### **REQUEST FOR BOARD ACTION**

### HENDERSON COUNTY BOARD OF COMMISSIONERS

### **MEETING DATE:**

January 4, 2010

SUBJECT:

**Maintenance of Effort Fund Allocation** 

**ATTACHMENTS:** 

Yes 1.) Funding Matrix 2.) Provider Applications

### **SUMMARY OF REQUEST:**

Henderson County has \$528,612 mandated for allocation for the provision of mental health services in the county for the period between November 1, 2009 and October 31, 2010. Maintenance of Effort funding applications were received by the county in late September and have been reviewed by Staff to determine funding recommendations. The attached matrix outlines which agencies filed applications, what type of service they provide, condition of the agency, the funding amount requested and the funding amount recommended.

The specific recommendations are:

Blue Ridge Community Health Services	\$ 43,167
Families Together Inc.	\$ 107,823
The Free Clinics – Psychiatric Services	\$ 33,930
The Free Clinics – Pharmacology	\$ 60,321
Henderson County Health Department	\$ 28,517
Mainstay	\$ 18,850
Parkway Behavioral Health	\$ 13,572
Sixth Avenue Psychiatric Rehabilitation	\$ 199,812
Vocational Solutions	<u>\$ 22,620</u>
Total	\$ 528,612

### **BOARD ACTION REQUESTED:**

The Board is requested to discuss the requests and recommendations for FY 2010 Maintenance of Effort funds, and to direct staff regarding their allocation.

### **Suggested Motion:**

I move the Board appropriate \$528,612 of Maintenance of Effort funds at this time as recommended.

Provider	Type of Service	FY 08-09 Funding Level	Requested 09- 10 Funding	Cost per unit of service	Condition of Agency/Fund Balance	Recommended Funding Level
Blue Ridge Community Health Services	MH Counseling	\$30,000	\$57,250	\$11.73 per counseling visit	18.96%	\$43,167
Families Together Inc. (Jail/DSS)	Clinical Assessment	\$0	\$143,000	\$45.66 per clinical assessment	7.70%	\$107,823
The Free Clinics - Psychiatric Services	Psychiatric Services	\$45,000	\$45,000	\$42.78 per case management visit	17.38%	\$33,930
The Free Clinics - Pharmacology	Pharmacology	\$120,000	\$80,000	\$96.23 per prescription	17.38%	\$60,321
Health Department	MH Screening	\$58,612	\$37,821	\$48.84 per MH screening	23.73%	\$28,517
Mainstay Inc.	Housing/Counseling	\$25,000	\$25,000	\$357.14 annual cost per person for housing	24.16%	\$18,850
Parkway Behavioral Health	Case Management	\$0	\$18,000	\$90.00 per case management visit	***	\$13,572
6th Avenue Psychiatric Services	Rehab/Group Therapy	\$200,000	\$265,000	\$1,119.51 annual cost per client	7.74%	\$199,812
Vacational Solutions	Rehab/Group Therapy	\$50,000	\$30,000	\$641.03 annual cost per client	4.82%	\$22,620
Total :		\$528,612	\$701,071			\$528,612

### Henderson County

# HENDERSON COUNTY

# Maintenance of Effort Funding Application

Aistoric Courthouse Square #2 Hendersonville, NC 28792 Phone 697-4809 Fax 698-6014

November 1, 2009 - October 31, 2010

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	ORGANIZATION	AL INFORMATION				
Organization Name		Executive Director				
Blue Ridge Community Health Ser	rvices (BRCHS)	Jennifer Hendersor	Jennifer Henderson			
Contact Person for Grant	<u> </u>	Phone Number				
Milton Butterworth		828-233-2225				
Mailing Address		E-Mail		<u></u>		
P. O. Box 5151		mbutter@brchs.cor	m			
City State	Zip	Fax Number	7.9 <del>77</del>			
Hendersonville NC	28793	828-692-4396				
Website address (if applicable)		Received County fu	unding in las	st three years?		
www.brchs.com		✓ Yes	No	•		
Type of Application		Amount of Funding	requested			
One-Time Project 🗹 Continuation	Expansion	\$57,250	•			
SECTION II						
	PERFORMANCE	MEASUREMENT				
Mission Statement						
Please provide the organization's Mission S	Statement and/or general	organizational information.		#		
To enhance the health of individuals a	ind families within the c	community, with emphasi	is on the und	lerserved.		
		<i>,</i> ,				
rformance Goals and Objectives		동작: 2011년 1월 1991년 19 1991년 1991년 1991				
ify your organization's goals/objectives	s. Additional goals may be	e added.				
Western North Carolina's source for						
2 Recognized leader in community hea	alth and migrant seasona	I farm worker services.				
3 Provide individuals and families with	the education and suppo	irt to achieve healthy living.				
4 Perpetual focus on resource and fund	ding management to incr	ease the organization's fina	incial strength	•		
Service Outcomes			전 같은 것이 같은 것이 같은 것이 같이 같이 같이 같이 같이 않는 것이 같이 않는 것이 같이			
Please identify measures to assess the effe improvement of service delivery	ectiveness of your strateg	ies, achievement of goals, e	efficiency of se	rvice delivery or		
		11.1.2008	- 10.31.2009			
Outcomes		동생 영국 · · · · · · · · · · · · · · · · · ·	To Date	11.1.2009 - 10.31.2010		
and the second		Target	Actual	Target		
Increase access to psychiatric services for I		300	325*	575		
Increase number of psychiatric encounters.		700	622*	1400		
Mile the focus of this MOT fundious it has						
While the focus of this MOE funding will be						
psychiatric services, BRCHS will increase	efforts on previous outc					
Increase number of patients accessing cour	nseling services.	800	1029*	1100		
Increase number of counseling visits for me		2400	2138*	2500		
* services provided (	11/01/08 - 08/25/09)					

### SERVICE SUMMARY

### **Problem Statement**

fy the problem or need your Organization will address.

It changes to the mental health delivery system have disrupted, complicated, and reduced access to mental health services in Henderson County. The erosion of mental health services affects Henderson County residents from all economic classes, but has more acutely affected access to services in the uninsured, underserved, and special populations. Access to psychiatric care and medication management is even more limited; while at the same time, we continue to see the need for psychiatric care rise.

### **Target Population**

Describe the target population that will be served with the requested funds.

The target population for this service is all community members, especially those with barriers to accessing mental health services and, more specifically, those needing psychiatric care and medication management.

### Service Goals

How will this service address the problem or need identified?

In '08-'09, BRCHS addressed the mental health needs of the community more substantially by utilizing a part-time psychiatrist to provide direct on-site psychiatric care and medication management, introducing 0.4 FTEs of psychiatric services available at BRCHS. In 2009-2010, BRCHS proposes to further increase access for these patients by expanding psychiatric services available at BRCHS to 0.75 FTEs, nearly doubling the psychiatric staffing at BRCHS. By adding a Psychiatric Nurse Practioner and working with Western Highlands Network, BRCHS will also help take med. evaluation pressure off of the Psychiatrist and ensure that they have time available for crisis management.

### Citizens Impacted

How many citizens will be directly impacted by the program funds?

All of Henderson County's ~100,000 residents will be able to access Blue Ridge Community Health Services' psychiatric services; those without insurance are eligible to apply for a sliding discount based on their income; those with language barriers are provided an interpreter. Last year BRCHS saw ~13,000 patients for ~49,000 encounters; all of these community health patients now find psychiatric services available at their medical home. Since 2007-2008, BRCHS has consistently outperformed targets and mental health services have grown from a target of 400 patients to over 1400 patients served by the end of the 2008-2009 funding year. As demand continues to increase, BRCHS has seen 148 new mental health patients in the past three months (6/1/09-8/31/09). By expanding psychiatric services in 2009-2010, this year's program targets will be nearly double last voor's targets. BRCHS projects 575 community members will gain access to psychiatric services contributing to a total of over 1600 community

hers projected to gain access to mental health services in the reporting year.

### Funding Implications

Describe the impact on your organization, clients and/or services if the requested program funds are not approved.

