS	1
Community health worker	1
Homeless Service provider	1
Community foundation/community partner	1
ABA	1
Local Government	1
Total Surveys Received:	45

SURVEY QUESTIONS & ANALYSIS

QUESTION 1: What do you see as being the most significant mental health needs that are not currently being adequately addressed in our community?

Need	Significance Level
Children & Teens	8
Access to Care	8
Inpatient Admission Availability	7
Crisis Services	4
Cost of Care	3
Housing	2
Staff Shortages	2
Consumer Education & Skill Building	2
SUD	1
Increased MH needs	1
SMI & SED	1
Consumer Resources	1
Step down Services	1
MH Awareness	1
None	1
Medical Care	1
Total Surveys Received:	44

QUESTION 2: From your perspective, what trends have you identified that SCCMHA should be aware of?

Theme of the Identified Trends	Number of Surveys
Access to Care	12
Children & Teens	6
Staff Shortages	6
Increased MH needs	4
Inpatient Admission Availability	3
Crisis Services	3
COVID concerns	2
Cost of Care	2
Quality of Care	1
SUD	1
Elderly	1
Housing	1
Total Surveys Received:	42

QUESTION 3: Based on what you have shared, please identify the top three concerns/priorities.

Top Concern	Number of Surveys
Access to Care	36
Children & Teens	11
Inpatient Admission Availability	10
MH Awareness	9
Cost of Care	9
Staff Shortages	8
Housing	5
Crisis Services	4
Community Partnerships	3
COVID Concerns	2
Elderly	2
Step Down Services	2
SUD	2
Safety	1
Wrap around Services	1
GLBTQ+	1
Increased MH Needs	1
Community Partnerships	1
Consumer Resources	1
Jail Diversion	1
MDHHS	1
(blank)	
Grand Total	111

ANALYSIS: After analyzing all data received through the Community Needs Survey and Annual Assessment, the following needs were found to be of the greatest importance of the community.

Theme	Significance Level
Access to Care	56
Children & Teens	25
Inpatient Admission Availability	20
Staff Shortages	16
Cost of Care	14
Crisis Services	11

PRIORITY NEEDS AND PLANNED ACTIONS

Based on feedback received from stakeholder groups through the community needs assessment survey and data collected, the CMHSP must identify at least 5 priority needs. Of these, the CMHSP must identify the areas where it intends to address and what action is being planned in that area.

PRIORITY ISSUE 1: Access to Care

Reason for Priority: Priority was identified 56 times in the results of the Community Needs Survey by the following stakeholder groups:

- Autism service provider
- Community foundation/community partner
- Community health worker
- Consumers and Advocates
- Homeless Service provider
- Justice System
- MH and SUD Providers
- Non-Profit
- Public Health

PRIORITY ISSUE 2: Children & Teen's Services

Reason for Priority: Priority was identified 25 times in the results of the Community Needs Survey by the following stakeholder groups:

- Autism service provider
- Community foundation/community partner
- Hospital / acute care
- MH and SUD Providers
- Non-Profit
- Outpatient Mental Health Agency
- Primary Health Care
- Public Health

PRIORITY ISSUE 3: Inpatient Admissions Availability / Beds

Reason for Priority: Priority was identified 20 times in the results of the Community Needs Survey by the following stakeholder groups:

- Community health worker
- Hospital
- Hospital / acute care

- Justice System
- MH and SUD Providers
- Outpatient Mental Health Agency
- Public Health

PRIORITY ISSUE 4: Staff Shortages

Reason for Priority: Priority was identified 16 times in the results of the Community Needs Survey by the following stakeholder groups:

- ABA
- Consumers and Advocates
- Homeless Service provider
- MH and SUD Providers
- Outpatient Mental Health Agency

PRIORITY ISSUE 5: Cost of Care

Reason for Priority: Priority was identified 14 times in the results of the Community Needs Survey by the following stakeholder groups:

- Autism service provider
- Consumers and Advocates
- DHS
- MH and SUD Providers

PRIORITY ISSUE 6: Crisis Services

Reason for Priority: Priority was identified 11 times in the results of the Community Needs Survey by the following stakeholder groups:

- ABA
- Consumers and Advocates
- Homeless Service provider
- Hospital
- Justice System
- MH and SUD Providers

PLANNED ACTIONS:

Priority Issue 1: Access to Care

CrisisConnect – Program designed to provide iPads in Law Enforcement Vehicles which can be used by citizens who need urgent Crisis Services to have immediate access to a mental health therapist via telehealth. Program’s pilot will be rolled out in June 2022.

