

Wayne & Holmes Counties

EXECUTIVE SUMMARY FY20

Fiscal year 20 began with the implementation of a new electronic health records system. Administration anticipated that the transfer to a new system would be the most challenging project of the year. And while it was time consuming, detailed, with difficulties encountered at many turns, this project, of course, paled in comparison to the pandemic. Management of a service delivery system during a pandemic is training that few administrators have, but skills that all had to develop in a relatively short period of time. While coping with the multitude of changes brought about due to COVID-19, the Counseling Center strived to provide high quality behavioral health services to the residents of Wayne and Holmes Counties.

During the fiscal year, the organization served 5,839 different persons, an increase of 24.21%, over last fiscal year, and several thousand more community members were impacted by one of the agency's consultation, education, or prevention programs.

The Center averaged 176 new admissions per month, with an average monthly caseload of 4,156. Demand was high throughout most of the year with several services maintaining waiting lists.

Crisis patients were seen the same day and, in many cases, immediately. Walk in crisis services were provided during business hours and crisis services were available on a 24 hour/7-day basis. The crisis intervention staff provided 836 pre-hospitalization screenings (an average of 2.3 per day).

Referral sources included hospitals/emergency departments, physician offices, law enforcement, children's services, schools, outpatient mental health providers, courts, developmental disabilities boards, other social service agencies, self, and family/friends.

Clients ranging in age from 3 to 98 were served during the fiscal year. While the majority of clients identified as white, minority clients comprised 6% of those served, compared to 4% minority residents in the two-county area.

The majority of clients reported household incomes that were low enough to qualify for care that was funded by public dollars, including Medicaid and Mental Health and Recovery Board (MHRB) subsidies. Thus, many individuals in the counties could not afford needed behavioral health services if not for Medicaid or the sliding fee scale made possible by the support of the Mental Health & Recovery Board (MHRB).

The preliminary June 2020 financial statements, included in the budget compliance section of this report, indicate that the organization ended the year with a \$924,823 shortfall from budgeted levels. The primary factor impacting income was the inability of many programs to produce the budgeted number of billable units due to the national public health emergency, which required unprecedented changes in how services could be delivered as well as workforce issues related to the inability to recruit staff.

During the last quarter of the fiscal year, focus was on response to the pandemic. Staff were trained in telehealth techniques, with most staff working remotely. Clients' reactions to virtual services varied, with some relieved to be able to continue to receive services and others expressing a desire to be seen face to face. All recommended safety precautions were taken for all locations, with special procedures for group home residents and staff. While the initial significant drop in services adversely affected the financial picture, the Center received assistance through several government COVID relief programs, and the Mental Health & Recovery Board provided additional assistance in the form of additional crisis funds, supports to enable telehealth services, and provision of personal protective equipment. Throughout the many challenges brought about by the pandemic community collaboration has been strong.

During these unapparelled times, the Counseling Center continues to strive to fulfill our mission—"To make a difference in the lives of those who seek our care and to promote behavioral health in the communities that we serve."

Respectfully submitted,

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