BRCHS recognizes the dire need for quality affordable mental health services in Henderson County and is committed to contributing to solutions. As such, BRCHS is willing to absorb an equal share (\$57,250) of the uncompensated care generated by providing these services. If the requested program funds are not approved, BRCHS would be forced to reevaluate the financial feasibility of providing on-site psychiatric services. This would not negatively impact BRCHS as an organization, rather the brunt of the impact would be felt by the 1600+ residents of Henderson County projected to be served, the emergency departments of local hospitals, ems teams and local law enforcement departments. If BRCHS is unable to provide expanded Psychiatric services, there is a significant risk of prolonging the mental health crisis in Henderson County.

### Partnerships

Describe the organization's relationship to County Departments, if any. How does the organization coordinate those services with the County services?

BRCHS prides itself on its relationships with County Departments such as HCPS and HCHD. BRCHS has developed a collaborative relationship with Pardee Hospital to provide direct psychiatric care and medication management for patients by jointly utilizing psychiatric providers. This collaboration increases access for patients being served by BRCHS' integrated care model and adds much needed continuity of care to patients being discharged from in-patient psychiatric hospital units. Recognizing Western Highlands Network plays an important role in the coordination of mental health services in Henderson County, BRCHS is beginning to work more closely with WHN and are in discussions to develop strategies for increasing access in the community.

Fiscal Officer (Business Manager)

<u>9.11.09</u> <sub>Date</sub> <u>9-11-09</u>

F

tive Director (Program Manager)

FY 2010 Maintenance of Effort Funding Application

### Projected Revenue/Expense BRCHS - Mental Health Services Projected Budget 11/1/09 - 10/31/2010

Revenue Total Incor	Patient Revenue Henderson County MOE Uncompensated Care ne:	153,617 57,250 57,250	268,117
Expenses:			
Salaries:	Psychiatric NP (.5 FTE) Mental Health Providers Total Salaries	38,000 133,224	171,224
	Benefits (15%)		25,693
Operating	Total Salaries/Benefits		196,917
	Contracted Psyciatrist (.25 FTE) (2080*.25*100)+12000 Continuing Education Nurse Practitioner (.5 FTE)	750	64,000
	Jane Hunt (1 FTE) Jim Hunt (1 FTE)	1,500 1,500	
	Lee Daly (.8 FTE) Total Continuing Education Office Supplies/Medical Charts # of Visits 3900 Per visit \$0.58	1,200	4,950 2,250
Total Expe	nse		268,117
Net Surplus	s/Deficit	-	0



Blue Ridge Community Health Services

Hi Amy,

Please find enclosed our 2009-2010 MOE Funding Application and accompanying budget.

Here are the highlights.

- BRCHS proposes Henderson County fund half (\$57,250) of the uncompensated care costs for our mental health services.
- Our proposal focuses on the increase in Psychiatry FTEs from 0.4 to 0.75 and a corresponding doubling of Psychiatric encounters from 700 to 1400.
- Since 2007-2008, BRCHS has consistently outperformed targets and mental health services at BRCHS have grown from a target of 400 patients to over 1400 total mental health patients served by the end of the 2008-2009 funding year.

Don't hesitate to contact me if you have any questions or concerns.

We appreciate Henderson County's support of Blue Ridge Community Health Services as we strive to address the mental health needs of the community!

Sincerely,

and BER-

Milton Butterworth

tel: 828,692,4289 fax: 828,692,4398 infa@brchs.com www.brchs.com

# Henderson

1 Historic Courthouse Square #2 Hendersonville, NC 28792 Phone: 697-4809 Fax: 698-6014

# HENDERSON COUNTY

### Maintenance of Effort Funding Application

November 1, 2009 - October 31, 2010

### SECTION

	ORGANIZATION	AL INFORMATION
Organization Name	<del>ni in designa da</del>	Executive Director
Families Together, Inc		Dan Zorn
Contact Person for Grant		Phone Number
Jackie Latek		828 258 0031
Mailing Address		E-Mail
512 N Grove St		ilatek@familiestogether.net
City State	Zip	Fax Number
Hendersonville NC	28792	828 258 0038
Website address (if applicable)		Received County funding in last three years?
www.familiestogether.net		☑ Yes □ No
Type of Application		Amount of Funding requested
One-Time Project      Continuation	Expansion	\$143,000

### SECTIONII

### PERFORMANCE MEASUREMENT

### **Mission Statement**

Please provide the organization's Mission Statement and/or general organizational information.

Families Together is dedicated to providing quality services to our exceptional children, families and adults. FTI will provide services that are culturally aware, strength based, competency based and in partnership with consumers and stakeholders. FTI will assist consumers in building natural supports within their community. FTI will honor and empower consumers and maintain the integrity of all persons served.

### Performance Goals and Objectives

Identify your organization's goals/objectives. Additional goals may be added.

1 To provide access to mental health and substance abuse services for consumers in detention. To assist with diversion of incarceration in certain cases that do not have extensive criminal activity and could safely be returned to the community with service connections.

2 To consult with the Magistrates of the Court regarding Involuntary Commitments to divert inappropriate commitments and increase resource time available to law enforcement for other duties.

3 To provide mental health assessments to the elderly and disabled adults involved with Adult Protective Services, Guardianship Services and At-risk Case Management. To provide linkage to appropriate services, agencies and/or treatment/residential facilities.

4 To provide mental health assessments to children invovled with Child Protective Services. To provide linkage to appropriate services, agencies and /or treatment/residential facilities.

#### Service Outcomes

Please identify measures to assess the effectiveness of your strategies, achievement of goals, efficiency of service delivery or improvement of service delivery

Outcomes	이 가슴 옷이 다 집에 가지 않는 것이 없다.	10.31.2009 o Date	11.1.2009 - 10.31.2010
	Target	Actual	Target
Accept all Mental Health referrals from the Detention Center and DSS	100%		100%
Conduct Clinical Assessments within 5 days	80%		80%
Link consumers to appropriate services	80%		80%
Review/consult Outpatient Commitment Orders prior to issue by the magistrate; including face to face assessment where appropriate.	50%		50%
Timely mental health crisis stabilization/outpatient therapy services to adults referred to DSS for lack of capacity leading to guardianship.	80%		80%
Timely mental health ciris stabilization to adults referred to DSS for abuse, neglect and/or exploitation. Timely emergency crisis response services.	90%		90%
Clinical consultation to DSS Social Workers when requested.	100%		100%
Coordinated and conjoint mental health and DSS service plans and management reports.	90%		90%

### SERVICE SUMMARY

### **Problem Statement**

Identify the problem or need your Organization will address.

Henderson County Detention Center currently books between 14 and 20 criminals per day, on average. Of these, one-third to one-half are reported to have mental health needs. Of those who self-report and who have a current provider, little to no discharge planning or services occur while the consumer is in detention. For those court-involved individuals who present with mental health needs and who have no provider, no assessments or services occur while in detention, or after release. The result of the lack of mental health services in detention results in an increasing number courtinvolved adults languishing in detention and an increasing rate of recidivism. The Detention Center also reports that there are residents in long-term detention who have chronic and severe mental health needs requiring treatment and discharge planning. Due to the lack of planning by a mental health professional, these adults remain in detention. Local Law Enforcement also reports that since January 1, 2009, there have been 211 involuntary comitment orders signed by the Magistrates. Each of these events requires law enforcement participation. Proper utilization of involuntary commitments and partnership with mental health professionals will reduce the amount of time law enforcement is involved in these events, allowing them to return to other law enforcement duties. Henderson County Department of Social Services reports an increase in the high risk population of adults presenting with mental health needs but who lack providers in order to receive appropriate treatment. Specifically, 70% of substantiated protective services are an adult with unmet mental health needs; additionally, this fiscal year has seen a 47% increase in guardianships of adults. Due to the continued changes within the mental health system and the discontinuation of critical services, such as Community Support, an increased number of consumers will de-stabilize and enter into crisis, resulting in over-utilization of community Emergency Rooms, Magistrate's Office, Detention and DSS Adult & Child Protective Services. DSS, Law Enforcement and ERs have inappropriately become the safety net providers for mental health consumers in crisis as they are under-trained and over-utilized for such services. Additionally, due to the economy and mental health reform, service providers are less available to provide children's services; either due to long waitlists or closing of agencies. Immediate and timely access to services for children becomes increasingly difficult to find for agencies that have not partnered with a mental health provider.