Central Access & Intake: Improved processes for Central Access & Intake to increase efficiency, allowing for more available resources for Consumer Care.

Building Bridges to BH Care: Partnership with the Saginaw Community Foundation and other local providers and agencies in the newly funded project called Building Bridges to BH Care. Formed to identify and address barriers to accessing mental health and substance use disorder services in Saginaw County. The items on the workplan are slated to be completed by December 2022.

TECH+: iPad program (TECH+) that provides iPads with data service for Consumers who meet specific criteria.

TECH: iPad program (TECH) that provides iPads available to checkout by staff for Consumers to use for virtual telehealth visits.

Priority Issue 2: Children & Teen’s Services

DME iPad authorizations: iPad program that provides iPads with data service and specialized therapeutic apps for Consumers who receive a DME authorization for the iPad, service, and applications.

Autism eligibility determination assessments: In our Autism Network we are expanding our ability to complete eligibility determination assessments by bringing on 4-5 new staff that perform these assessments. We are working to increase our network capacity by contracting with additional providers.

IECMHC: Infant & Early Childhood Mental Health Consultations to Child Care Agencies and Families (IECMHC) this service is getting lots of uptake for young children at risk of expulsion from childcare agencies for behavior problems. Win /win preserve child-care for working parents and educate childcare agency staff on better management of behavior issues for the child and other children in care that may express similar problem behaviors in the future.

Juvenile justice liaison: Juvenile justice liaison (master level clinician) who works directly with our detention and family court to screen for service needs, refer, as well as provide therapy for youth in detention.

Family medicine clinics mental health consultations: Mental Health Consultations at family medicine clinics which provide behavioral health screenings, early interventions, and referrals for children of all ages during well child visits.

Community mental health consultations: Mental Health consultations with Family Court, Juvenile Probation and Foster Care.

School-based mental health consultations: School-Based mental health providers available for outreach, screening, stabilization, and referrals at local area elementary schools.

Priority Issue 3: Inpatient Admissions Availability / Beds

Partnership with Healthsource: Clinical Directors meet quarterly with Healthsource to identify solutions for this issue.

Priority Issue 4: Staff Shortages

Sign-on Bonuses: New Hire Sign-on Bonus for new clinical staff who meet set productivity standards during their first 6 months of hire.

Employee Retention Payment: Employee Retention Payment for all current employees.

Referral Bonus: Referral Bonus for current staff who refer individuals to apply who are then hired.

Student supervisory stipend: Quarterly Stipend for Supervisors who take on the responsibility of supervising a social work student.

Agency internship program: Long-term goal of creating an official agency internship program.

Recruitment: Increase recruitment ads on local radio stations, news channels, Facebook, and LinkedIn.

Priority Issue 5: Cost of Care

Medicaid Waiver programs: Encourage families to apply for Medicaid Waiver programs.

Behavioral Health care prevention efforts: Encourage prevention where possible to lessen need for treatment.

TECH+: iPad program (TECH+) that provides iPads with data service for Consumers who meet specific criteria.

CCBHC-D: MDHHS CCBHC Demonstration site which will expand eligibility for individuals with mild to moderate MHI and SUD.

Priority Issue 6: Crisis Services

Expanded MRSS Access: Mobile Response and Stabilization Services (MRSS) are available for all populations from 8am to 10pm. Working on making this available 24/7. This intervention is helping with diversion from Emergency Dept./need for admission.

MiCAL: Michigan Crisis and Access Line (MiCAL) will be live by the end of May 2022. SCCMHA staff are being trained on this system to work with individuals calling from Saginaw County.

National Suicide Prevention Lifeline: 988 (National Suicide Prevention Lifeline) will be live in July 2022 for all individuals to easily access in times of crisis.

CrisisConnect: Program named CrisisConnect which is designed to provide iPads in Law Enforcement Vehicles which can be used by Citizens who need urgent Crisis Services to have immediate access to a mental health therapist via telehealth.