



EXECUTIVE SUMMARY

FY21

Fiscal year 21 proved to be one of challenges and accomplishments. Focus throughout the year was on pandemic management to ensure a safe environment for our clients and employees. The majority of services were provided via telehealth for the first three quarters of the year. During FY20, staff were trained in delivering assessment and treatment through the use of virtual platforms. Barriers were created for some clients who lacked the necessary technology to participate with internet-based services and services were provided only by phone. For others, telehealth overcame barriers such as transportation and childcare issues. During the last quarter of the fiscal year, all offices had reopened and face to face services resumed for all clients who wanted to be seen in person.

Despite the pandemic, the organization served over 5,000 clients (not including the thousands reached through our community education programs). Demand for service continued to be high. The Center averaged 172 admissions per month and the average monthly caseload was 4,959. Clients of all ages were impacted, through services ranging from our Early Childhood Mental Health program through a new geriatric case management service, Senior Outreach Services.

The Center continued to work with a number of community referral sources, including the medical community, law enforcement, schools, children's services, the courts, developmental disability boards, other community agencies, self, and family/friends.

The Emergency Services team continued to provide crisis services 24/7/365 and conducted 840 pre-hospitalization assessments, slightly up from FY20. While most clinical services were provided virtually, the crisis team continued to be available for walk-in crisis intervention services throughout the pandemic. COVID significantly affected the ability of staff to find psychiatric placements for clients at times, as units closed at hospitals due to COVID and clients who tested positive were often rejected for admission due to COVID.

There were a number of staff absences related to COVID, and this amid a national shortage of behavioral health care workers. The Center has been unable to fill some clinical positions, impacting the availability of services and necessitating triaging in response to service demand. The workforce shortage in community behavioral health is projected to continue and requires

heightened recruitment and retention efforts to build and strengthen needed staffing. The Center has increased student practicum and internship opportunities with the goal of retaining interns as staff.

Clinical staff received additional training in telehealth techniques and there was also a focus on increased training on risk assessment procedures, particularly those focused on assessing suicidality. The Quality Assurance plan was revised to ensure that clinical services are efficiently and effectively delivered and evaluated.

Related to this was an increasing emphasis on outcome measures, and results indicate that our services do make a difference. Of clients seen for counseling, for example, 85% of those presenting with severe depression showed a reduction in symptoms after treatment, as did 83% presenting with severe anxiety. Consumers are reporting an overall high level of satisfaction with services provided. Results of the outcome screenings and satisfaction surveys are detailed in the program reports.

The Center continues to collaborate with other providers and is active on many local committees as well as state committees. Staff participate in the Family and Children First Councils (FCFC) in both counties, including work at the committee level, and represent the organization in a number of coalitions including the Suicide Prevention Coalition, the Wayne Resilience Network, the Wayne Anti-Trafficking Coalition, the Homelessness Coalition, the Community Corrections Board, the Multi-Disciplinary Team organized by the Wayne County Child Advocacy Center, the Sexual Offender Service Coordination Oversight Panel, and the FCFC Diversion Team. Staff also serve on the Public Policy and Youth and Family Services Policy Committees of the Ohio Council.

The budget compliance section details end of year financials. The operating revenue exceeded operating expense by \$275,000 as the agency recognized \$531,738 of Paycheck Protection Program forgivable loan received as revenue.

Fiscal year 22 promises to be busy. The agency will have a survey by CARF (conducted every three years) early in calendar year 2022; the agency prepares for OhioRISE, a new state initiative to serve youth; and crisis services are also growing under new state programs. And, with the sponsor of the local Mental Health Board, the Center has applied for two capital grants, one to build an eight-bed residential treatment facility, and one to renovate a current residential facility, and hopes to launch both projects in the next few months. And for the FY23-24 biennium, the organization hopes to obtain capital funding to build a crisis stabilization unit to serve the community.

We continue to go forward with a focus on our mission and commitment to provide quality behavioral health services to the residents of Wayne and Holmes Counties.

Respectfully submitted,

Karen D. Berry, Psy.D.
President & CEO