### **Target Population**

Describe the target population that will be served with the requested funds.

The populations to be served are court involved adults, long-term detention residents with chronic and severe mental health needs, residents of Henderson County experiencing a mental health crisis, adults at risk of guardianship, adults at risk of losing custody of their children, children who present with mental health needs via DSS, schools, DJJ.

#### Service Goals

How will this service address the problem or need identified?

Adults who are booked at the detention center and who self-report or present with mental health needs will receive a Comprehensive Clinical Assessment (CCA) by a Licensed/Provisional Clinician; will receive recommendations on services necessary for treatment and may be linked with services. Judges will have this information at time of court and can make an informed decision on the sentencing of the individual. Long-term residents of detention will receive a CCA which will include discharge planning from detention; such as identifying housing, linking to treatment services and vocational services. Families Together's (FTI) clinician or Mobile Crisis Management Team will provide consultation and face to face response for Henderson County residents who have requested an involuntary commitment to determine appropriateness of hospitalization. In cases where hospitalization is not appropriate, FTI staff will develop a comprehensive safety plan with the consumer and link consumers to services to prevent future crisis. When Adult Protective Services are notified of guardianship concerns, FTI's clinician will provide an assessment, consultation with DSS staff and timely emergency response. FTI's clinician will be available and on call for DSS APS services in order to reduce guardianship of adults and children. Children who are identified by DSS CPS staff will also receive timely and accurate CCAs and linkage to services.

### Citizens Impacted

How many citizens will be directly impacted by the program funds?

At the Detention Center, an average of 6 citizens with presenting mental health issues are booked per day. For an entire year, a total of 2190 adults may be assessed by a mental health professional. The long term chronic and severe mental health residents at the Detention Center number less than 20 per year. The Magistrates Office averages 21 Involuntary Committments per month; totalling 252 for an entire year. Henderson County Department of Social Services reports that in fiscal year 08/09, they received 2972 phone calls, reports and screenings, of those calls 30% have documented mental health issues. The department projects to impact about 124 Adult Protective Services consults—of cases substantiated (40) 70% have documented mental emotional impairment as a contributing factor, 67 at-risk case management consults—with 44 cases that have serious mental health diagnosis and in need of services, 10 guardianship consults—36% of guardianship cases have MH issues but are not being served by the LME (9 of 25 cases have MH issues). Those with MH issues usually fall into the categories of 65 plus—dementia, depression, anxiety disorders substance abuse, under 65—personality disorders including Borderline and Bi-Polar disorders, schizophrenia and similar disorders, panic disorders, depression and substance abuse which contribute to higher barriers to stability in daily living activities. Child Protective Services currently utilizes *r*TI staff for consultations, assessments and linkage to services at a rate of 10 consumers per week, or 120 child consumers per year.

Funding Implications

Describe the impact on your organization, clients and/or services if the requested program funds are not approved.

In a recent meeting held in Henderson County, the HCDSS reported a 10% increase in adult protective services calls and a 47% increase in Guardianships of adults. In addition, the Sheriff's Department reported that their officers were dealing with "dramatically" more citizens with mental health issues. We believe this is directly related the Mediciad & IPRS funding cuts handed down recently from Raleigh. If we do not engage these problems now it is assumed that more citizens will be served in our Dentention Centers and our DSS, thus resulting in cost shifting.

### Partnerships

Describe the organization's relationship to County Departments, if any. How does the organization coordinate those services with the County services?

Currently, FTI partners with DSS CPS through the DSS Liaison, a Qualified Mental Health Professional employed by FTI who communicates daily with DSS staff on needs, coordinates timely assessments for children, links consumers to services, educates staff on Mental Health reform. FTI's CEO and Liston Smith meet quarterly to review agency needs. FTI's Mobile Crisis Management Director meets periodically with Law Enforcement and County Hospitals to review needs and educate on utilization of this emergency service.

Fiscal Officer (Business Manager)

Executive Director (Program Manager)

Date



### HENDERSON COUNTY

### Maintenance of Effort Funding Application

1 Historic Courthouse Square #2 Hendersonville, NC 28792 Phone: 697-4809 Fax: 698-6014

November 1, 2009 - October 31, 2010

### SECTION

	ORGANIZATION	JAL INFORMATION
Organization Name		Executive Director
The Free Clinics		Judith Long
Contact Person for Grant		Phone Number
Judith Long		828.697.8422
Mailing Address		E-Mail
841 Case Street		ilong@thefreeclinics.org
City State	Zip	Fax Number
Hendersonville NC	28792	828.697.8453
Website address (if applicable)		Received County funding in last three years?
www.thefreeclinics.org		☑ Yes □ No
Type of Application		Amount of Funding requested
One-Time Project      Continuation	Expansion	\$45,000

SECTION II

PERFORMANCE MEASUREMENT

### Mission Statement

Please provide the organization's Mission Statement and/or general organizational information.

To augment the Henderson County healthcare system by providing basic health, prevention, education, and coordination services to uninsured, lowincome clients through free clinics and collaborative programs staffed with qualified volunteer healthcare professionals.

	Performance	Goals ar	ıd (	Db	jecti	ves	

Identify your organization's goals/objectives. Additional goals may be added.

1 Using volunteers, TFC will offer seven clinics and community case management to low-income, uninsured Henderson County residents.

2 TFC will provide at least 2400 patient visits for at least 2,000 unduplicated patients through seven clinics and case management services.

3 The value of professional services given through TFC will be at least \$3,200,000; multiplying almost five times the dollars contributed to TFC.

4 TFC will continue to work collaboratively with both hospitals, healthcare organizations, and social services to provide care to patients.

5 TFC will continue to provide 4,000 prescriptions to over 500 unduplicated clients through the Community Pharmacy (adopted from Partnership for Health in July 2008).

6 TFC will continue to provide over 2,500 prescriptions to 350 unduplicated clients through the Medi-Find Prescription Assistance Program (adopted from Interfaith Assistance Ministries in Fall 2008).

Service Outcomes Please identify measures to assess the effectiveness of your strategies, achievement of goals, efficiency of service delivery or improvement of service delivery

Outcomes		10.31.2009 te [8/31/09]	11.1.2009 - 10.31.2010
	Target	Actual	Target
TFC will recruit, train, and retain volunteers for the psychiatric clinic.	23	14	15
TFC will provide patient visits for the psychiatric clinic.	300	199	250
TFC will offer psychiatric care to unduplicated patients.	215	171	215
TFC will provide case management to psychiatric patients.	275	419	450
TFC will track the number of case management interventions for psychiatric.	1,375	1,052	1,300
TFC will participate in the mental health roundtable, meeting once per month and working collaboratively with providers throughout Henderson County			12 meetings

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### SERVICE SUMMARY

### **Problem Statement**

### Identify the problem or need your Organization will address.

The Psychiatric Clinic of The Free Clinics helps to bridge the gap in access to psychiatric care for low-income, uninsured adults in Henderson County. During its first year of operation, patients had greater access to psychiatrists through the free psychiatric clinic than through other community based providers, providers who had trouble finding and keeping psychiatrists. With the continued change to the state, regional, and local mental healthcare systems, including the elimination of community support for uninsured patients, TFC psychiatric clinic continues to offer a critical service in Henderson County. The free psychiatric clinic ensures that uninsured patients can remain on their medications and in stable living and working

### **Target Population**

Describe the target population that will be served with the requested funds.

The primary target population for the free psychiatric clinic of The Free Clnics meets the following three criteria: Henderson County resident, uninsured, and at or below 185% of the federal poverty level. However, since the core mission of The Free Clinics is to bridge gaps in healthcare and help ensure access to care, we have been willing to see patients with MediCare or MediCaid on a one-time basis to assist with their medication management until they can get an appointment with a psychiatrist through another provider.

### Service Goals

How will this service address the problem or need identified?

