

Pathways Annual Report

FY17



Pathways held a contest for our consumers to have their art featured on the cover of the annual report. The year's winner was **Becky Corbett**

Becky Corbett



Pathways Board Members

Alger

Cathy Pullen

Delta

George Botbyl

Larry Kirschner

Julie Moker

Gerard Tatrow

Luce

Nancy Morrison

Marquette

Elizabeth Brotherton

Patricia Bureau

Bill Davie

Dominic Dennis

Glenn Wing

Katherine Carlson-Lynch

Serving our Neighbors with the Greatest Need

Pathways Community Mental Health serves approximately 3,000 people in Alger, Delta, Luce and Marquette counties in the Upper Peninsula of Michigan.



Our Values

- Excellent clinical services
- Incorporate evidence based practices

Welcoming environment

- Offer an inclusive and respectful community
- Utilize a recovery orientation and person centered approach



A Letter From Our CEO

It's been another amazing year at Pathways with many new things happening and staff showing incredible creativity and commitment to our mission. Pathways held our first Walk A Mile In My Shoes event in May. We had several hundred participants who walked to increase awareness of the stigma associated with requesting help with mental health concerns. This was also the inaugural event of our new PEST (Pathways Eliminating Stigma Team). It was such a beautiful day and wonderful to participate with so many people enjoying each other's company.



Our InShape program in Marquette has been so successful that we now have a waiting list. It's exciting that we have expanded this program into Delta County. Improving the overall health of the people we serve is so important to increasing independence and recovery. In the future, we will be developing health promotion programs for Alger and Luce Counties.

Another health initiative we started this year is the Pathways UP-UPHS Marquette Family Medicine Integrated Care Collaboration Program. One afternoon each week, a family medicine resident doctor comes to Pathways to provide primary care and behavioral health on site. Also, the residents have the incredible opportunity to work with Dr. Kelley Mahar and learn more about psychotropic medications and behavioral health.

Clubhouse has been open since June. We have about 17 members attending and we're looking forward to the growth of this program. Clubhouse staff and members were able to attend the Clubhouse International conference in Detroit thanks to a grant from Superior Health Foundation. A local church has been kind enough to provide reduced rent for Clubhouse; within the next year Clubhouse should be moving to a building we are close to purchasing.

In 2015, Pathways board participated in the Strategic Planning process. The goal was to have an active strategic plan driving our agency forward. We have several teams that report regularly about their progress in meeting the board's goals. This year, Pathways "People" Team surveyed staff about their satisfaction and how that impacts longevity. We have reviewed the results and it is clear that morale and compensation are key factors that influence longevity.

Meanwhile, Pathways Operational Excellence team was working on ways to establish a management model and culture that we can embrace. A clinical staff offered the suggestion that we learn more about the Sanctuary Model. For the last several months we've been reading and discussing the Sanctuary Model and how we can become a more trauma informed organization. Pathways management team has embraced the need to truly change our culture and become a trauma informed organization. I believe that as we transform our organization, staff will feel supported in the wonderful work that they do. It will also have an incredible impact on how we support people on their path to recovery.

At year's end, I can say that I am proud of the work Pathways does to improve the lives of the people we serve. We are working to improve people's health, bring hope for recovery and increase engagement in our communities.

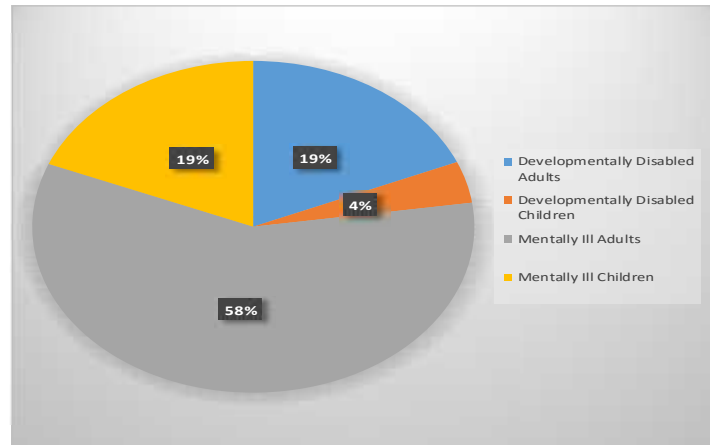


Central Access for Services

Mental Health: 1 (888) 906-9060

WHO WE SERVE

- Developmentally Disabled Adults—482
- Developmentally Disabled Children—105
- Mentally Ill Adults—1514
- Mentally Ill Children—487