The free psychiatric clinic provides patients with access to psychiatric appointments and medication management, both critical elements in the maintenance of stability for persistently mentally ill persons. Primary care physicians are often unwilling to manage persistent mental illnesses (e.g., schizophrenia, bipolar, etc.); those patients need access to psychiatrists. Further, those patients need access to the medications which help them maintain stability. The free psychiatric clinic of The Free Clinics provides both access to psychiatrists and to medications through the Community Pharmacy. These patients also require intensive case management services to assist them in follow-through with appointments, medications, applications, etc. During 2007-08, TFC added more case management time for the psychiatric clinic to ensure proper care. Given the elimination of Community Support by the state, TFC anticipates that the case management support for patients will become even more critical. However, we also anticipate very significant challenges in referring patients to long-term mental health homes during the coming year.

### Citizens Impacted

How many citizens will be directly impacted by the program funds?

The whole of Henderson County is directly impacted by the program funds. If persistently mentally ill patients do not have access to psychiatrists and to medications, they can and do easily decompensate. They end up in the emergency rooms, in the jails, and on the streets. Crime can increase as can waiting time at emergency rooms, not to mention the costs. Directly, at least 185 unduplicated patients will be affected by these program funds, in addition to their family, friends, and employers.

### **Funding Implications**

Describe the impact on your organization, clients and/or services if the requested program funds are not approved.

If these program funds were not approved, The Free Clinics would need to close the psychiatric clinic, leaving hundreds of unduplicated patients without access to psychiatric care and medication management. The impact of the closure of the free psychiatric clinic would resound thoughout the county. Other service providers would not be able to meet the need; they are unable to do so now. Thus, hundreds of unduplicated patients would be left without psychiatric care, decompensating to end up in the emergency rooms, in the jails, and on the street.

#### Partnerships

Describe the organization's relationship to County Departments, if any. How does the organization coordinate those services with the County services?

The Free Clinics case management program works closely with patients to refer them to appropriate services for both their healthcare needs and for additional social services. TFC also works very closely with other healthcare organizations and social service agencies in Henderson County to ensure high quality care to patients. Our new facility was completed in September 2008. In that new facility, TFC will adopt two programs currently run by other organizations--a prescription assistance program and the community pharmacy, effectively integrating care for low-income, uninsured persons in the county. In the new facility, TFC hosts an adult Medicaid Worker from DSS who assists all TFC patients in accessing services.

Fiscal Officer (Business Manager)

Date

Executive Director (Program Manager)



# **HENDERSON COUNTY**

# Maintenance of Effort Funding Application

1 Historic Courthouse Square #2 Hendersonville, NC 28792 Phone: 697-4809 Fax: 698-6014

November 1, 2009 - October 31, 2010

### SECTION

	ORGANIZATION	VAL INFORMATION
Organization Name		Executive Director
The Free Clinics		Judith Long
Contact Person for Grant		Phone Number
Judith Long		828.697.8422
Mailing Address		E-Mail
841 Case Street		jlong@thefreeclinics.org
City State	Zip	Fax Number
Hendersonville NC	28792	828.697.8453
Website address (if applicable)		Received County funding in last three years?
www.thefreeclinics.org		☑ Yes □ No
Type of Application		Amount of Funding requested
One-Time Project      Continuation	Expansion	\$150,000 \$80,000 Por 3. Love 12. 7.09

### SECTION II

PERFORMANCE MEASUREMENT

### **Mission Statement**

Please provide the organization's Mission Statement and/or general organizational information.

To augment the Henderson County healthcare system by providing basic health, prevention, education, and coordination services to uninsured, lowincome clients through free clinics and collaborative programs staffed with qualified volunteer healthcare professionals.

	formance Goals and Objectives
iden	tify your organization's goals/objectives. Additional goals may be added.
1	Using volunteers, TFC will offer seven clinics and community case management to low-income, uninsured Henderson County residents.
2	TFC will provide at least 2400 patient visits for at least 2,000 unduplicated patients through seven clinics and case management services.
3	The value of professional services given through TFC will be at least \$3,200,000; multiplying almost five times the dollars contributed to TFC.
4	TFC will continue to work collaboratively with both hospitals, healthcare organizations, and social services to provide care to patients.
5	TFC will continue to provide 4,000 prescriptions to over 500 unduplicated clients through the Community Pharmacy (adopted from Partnership
	for Health in July 2008).
6	TFC will continue to provide over 2,500 prescriptions to 350 unduplicated clients through the Medi-Find Prescription Assistance Program

(adopted from Interfaith Assistance Ministries in Fall 2008).

Please identify measures to assess the effectiveness of your strategies, achievem improvement of service delivery	ent of goals, e	fficiency of se	ervice delivery or
Outcomes		10.31.2009 o Date	11.1.2009 - 10.31.2010
	Target	Actual	Target
New patients with a mental illess in Henderson County utilizing the Community Pharmacy	175	193	225
Total number of patients with a mental illness in Henderson County utilizing the Community Pharmacy	550	836	1,000
Total number of psychotropic prescriptions filled for Henderson County residents with a mental illness through the Community Pharmacy (formerly CHN Pharmacy)	1,100	1,247	1,500

FY 2010 Maintenance of Effort Funding Application

### SERVICE SUMMARY

#### Problem Statement

Identify the problem or need your Organization will address.

The Community Pharmacy of The Free Clinics helps to bridge the gap in access to psychiatric medications for low-income, uninsured adults in Henderson County. The Community Pharmacy (formerly CHN Pharmacy) is now a program of The Free Clinics, integrating care for low-income, uninsured adults with our seven clinics and community case management. The Community Pharmacy under CHN's leadership truly became the safety net medication provider for low-income, uninsured residents of Henderson County who are mentally ill and need access to medications. There is simply no where else for residents to get their anti-psychotics or anti-depressants for free or \$3 per month. In conjuntion with our Psychiatric Clinic and the Medi-Find Prescription Assistance Program, the Community Pharmacy provides a continuum of care with psychiatric assessment and access to affordable psychotropic medications. The combination of access to psychiatrists through the free Psychiatric Clinic and short-term medications through the Community Pharmacy and long-term, medications through Medi-Find ensures that uninsured patients can remain on their medications and in stable living and working situations.

#### Target Population

Describe the target population that will be served with the requested funds.

An estimated 22.1% of Americans ages 18 and older suffer from a diagnosable mental illness in a given year. This translates to approximately 20,734 residents of Henderson County, among whom over 4,450 are uninsured. This request for the Community Pharmacy targets Henderson County residents who are uninsured, low-income, and mentally ill. These are our neighbors who without mental health services and medications would decompensate and end up in our local Emergency Departments, inpatient Psychiatric Units, state mental hospitals, or jails.

#### Service Goals

How will this service address the problem or need identified?

The Community Pharmacy (formerly CHN Pharmacy) has truly become the safety net provider for the uninsured, low-income, mentally ill residents of Henderson County. These funds will continue to provide accessible, free or affordable (\$3 per month) psychiatric medications to our uninsured, towincome mentally ill. Access to affordable medications gives patients the opportunity to manage their illness in the least restrictive environment or provide critical stabilizing medications to the mentally ill who have recently been released from psychiatric inpatient stays. The Community Pharmcy was formally integrated in the fall of 2008 with the Medi-Find prescription assistance program following the adoption of Medi-Find by TFC. This helps reduce long-term cost of medications by requiring eligible patients to utilize the free drug programs available through pharmaceutical companies. Access to medications continues to be a critical need for patients, given the devestating reduction in services anticipated as a result of state budget elimination of community support for uninsured patients statewide.

#### Citizens Impacted

How many citizens will be directly impacted by the program funds?

The whole of Henderson County is directly impacted by the program funds. If persistently mentally ill patients do not have access to psychiatrists and to medications, they can and do easily decompensate. They end up in the emergency rooms, in the jails, and on the streets. Crime can increase as can waiting time at emergency rooms, not to mention the costs. Directly, 1,000 patients will be affected by these program funds, in addition to their family, friends, and employers.

### Funding Implications

Describe the impact on your organization, clients and/or services if the requested program funds are not approved.

If these program funds were not approved, the Community Pharmcy would not be able to afford the purchase of costly psychotropic medications needed by our uninsured, low-income, mentally ill residents, leaving hundreds of unduplicated patients without access to the medications so critical for their stability and care. The impact of the unavailability of psychiatric medications would resound thoughout the county. Thus, hundreds of unduplicated patients would be left without psychiatric care, decompensating to end up in the emergency rooms, in the jails, and on the street. Any delay in access to medications for this very unstable group of patients would likely result in far more costly consequences.

### Partnerships

Describe the organization's relationship to County Departments, if any. How does the organization coordinate those services with the County services?

The Free Clinics and the Community Pharmacy program have strong working relationships with the Department of Public Health and the Department of Social Services. TFC works closely with patients to refer them to appropriate services for both their healthcare needs and for additional social services. TFC also works very closely with other healthcare organizations and social service agencies in Henderson County to ensure high quality care to patients. TFC has adopted the Medi-Find prescription assistance program and fully integrated our seven clinics, community case mangement, and the Community Pharmacy, effectively integrating care for low-income, uninsured persons. Further, DSS has outposted an Adult Medicaid worker in the new facility, easing access to Medicaid for those patients who qualify. Finally, TFC is entering into a new partnership with AstraZeneca through their AZ&Me program for bulk shipments of free medications which will soon be available to all qualifying patients in Henderson County. With regard to psychiatric medications, Seroquel (a commonly prescribed and very expensive medication) will soon be available free through the pharmacy, potentially reducing the cost to Henderson County since it will no longer need to be purchased.

Fiscal Officer (Business Manager)

Date

Executive Director (Program Manager)



# HENDERSON COUNTY

1 Historic Courthouse Square #2 Hendersonville, NC 28792 Phone: 697-4809 Fax: 698-6014

### Maintenance of Effort Funding Application

November 1, 2009 - October 31, 2010

SECTION	para de la companya d			
	ORGANIZATIO	VAL INFORMATION		
Organization Name		Executive Director		
Henderson County Department of	f Public Health	Thomas Bridges, MPH		
Contact Person for Grant		Phone Number		
Diana Curran, MD		828-694-6096		
Mailing Address		E-Mail		
1200 Spartanburg Highway Suite	100	md@hendersoncountync.org		
City State	Zip	Fax Number		
Hendersonville NC	28792	828-697-4691		
Website address (if applicable)		Received County funding in last three years?		
www.hendersoncountync.org/hea	<u>lth</u>	🗹 Yes 🔲 No		
Type of Application		Amount of Funding requested		
One-Time Project      Continuation	Expansion	\$37,821		

### SECTIONIL

Second State

### PERFORMANCE MEASUREMENT

### **Mission Statement**

Please provide the organization's Mission Statement and/or general organizational information.

Assess the health of the community and assure that its health needs are met by preventing diseases and promoting wellness through the delivery of clinical, environmental, and community health and educational services.

### Performance Goals and Objectives

Identify your organization's goals/objectives. Additional goals may be added.

1 Routinely screen patients of HCDPH for depression and other related mental health conditions.

2 Provide bilingual behavioral health services for HCDPH clients.

3 Provide early pregnancy screening to identify psychosocial stressors, mental health disorders, substance abuse and domestic violence; initiate behavioral health early in pregnancy to prevent potential adverse developmental effects on children of mothers with these conditions.

### Service Outcomes

Please identify measures to assess the effectiveness of your strategies, achievement of goals, efficiency of service delivery or improvement of service delivery

Outcomes		10.31.2009 o Date	11.1.2009 - 10.31.2010
	Target	Actual	Target
Continue to screen rountinely for depression and other related mental health disorders for HCDPH clients in family planning (annual visit), adolescent physicals, and maternity clients at each trimester of pregnancy and postpartum, with referrals for counseling as indicated.		1200*	1200
Maintain caseload and availability of bilingual behavioral health counselor visits for all client types.	175	147	105
Initiate behavioral health services for pregnant women with positive screenings for psychosocial stressors, mental health disorders, substance abuse and/or domestic violence at early pregnancy screening.			75
*This is an estimate. Data since HIS implementation Feb 09 not retrievable.			

### SECTI(0)A III

### SERVICE SUMMARY

### Problem Statement Identify the problem or need your Organization will address.

In the annual HCDPH State of the County's Health report for the past several years, we have noted a statistically higher number of clients needing hospitalization for mental disorders and substance abuse than the state average (355.8 vs 260.0). One of our agency's methods of addressing the higher mental health needs has been to use grant funding through collaboration with other community agencies to develop an integrated behavioral health program that enhances delivery of mental health counseling services at the time of a clinical service. Our services include screening and treatment for depression and other disorders at the time of all our maternal health physicals, family planning exams, and adolescent physical exams. The highest needs for mental health services in the community are for the uninsured and underinsured county residents with little access to services, especially early intervention counseling that might prevent a mental health crisis and decrease expensive care including hospitalization. Within the past year, we have reached about 175 clients with a diagnosis of depression or a related mood disorder, substance abuse, physical or sexual abuse,

Target Population

Describe the target population that will be served with the requested funds. Uninsured, low-income and ethnically diverse residents of Henderson County, with a focus on women and children.

### Service Goals

How will this service address the problem or need identified?

The Integrated Behavioral Health program will continue to be available for residents of our county who access primary care services at the HCDPH. Clients can be referred for the program or may call and request an appointment with the therapist. The service will be available regardless of ability to pay. We will bill Medicaid for eligible patients and use MOE funds for the same services for the uninsured. We will collaborate with public health nurses doing case coordination to identify potential clients and obtain referrals into the program.

### **Citizens Impacted**

How many citizens will be directly impacted by the program funds?

The Behavioral Health Program provides behavioral health services through screening, crisis intervention and referrals for counseling to all maternal health, family planning, children and adolescents served by HCDPH, or those served by our outreach public health nurses. Integrated behavioral health services will include counseling and treatment for our primary care clients, and stablization then referral for non-primary care clients.

### Funding Implications

Describe the impact on your organization, clients and/or services if the requested program funds are not approved.

If the Behavioral Health Program is not funded, residents of the county will lose to one of its most readily assessible counseling services for families and children, and one of the few bi-lingual counselors. In addition, clients screened for depression would no longer have access to crisis intervention, counseling and early medication initiation leading to delays in diagnosis and treatment, thereby increasing the cost to the county and hospitals.

### Partnerships

Describe the organization's relationship to County Departments, if any. How does the organization coordinate those services with the County services?

Henderson County Department of Public Health is a county agency.

Fiscal Officer (Business Manager)

Date

Executive Director (Program Manager)

FY 2010 Maintenance of Effort Funding Application



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### HENDERSON COUNTY

Maintenance of Effort Funding Application November 4, 2009 - October 31, 2010

Seerioni		ORGANIZATION	NAL INFORMATION
Organization Na	me		Executive Director
Mainstay, Inc.			Tanya Blackford
Contact Person	for Grant		Phone Number
Tanya Blackford			828.693.3840
Mailing Address			E-Mail
133 5th Avenue	West		tanyab@mainstayhelp.org
City	State	Zip	Fax Number
Hendersonville		28792	828.696.8140
Website address	(if applicable)		Received County funding in last three years?
<u>www.mainstayhe</u>	lp.org		Yes No
Type of Applicati		·····	Amount of Funding requested
One-Time Proje	ct 🗹 Continuation	Expansion	\$25,000

### SECTION IL CONTRACTOR

### PERFORMANCE MEASUREMENT

### Mission Statement

Please provide the organization's Mission Statement and/or general organizational information.

Mainstay's mission is to build and support a community free of domestic violence through advocacy, education and intervention. Mainstay is an emergency shelter for victims of domestic violence, provides bedspace (when available) to homeless women and their children, offers free counseling services, group therapy, anger management classes, parenting programs, daycare, community education, and also offers transitional housing.

Performance Goals and Objectives

Identify your organization's goals/objectives. Additional goals may be added.

To provide a safe shelter for victims of domestic violence including those victims who may have mental health and/or substance abuse. 1

- To provide services for persons with co-occuring issues of mental health and/or substance abuse and domestic violence. 2 3
- To provide community support services for person with co-occuring mental health and/or substance abuse and domestic violence.