REVENUE AND EXPENSE DATA

October 1, 2016—September 30, 2017

<u>EXPENSE DATA</u>	
Clinical Expense	\$31,367,645.75
Administration	3,894,256.82
Local Match Transfer to MDCH	537,892.00
Total Expenses	35,799,794.57

<u>REVENUE DATA</u>	
Medicaid	30,068,306.77
Healthy Michigan Plan	2,537,333.99
Autism	485,623.70
State General Fund	866,821.97
Charges for Services	760,973.47
Grants	186,765.09
Contracts and Other	980,209.01
Total Revenue	35,886,034.00
Net Revenue (Expense)	86,239.43

Success Story

By Jesse Wright, RN

It didn't take me long to come up with a success story to share. In fact, I found the most difficult part deciding which inspiring story to choose. You see, I have the incredible honor of working as the Health Mentor for the InSHAPE® program in Marquette County. The InSHAPE® program is an evidenced-based practice to reduce the cardiovascular risk factors for individuals with mental illness. Simply put, we work together to improve health and quality of life through physical activity, healthy eating and community engagement.

For the sake of privacy, we will call this individual "John". John was referred to the InSHAPE® program at inception, nearly two years ago and although he was not interested in joining at this time, he was a perfect candidate. John was overweight and had elevated cholesterol and blood pressure. Combine this with a sedentary lifestyle and poor diet, John was literally a heart attack waiting to happen. Like I had said, John wasn't ready to start working with me when he was initially referred. And like many others, he thought that the weight gain was an inevitable result of taking medication. Believe me, I wouldn't be sharing John's story if that were true.

Eight months ago John decided to make a change. He walked through my doors apprehensive to the idea of living healthy. Since then he learned what it means to break a sweat. Although his budget remains tight, John has continued to find ways to improve his eating habits. Despite staying on the same medication he believed to be causing weight gain, John has lost several inches off his waist circumference and is already down 25 pounds. He has found that by changing some parts of his diet, he was able to reduce his cholesterol levels and prevent going on another new medication. Each week I get to see his strength increase, his posture improves and his knowledge for functional movement expands.

Although John joined the InSHAPE® program to get smaller, I have seen him grow as a person. In a recent evaluation, John had written about an increase in confidence and self-esteem since deciding to embark in his wellness journey. Instead of staying inside his apartment all day every day, John attends our group walks, celebrations and adventurous outings throughout the community. Although the wellness journey can be tiresome, John continues to show up early and ready to work. It is inspiring to see someone change, to witness them achieving a goal. In typical John fashion, he would probably brush off what he has accomplished. I will tell you now, what this man has done to change the trajectory of his life is nothing short of outstanding.



Quality Improvement

By Stephenie Taskey, QI Coordinator

Fiscal year 2017 included various audits and surveys sent to persons served and stakeholders. Pathways underwent the NorthCare audit over the summer where we received a 94% compliance which is 4.3 percentage points above the previous audit score which is a significant improvement. MDHHS also conducted an onsite audit in 2017 in which Pathways did very well. There were only minor corrections to complete for the plan of correction. Our increase in audit scores speaks to the hard work of all staff at Pathways to improve services and policies provided across our four county catchment areas.