Service Outcomes Please identify measures to assess the effectiveness of your strategies, achievement of goals, efficiency of service delivery or improvement of service delivery 11.1.2008 - 10.31,2009 Outcomes Year To Date 11.1.2009 - 10,31.2010 Target Actual Target To provide housing for 90 people with co-occuring and/or mental health issues by 60 70 90 November 1, 2010. Of those 90 people sheltered, 30% will exit shelter to a home other than with the 75 72 63 abuser and 30% will complete 50% of their goals through counseling and community support.

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### SERVICE SUMMARY

### Problem Statement

### Identify the problem or need your Organization will address.

Mental health services in Henderson County are very difficult to access for people especially those who are not currently in service and for those without insurance, often only available after long waiting periods. Mainstay, primarily a provider of crisis services to victims of domestic violence, will provide crisis services and community mental health support services/referrals to persons utilizing Mainstay's shelter and outreach services. Mainstay has partnered with Blue Ridge Health Center for psychiatric assessments and medical care.

Target Population

Describe the target population that will be served with the requested funds.

Individuals with co-occuring issues of mental health/substance abuse and domestic violence. Mainstay sheltered in 2008/2009 more than 124 Individuals. An estimated 75% of those sheltered have either or both mental health and/or substance abuse. In addition to outreach services, Mainstay provides emergency shelter services to an estimated 280 women and children a year, most of whom are without insurance and are not currently users of the mental health care system. With the economic downturn this past year, are shelter has remained at full/or near capacity.

Service Goals

How will this service address the problem or need identified?

Mainstay will provide support services/shelter and crisis intervention for those presenting with mental health/substance abuse and domestic violence issues. The goal of services is to help individuals/families overcome barriers that prevent them from being safe and independent members of the community.

Citizens Impacted

How many citizens will be directly impacted by the program funds?

Mainstay provides services to more than 800 individuals/families a year. Services are based on the presenting need of the person seeking services. All services are available to all persons based on willingness of the individual in question. Services are available to all residents of Henderson county. Mainstay operates a 24-hour crisis line and is staffed 24 hours a day. Mainstay makes our services available to all victims identified by over 3000 domestic violence calls placed a year to Henderson County 911.

Funding Implications

Describe the impact on your organization, clients and/or services if the requested program funds are not approved.

Because of the lack of easily accessible mental health and substance abuse services, the needs of most clients in these categories may not be met in a timely enough manner to address the potential dangers of their circumstances as it relates to domestic violence. Untreated mental health and substance abuse issues make it impossible for victims of domestic violence to live safely with other women and children in a shelter setting or to allow them to address those circumstances which brought them into shelter.

Partnerships Describe the organization's relationship to County Departments, if any. How does the organization coordinate those services with the County services?

Mainstay partners with DSS to provide shelter for domestic violence victims under the TANF program. NO MONEY THIS YEAR... Mainstay works with the Health Department for medical care for some of Mainstay's clients. Mainstay works closely with the District Attorney's Office and the Sheriff's Office to provide services to victims and offenders through Mainstay's Abuser Intervention Program.

Fiscal Officer (Business Manager)

Executive Director (Program Manager) FY 2010 Maintenance of Effort Funding Application

### Henderson County

### 1 Historic Courthouse Square #2 Hendersonville, NC 28792 Phone: 697-4809 Fax: 698-6014

# HENDERSON COUNTY

Maintenance of Effort Funding Application

November 1, 2009 - October 31, 2010

### SECTION

		ORGANIZATION	NAL INFORMATION
Organization Name			Executive Director
Parkway Beha	vioral Health		Blair H. Clark
Contact Perso	n for Grant	******	Phone Number
Sandra Layton			828-697-2660 ex 206
Mailing Address			E-Mail
120 South Gro	ive St.		slayton@parkwaybh.com
City	State	Zip	Fax Number
Henderson	NC	28792	828 697-2986
Website addre	ess (if applicable)		Received County funding in last three years?
www.parkwaył	<u>ph.com</u>		I Yes □ No
Type of Application			Amount of Funding requested
One-Time Pro	ject 🗹 Continuation	Expansion	\$18,000

### SECTION

PERFORMANCE MEASUREMENT

### **Mission Statement**

Please provide the organization's Mission Statement and/or general organizational information.

Parkway Behavioral Health programs exist to provide high quality, strength/evidence based, person/family-centered, cost-effective, culturally sensitive services to persons who are experiencing, or at risk of developing, mental health or substance abuse disorders in the North Carolina communities we serve. Currently PBH serves Buncombe, Henderson and Rutherford counties.

Parkway Behavioral Health, (PBH) is a comprehensive MH/SA service provider serving the needs of residents who are indigent and or have state medicaid. PBH has been serving consumers in Henderson County for nearly three years. PBH contracts with Western Highlands to provide emergency services to Henderson County. The owners of PBH, Sandra Layton and Blair Clark are also both licensed mental health and substance abuse clinicians with over 50 years in service to those with MH/SA issues. PBH has 10 staff in Henderson County. PBH has served over 800 different consumers in Henderson county and currently has over 300 open cases. Parkway has operating expenses in its Hendersonville office of \$398,000 annually and generates \$420,000. One significant service offered by PBH is our patient assistance program, (PAP).

Our PAP program obtains free medications for indigent clients needing mental health medications to get their medications free. PBH has recieved over \$480,000 in free medications for indigent consumers through its PAP program this year. That constitutes over 620 hours of work we provided for free.

 Performance Goals and Objectives

 Identify your organization's goals/objectives. Additional goals may be added.

 1
 The objective is to assure continued high quality services for over 240 Hendsersonville residence while maintaining employment for 10 employees.

 2
 Parkway will provide Patient Assistance programming for all consumers requiring medication management who can not afford their medication.

 3
 Parkway will provide case management services which for basic consumer who will no longer be ellegible for other services due to State budget cuts.

Service Outcomes			
Please identify measures to assess the effectiveness of your strategies, achieven improvement of service delivery	nent of goals, e	efficiency of se	ervice delivery or
Outcomes		10.31.2009 To Date	11.1.2009 - 10.31.2010
	Target	Actual	Target
Parkway will provide 500 hours of staff time with PAP and case management	Į.	1	500 hours
Parkway will serve over 200 Hendersonville residents.			200 clients
Parkway will retain its current staff		[	10 staff
Parkway will obtain over request over 100,000 dolars worth of medication for indigent clients.			\$100,000

### SECTION III

### SERVICE SUMMARY

### Problem Statement

Identify the problem or need your Organization will address.

Many of the services needed by Hendsersonville residents are not, or will soon not be, funded by the State or Western Highlands. This includes Patient Assistance Programming where clients are able to receive free medication from pharmaceutical companies. Another is case management which includes most services that are not face to face to assure consumers are able to get their needs met. Patient Assistance Programming and Case Management will consume over over 500 hours of mostly licensed staff time, over \$35,000 in unreimbursable services. In 2008 Parkway's net profit was \$31,000 of a 1.5 million dollar budget. That is a 2% margin. Parkway plans to continue to meet the needs of Hendersonville residents with Mental Health and Substance Abuse problems even though many of the needed services will be unreimbursable due to state cuts. Parkway's can absorb up to half of those losses. We request \$17,500 in MOE funds from Henderson County to help cover the rest of the losses.

### **Target Population**

Describe the target population that will be served with the requested funds. Clients serviced will be Adult Mentally III, AMSRE and Adult Substance Abusers.

### Service Goals

How will this service address the problem or need identified?

Partially funding PAP and Case Management services will allow Parkway to continue to provide these valuable services for consumers in the AMI and ASI target population consumers. Maintaining client stability thru medications and case management will hopefully divert consumers from local hospital emergency rooms and reduce criminal justice services.

### **Citizens Impacted**

How many citizens will be directly impacted by the program funds? At least, 200 citizens of Henderson County will be impacted by the program funds.

### Funding Implications

Describe the impact on your organization, clients and/or services if the requested program funds are not approved. If this is not funded Parkway will have to look at the viability of each offices current continuum of services and evaluate which services can be continued based on budget cuts. Without MOE dollars, there will likely be a reduction of services Parkway currently provides to Henderson County residents.

Partnerships

Describe the organization's relationship to County Departments, if any. How does the organization coordinate those services with the County services?

Parkway is a strong community provider and an active member of the Hendersonville Provider Group. Parkway works closely with other County and Community partners such as DSS, Vocational Rehab, CJJP/TASC, Parkridge and Pardee Hospitals, The Free Clinic, Probation and Parole and many other public providers. Parkway coodinates services through case management activities.

Blair Clark	9-10-09	
Fiscal Officer (Business Manager)	Date	and a second
Sandra Layton	9/102009	
Executive Director (Program Manager)	Date	NANCALLE-HA-MARKANISTICS/STOCICS/INVANCALLER
EY 2010 Maintenance of Effort Funding Application		2 of

### Henderson County

# **HENDERSON COUNTY**

Maintenance of Effort Funding Application

November 1, 2009 - October 31, 2010

1 Historic Courthouse Square #2 Hendersonville, NC 28792 Phone: 697-4809 Fax: 698-6014

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	ORG	ANIZATIONAL INF	ORMATION	
Organization Name			Executive Director	
Sixth Avenue Psychiatric R	ehabilitation Partners, In	С.	Jacqueline Combs	
Contact Person for Grant			Phone Number	
Jacqueline Combs			828-697-1581	
Mailing Address		E-Mail		
714 6th Ave. W.			jcombs@sixth-avenue.org	
City	State	Zip	Fax Number	
Hendersonville	NC	28739	828-697-4492	
Website address (if applica	able)		Received County funding in last three years?	
www.sixth-avenue.org			🗹 Yes 🗌 No	
Type of Application			Amount of Funding requested	
One-Time Project	Continuation	Expansion	\$265,000	

### SECTIONI

### PERFORMANCE MEASUREMENT

### **Mission Statement**

Please provide the organization's Mission Statement and/or general organizational information.

Sixth Avenue West Clubhouse and Psychiatric Rehabilitation Partners exist to partner with persons with mental illness and co-occurring substance abuse to create community and individualized planning and services for optimal wellness, recovery, and personhood.

Performance Goals and Objectives			
Identify your organization's goals/objectives. Additional goals may be added.			
1 Sustain Clubhouse Psychosocial Rehabilitation			
2 Sustain continuity of care for those receiving Community Support and plan for the elimination of that serv	ice definition by the	state	
3 Sustain Assertive Community Treatment Team Services			
4 Sustain and expand Psychiatry Services to meet the need of those enrolled in our agency			
5 Sustain Peer Support Services			····
6 Sustain and expand Individual and Group Therapy			
7 Endorsement for Community Support Team			
8 Maintain Licensed Professional Requirements			
Service Outcomes			
Please identify measures to assess the effectiveness of your strategies, achievement of goals, efficie	ncy of service del	ivery or impro	ovement of service delivery
	11.1.2008 - 10.3 To Da		11.1.2009 - 10.31.2010
Outcomes		Actual	
Clubhouse Psychosocial Rehabilitation	Target as needed with	66	Target all those who qualify and
Since Aug. 09 * Rate reduction of 10% * Automatic Clinical Home	no waiting list	00	desire the service
Community Support	continuity of	61	States date for elimination
Since August 09	care for those		is June 2010;we will
The state has changed the implementation of this 3xs since our apllication. The NCDHHS- MHDDSA	currently		transition to the service
implementation #63, interpreted by WH Netwrok, forced the discharge of clinets from CS by	served until		that is implemented by
10/12/09. That implementation cost us around \$8500/mo. and was implemented 9 months earlierthan			the state, to replace
previously announced. * This change also eliminated the gatekeeper care coordination role, the	transition to		Community Support
after hours role, and the clinical home role, with nothing to replace it. * This change aslo cut all	other services		
anced service Medicaid and state rates, with the exception of ACTT, by 10%.		37	as needed and
e Community Treatment Team	as needed and	31	as needed and appropriate up to 49
	appropriate up to 49		persons
	consumers		persons
	Gonadinera		

Community Support Team Since Aug. 09 * * Rate reduction of 10%	Endorsement by WHLME	Application	Endorsement; Can serve up to 49 persons at one
Since Aug. 09 Trate reduction of 1078			time
CARF Accreditation	1-Nov-09	Survey Dates 9/28,29,30, 2009	
Alliance for Human Services Accreditation	post CARF	Matrix Complete; scheduled for 1/10	by 2/10
Quality Assurance Coordinator / Compliance Officer	Hire a QA Manager that also serves as a compliance officer	Position filled 2/02/09	
Outpatient Wellness & Recovery Services	as needed		
Add Psychiatry Time	as needed	12 hrs/wk	16 hrs/wk or as needed

### **Problem Statement** Identify the problem or need your Organization will address.

ninability and Capacity for Growth to Meet Citizen Needs: Our agency currently offers a full array of enhanced and basic services for those adult persons living with a nental illness and also to those with co-occurring substance abuse. Due to state and legislative budget changes, the pending implementation of service definition þ., revisions and standards of care, we will have to supplement our funding streams to sustain and expand our services and our continuity of care. We also have to meet new and mandated staffing requirements for Licensed Professionals. LPs and Psychiatrists are very expensive and rarely pay for themselves. We consistnatly have to do more with less. With MOE funding we will be able to both sustain and enhance our current services to those in Henderson County who are most vulnerable and to those who have reached a functional level of stability within the continuum of recovery.

### Target Population

Describe the target population that will be served with the requested funds.

The Official Target Populations are: Adult persons with serious and persistent mental illness to include a secondary diagnosis of substance abuse. These populations also are at risk for diabetes, heart disease, recurrent hospitalizations, incarcerations, homelessness, emergency room visits, and lack primary physician care and follow up.

### Service Goals How will this service address the problem or need identified?

Sixth Avenue is designed to offer adults with mental illness a full array of services under one agency. With our expansion of services last year to include basic services, our enrolled clients have the opportunity for the very best continuity of care and a full recovery continuum. The ability to grow our capacity to sustain and enhance these services will have a direct impact on our counties' other resources by decreasing the burden of cost to other community resources i.e.: DSS, the Detention Center, the Rescue Mission, law enforcement, the local hospitals, primary care homes, and other providers.

Citizens Impacted How many citizens will be directly impacted by the program funds?

With our current staffing pattern, we would have the capacity to serve up to 250 persons at any given time. We would not exceed that capacity and risk compromising the integrity of individualized services.

#### ing Implications

Describe the impact on your organization, clients and/or services if the requested program funds are not approved. We are currently serving approximately 192 individuals with services that cannot be provided anywhere else in our county with the same quality or continuity of care. We have followed the majority of currently enrolled clients throughout their recovery continuum and have demonstrated success at maintaining those persons in their local community with the least restrictive services. Eliminating these critical services would be damaging: (1) The agency would be forced to cut operational and program costs resulting in service gaps that would directly impact the local community by a. increasing service costs for other providers; b. decreasing the service array, increasing the burden on the already over-burdened provider network; and c. increasing costs to other community services agencies, i.e. homeless shelters, hospitals, jail, etc. (2) The burden on the local citizenship and charitable organizations for charitable funds, donations, fundraising, etc. would be significantly increased.

Partnerships

Describe the organization's relationship to County Departments, if any. How does the organization coordinate those services with the County services?

Our goal as an agency is to respond effectively and appropriately to community mental health needs. Our agency's history of long-term service to Henderson County combined with our staff's longevity (collectively exceeding 150 years), has demonstrated the ability to maintain and grow community partnerships necessary to sustain our client population. Our agency is represented on every mental health related roundtable in the county. We also provide a volunteer clinician to the Free Clinics on Tuesday evening and two Board members on the NAMI Four Seasons Board of Directors. We developed a free support group ("Bridges") for our county's mentally ill citizens who are waiting for services or their first appointment, and we provide a clinician for that group. We additionally provide space and support for "Connections," a peer support group. We also have provided in-services to other community agencies at no cost. Finally, we have a lease agreement with the County for our property and are happy to have a forthright relationship with Henderson County.