2017 also brought about many surveys/reviews from many different sources including MDHHS Home and Community Services, National Core Indicators, and the MiFast Review: Assertive Community Treatment, Integrated Dual Disorder Treatment, Dialectical Behavior Therapy, and Trauma Informed. We were also excited for the opportunity to be a part of the Recovery Oriented Service of Care (ROSC) survey that the entire region conducted and collaborated with Yale for strengths and weaknesses in our system. Through these surveys and reviews we received feedback that will help to shape our system and provide points for improvement that benefit our communities and the people we serve.

The Quality Improvement department closely monitors standards that are set to help ensure that consumers are served in the most timely and effective manner possible. The outcomes for FY17 demonstrate the efforts that were made on a daily basis by staff. Last year we were made aware that there would be withhold measures per quarter implemented for Medicaid monies. The action plans that were developed to closely monitor these indicators were implemented to ensure that Pathways would remain above the thresholds assigned.

FY 2017 MICHIGAN'S MISSION-BASED PERFORMANCE INDICATOR SYSTEM

Indicator #1

The percentage of persons during the quarter receiving a pre-admission screening for psychiatric inpatient care for whom the disposition was completed within three hours (by two sub-populations: Children and Adults). **Standard = 95%**

Rationale for Use: People who are experiencing symptoms serious enough to warrant evaluation for inpatient care are potentially at risk of danger to themselves or others. Thus, time is of the essence. This indicator assesses whether CMHSPs and PIHPs are meeting the Department's standard that 95% of the inpatient screenings have a final disposition within three hours. This indicator is a standard measure of access to care.

Population	1 st Quarter	2 nd Quarter	3 rd Quarter	4 th Quarter	Annual
Children	100%	100%	100%	100%	100% (82/82)
Adults	100%	99.22%	100%	100%	99.81% (520/521)

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Indicator #2

The percentage of new persons during the quarter receiving a face-to-face assessment with a professional within 14 calendar days of a non-emergency request for service (by four sub-populations: MI-adults, MI-children, DD-adults and DD-children). **Standard = 95%**

Rationale for Use: Quick, convenient entry into the public mental health system is a critical aspect of accessibility of services. Delays in clinical and psychological assessment may lead to exacerbation of symptoms and distress and poorer role functioning. The amount of time between a request for service and clinical assessment with a professional is one measure of access to care.

Population	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
MIC	100%	100%	100%	100%	100% (203/203)
MIA	95.45%	100%	100%	100%	98.84% (342/346)
DDC	100%	100%	100%	100%	100% (14/14)
DDA	100%	100%	100%	100%	100% (24/24)

Indicator #3

Percentage of new persons during the quarter starting any needed on-going service within 14 days of a non-emergent face-to-face assessment with a professional (by four sub-populations: MI-adults, MI-children, DD-adults and DD-children) within 14 days. **Standard = 95%**

Rationale for Use: The amount of time between professional assessment and the delivery of needed treatments and supports addresses a different aspect of access to care than Indicator #2. Delay in the delivery of needed services and supports may lead to exacerbation of symptoms and distress and poorer role functioning.

Population	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
MIC	98.08%	97.92%	100%	100%	99.97% (192/194)
MIA	96.92%	100%	98.46%	100%	98.86% (261/264)
DDC	60%	100%	100%	100%	84.62% (11/13)
DDA	100%	100%	100%	100%	100% (20/20)

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MISSION

WE SERVE AND EMPOWER PEOPLE WITH SEVERE MENTAL ILLNESS, SEVERE EMOTIONAL DISTURBANCES, OR DEVELOPMENTAL DISABILITIES TO ENHANCE THEIR QUALITY OF LIFE.

Indicator #4a

The percentage of discharges from a psychiatric inpatient unit during the quarter that were seen for follow-up care within 7 days. **Standard = 95%**

Rationale for Use: When responsibility for the care of an individual shifts from one organization to another, it is important that services remain relatively uninterrupted and continuous. Otherwise, the quality of care and consumer outcomes may suffer. This is an indicator required by the federal Substance Abuse and Mental Health Services Administration.