"iscal Officer (Business Manager)



Sixth Avenue Psychiatric Rehabilitation Partners,

Board of Directors September, 2009

Andersen, TerryTreasurer (W) 692-2583 Board Term ends 6/30/10 (H) 692-2583 Term as Treasurer ends 6/30/10 (fax) 697-6955 terry@carlandcpa.com	Partner of local CPA firm with offices in Hendersonville and Brevard, graduate of UNC-CH, treasurer of various non-profits over the last twenty years including Four Seasons Hospice, IAM (current), The Free Clinics (current), Finance chair and former Council president of Grace Lutheran.
Bobb, Dick Board Term ends 6/30/12 2016 Hebron Road Hendersonville 28739 (H) 697-2521 rbobb5@att.net	Past CEO, President and board member of Guide Dogs for the Blind, Inc. Also President and General Manager of USL Capital Equipment Financing. Also extensive experience as a nonprofit board member including BRCC Educational Fund, Governor Morehead Foundation.
Fagerlin, Mark Board Term ends 6/30/11 Vice Chair tern ends 6/30/10 54 Hunters Lane Hendersonville 28791 595-4334 m.fagerlin@mchsi.com	Retired president of a privately owned operations and maintenance co; long history of specializing in problem identification and resolution; current owner of InnoComm, Inc. providing businesses with management solutions and consultation. Skill set includes marketing and PR, financial management, strategic planning& fund-raising. Educational backgroundphysics and mathematics.
Gernoske, Joe Board Term ends 6/30/10 19 Iroquois Drive Hendersonville 28791 (W) 692-6114 (H)) 697-5308 parishvisitor@bellsouth.net	Pastoral Care Minister, Trinity Presbyterian Church since 2001; Business experience : GM of Mobile Home Co, Production Mgr. with General Mills, self employed as a Business Broker and owner of an Employment Agency/Career Counseling firm. MBA degree. 400 hours of Clinical Pastoral Education and 4 years of Chaplain Volunteer experience in psychiatric ward at Asheville VA Hospital. Start up 6 <sup>th</sup> Ave Board Chair from 11/06 - 6/09.
Hildebrand, Robin Board Term ends 6/30/12 2741 Miller Lane Hendersonville 28791 Home 693-4038 Cell 243-4446 earsh@bellsouth.net	Currently employed with Sara Massagee as a staff accountant. Licensed by US treasury with a designation of Enrolled Agent. Specialty is Income Tax. My practice encompasses all aspect of tax preparation and compilation of accounting and financial records. I can represent clients with the IRS. 10 year resident of Hendersonville.
Jackson, Marilyn Board Term ends 6/30/11 Home/Cell: 817-3457; Office: 681-2276 168 Cherry Birch Lane, Saluda 28773 mstillwaters@yahoo.com	Currently the Director of Behavioral Health Services at Park Ridge Hospitalhad similar position at Spartanburg Hospital ; two decades of work in Behavioral Health mgt for both mental illness and substance abuse including program direction and development, personnel functions, facility accreditation and fiscal mgt, board experience with non profit foundation treating veterans for PTSD.
Kincaid, Daniel Board Term ends 6/30/10 184 Benhurst Court Hendersonville 28791 cell: 458-6206 H: 891-7147 daniel_kincaid@msn.com	30 yrs with capital equipment/energy industriesmarketing, sales, business development, sales engineering. BSE in Civil Engineering from Duke plus MBA from U of Toledo. Volunteer experience in addition to being Elder and Deacon in two churches, includes Habitat for Humanity and consultant work for Executive Service Corp in Charlotte and Waste Reduction Partners locally
Kisner, Jim Board Term ends 6/30/10 106 Continental Dr Board Chair Term ends 6/30/10 Flat Rock, NC 28731 692-9170 cell 606-0674 kisnerjb@mchsi.com	BS in Chemical Engineering; 33 years of manufacturing management with DuPont, Sterling Diagnostic Imaging and Agfa Corporation; member of Trinity Presbyterian Church for 37 yearsmarried his wife, Nancy, 2 years prior to joining Trinity; two children and three grandchildren; very active in his churchelder for 12 years; has a significant and verifiable track record of cost reduction in manufacturing while maintaining high quality standards.



# HENDERSON COUNTY

### Maintenance of Effort Funding Application

1 Historic Courthouse Square #2 Hendersonville, NC 28792 Phone: 697-4809 Fax: 698-6014

Colorado La Maria

November 1, 2009 - October 31, 2010

SECTIONI		
	ORGA	ANIZATIONAL INFORMATION
Organization Name	Sector ( ) and an address of the sector of the	Executive Director
Vocational Solutions of	Henderson County	Joe White
Contact Person for Gra	nt	Phone Number
Joe White		828-696-0361
Mailing Address		E-Mail
2110 Spartanburg High	way	jwhite@vocsol.com
City State	Zip	Fax Number
E. Flat Rock NC	2872	26 828-696-0361
Website address (if app	licable)	Received County funding in last three years?
www.vocsol.com		☑ Yes □ No
Type of Application		Amount of Funding requested
□ One-Time Project ☑ Cor	ntinuation 🗌 Exp	xpansion \$30,000

SECTIONII

PERFORMANCE MEASUREMENT

### Mission Statement

Please provide the organization's Mission Statement and/or general organizational information.

VOCATIONAL SOLUTIONS OF HENDERSON COUNTY is dedicated to providing career and life skills training to adults with disabilities or other vocational barriers, in a safe, caring environment.

The organization will offer programs facilitated by qualified staff that will foster each person's potential for self-sufficiency and quality of life, and will engage in income-generating business enterprises to sustain the long-term goals of program participant employment.

### Performance Goals and Objectives

Identify your organization's goals/objectives. Additional goals may be added.

1 To develop work skills in mentally and physically challenged adults

2 To provide income potential through skills training and work opportunities for adults with disabilities

3 To develop social skills in mentally and physically challenged adults

4

 Service Outcomes

 Please identify measures to assess the effectiveness of your strategies, achievement of goals, efficiency of service delivery or improvement of service delivery

 11.1.2008 - 10.31.2009

 Outcomes
 11.1.2009 - 10.31.2009

 Year To Date
 11.1.2009 - 10.31.2010

 Target
 Actual
 Target

 We are developing work and social skills in mentally and physically challenged adults
 90
 84
 90

90

84

We are providing income potential through skills training and work opportunities

90

SECTIONIII

Identify the problem or need your Organization will address.

People with disabilities have very limited vocational opportunities without special training and assistance. Vocational Solutions has been providing opportunities for 42 years. Funding for the services we provide has decreased over the years. State budget cuts have hurt all of our programs. We try to make up the difference between service costs and the funding we get with income generated through the business enterprises we operate. In the current economic climate we have struggled to do this. Cash reserves are being depleted.

SERVICE SUMMARY

Target Population

Describe the target population that will be served with the requested funds.

We serve adults with disabilities in Henderson County. These disabilities include autism, blindness, deafness, mental retardation, and physical disabilities.

Service Goals

How will this service address the problem or need identified?

The vocational, social and life skills training we provide enables people with disabilities to earn an income and be more self sufficient. These people take pride in their contribution to the jobs and in the paycheck they earn.

Citizens Impacted

How many citizens will be directly impacted by the program funds?

Our program serves approximately 70 people daily with about 90 different individuals throughout the year. Some of the people are now employed in the community and no longer need our assistance. Others will remain in our programs for as long as they choose to work.

Funding Implications

Describe the impact on your organization, clients and/or services if the requested program funds are not approved.

Services are in danger of being cut now because of insufficient funding. We have depleted most of our cash reserves. Approving the requested funds will help us continue services until our business enterprises can once again generate the income required to support our programs.

Partnerships

Describe the organization's relationship to County Departments, if any. How does the organization coordinate those services with the County services?

We work with WCCA to provide transportation for more than half of the people in our programs.

Tracy Luckadoo

Fiscal Officer (Business Manage

9/10/2009 Date

Date

9/10/2009

Joe White

Executive Director (Program Manager)

FY 2010 Maintenance of Effort Funding Application