Population	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
Children	100%	83.33%	100%	100%	94.12% (16/17)
Adults	95.83%	100%	96.55%	100%	98.23% (111/113)

Indicator #10

The percentage of readmissions of children and adults during the quarter to an inpatient psychiatric unit within 30 days of discharge. **Standard = 15% or less**

Rationale for Use: For some people with mental illness, the occasional use of psychiatric inpatient care is essential. However, rapid readmission following discharge may suggest that people were prematurely discharged or that the post discharge follow-up was not timely or sufficient. This indicator assessed whether CMHSPs are meeting the Department's standard of no more than 15 percent of people discharged from inpatient units are being readmitted within 30 days.

Population	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
Children	0%	0%	0%	14.29%	4.34% (1/23)
Adults	18.18%	10.87%	7.5%	0%	11.18% (17/152)



VISION

PATHWAYS ENVISIONS A COMMUNITY WHERE PEOPLE EXPERIENCE LIFE TO ITS FULLEST

Consumer Survey Results

Total Surveys Mailed Out: 1996

Total Surveys Returned: 258

Return Rate: 12.9%



Question	# of Responses	% Satisfied
Appointments are scheduled at times that work best for me.	258	98%
I am informed of my rights.	258	96%
I feel better because of the services received.	257	95%
I know what to do if I have a concern or complaint.	257	97%
Staff are sensitive to my cultural/ethnic background.	253	100%
I was able to get the type of services I needed.	256	92%
My wishes about who is and who is not given information about my treatment are respected.	257	98%
My wishes about who is and who is not involved in my treatment are respected.	255	97%
I am satisfied with the telephone crisis service when calling the crisis line after 5pm on weekdays and/or on weekends.	72	89%
I would recommend these services to a friend or relative.	246	95%

“My son loves seeing his worker. He feels safe and confident with her. I love the treatment he and I receive.”

“I love everyone at Pathways. My children are doing so much better because of the work of the therapists there”

“The entire staff at Pathways are knowledgeable, friendly, and helpful”

“If it wasn't for Pathways I probably would still be suicidal and homeless”

Ray of Sunshine

In October 2017 we received a total of 88 Ray of Sunshine Grant requests. We were able to give out 81 requests totaling \$4,545.00.

Afterwards, we took additional requests from all populations within Pathways and had an Electronic Christmas Tree with the denied grants and the additions that we received. Some of Pathways' staff and members of the community donated money towards these items and with their help we were able to fill an additional 23 requests!

The Ray of Sunshine endowment began in 1998 when a local anonymous family partnered with Pathways with a goal of helping enrich the lives of local adults with mental illness. These awards are distributed to those who do not have the resources to pay for "extra" items on their own. Items that have been requested include: fishing equipment, craft supplies, books, winter coats, dinner and a movie, bicycles and more.

Since the beginning of rewarding grant requests we have been able to fulfill 813 requests totaling \$46,283.83

The Ray of Sunshine would like to give a HUGE Thank You to our three largest donors this year!



of Escanaba donated \$500 to the Ray of Sunshine

Community Covenant Church of Carlshend donated \$250 this year and has donated over \$1,500 over the last several years!

Pathways also had an Escanaba staff member and their family work with Brampton Bike and Ski in Gladstone to purchase an Adult 3 Wheel Bike for one of our consumers.

Thank you to EVERYONE who has made a donation, big or small. Every dollar helps us bring a smile to someone's face.





Donation Form

Donor Name(s) _____

Address _____

If donation is a gift:

_____ In honor of _____

_____ In memory of _____

Make checks payable to Ray of Sunshine and return with this portion to:

Ray of Sunshine
2500 7th Ave S. Suite 100
Escanaba, MI 49829

"Thank you so much for everything. My family appreciates everyone's thoughtfulness."

"Thank you Thank you Thank you. You will never know how much the Ray of Sunshine means. I was able to give my children a Christmas."

"Thank you for the fishing equipment. Now I can have fun fishing and catch my own food to eat"