

mid-south

substance abuse commission



ANNUAL REPORT
FY 2002/2003

MID-SOUTH SUBSTANCE ABUSE COMMISSION – FY 2002/2003

CALHOUN COUNTY

Benjamin Miller
Kenneth Ponds

CLINTON COUNTY

Robert Showers (Chair)

EATON COUNTY

Robert Johnson
Janice Tower

GRATIOT COUNTY

Hon. Jack T. Arnold

HILLSDALE COUNTY

Maxine Vanlerberg

INGHAM COUNTY

Tom Minter
Jean Golden
Debbie DeLeon
Ron Clark
Shirley Carter-Johnson

JACKSON COUNTY

Gail Mahoney
David Irvine
David Elwell

LENAWEE COUNTY

Larry Gould
Ralph Tillotson

I am an x-con with a very long criminal and drugs history. I have been in the system since I was 12 years old. I had a very serious car accident in 1999 and have been unable to hold a decent job since that time. The staff at Mid-South has helped me receive treatment since this time. I never believed I would be able to stay off drugs and out of prison. This agency has saved my life and made the quality of life 100% better...

- An Eaton County Client

MID-SOUTH SUBSTANCE ABUSE COMMISSION

MISSION STATEMENT

The Mid-South Substance Abuse Commission's purpose is to develop and administer a comprehensive plan to obtain and provide resources that prevent and reduce the misuse and abuse of alcohol and other drugs.

It is our goal to assure the availability of comprehensive, quality services in the areas of prevention, intervention, assessment and treatment in the Mid-South service area.

INTRODUCTION

The Mid-South Substance Abuse Commission was established pursuant to Act 368 of the Public Act of 1978, and the 1996 Joint Agreement between the Calhoun, Clinton, Eaton, Gratiot, Hillsdale, Ingham, Jackson, Lenawee and Shiawassee County Board of Commissioners.

During FY 2002-2003, the MSSAC region began the process of realigning the counties within the region. The first step in this process was Shiawassee County making the decision to align itself with the new River Haven Coordinating Agency. MSSAC continued to provide services for the remaining eight counties for the fiscal year.

The functions of the Commission as specified in Act 368 are as follows:

- a) Develop comprehensive plans for substance abuse treatment and rehabilitation services and prevention services consistent with guidelines established by the Michigan Department of Community Health, Division of Substance Abuse Quality and Planning.
- b) Review and comment to the Division of Substance Abuse Quality and Planning on applications for licenses submitted by local treatment, rehabilitation and prevention organizations.
- c) Provide technical assistance for local substance abuse service organizations.
- d) Collect and transfer data and financial information from local organizations to the Division of Substance Abuse Quality and Planning.
- e) Submit an annual budget request to the Division of Substance Abuse Quality and Planning for use of State administered funds for its city, county, or region for substance abuse treatment and rehabilitation services in accordance with guidelines established by the Division of Substance Abuse Quality and Planning.
- f) Make contracts necessary and incidental to the performance of the agency's functions. The contracts may be made with public or private agencies, organizations, associations, and individuals to provide substance abuse treatment, rehabilitation and prevention services.
- g) Annually, evaluate and assess substance abuse services in the city, county, or region, in accordance with guidelines established by the Division of Substance Abuse Quality and Planning.

EXECUTIVE DIRECTOR'S MESSAGE

The Mid-South Substance Abuse Commission remains committed to continuous improvement and expansion of services despite the loss in revenue over the last fiscal year.

We have worked earnestly toward the inclusion of Ionia and Newaygo Counties in the Mid-South region, which was effective on October 1, 2003. Developing services in these two additional rural counties continues to be a priority. We are hopeful that this new relationship will prove beneficial to the residents of those counties.

The Action Plan for Improved Access to Substance Abuse Services has facilitated the development of substance abuse work groups in nearly our entire existing 8 county region. Each group is attempting to address the key action steps identified by their communities to address substance abuse in the community. We are working to expand the work groups to include non-traditional partners and community members.

We continue to work collaboratively with the criminal justice system in the establishment of drug courts in many counties in the region. In collaboration with the courts and our treatment providers, we are better able to serve addicted offenders utilizing a psychosocial approach. We also continue to expand the number of MIP/jail diversion programs for youth, with the inclusion of Hillsdale County this year.

The Commission and its prevention provider network have embarked upon a strategic planning effort. This effort will include risk and needs assessment, gaps analysis, and the development of a regional plan facilitating outcome-based prevention services that will meet the needs of the communities we serve. The plan will also include the development and facilitation of a youth risk and protective factor survey. This survey will be conducted in all schools in our ten county region that are willing to participate. We are excited about the local data that will be collecting and utilized in prevention planning for the region.

We also continue to work actively in our attempts to measure treatment outcomes through our Health Care Study Project. Although it has proven a challenge to follow individuals after discharge from treatment, we remain steadfast in our commitment to monitor the effectiveness of treatment.

I wholeheartedly thank members of our Board of Directors in their commitment to Mid-South, during these challenging times. I would also like to express my appreciation to my staff, who are tireless in their efforts to improve the quality of the agency and the services offered in the region. Finally, thank you to our network of providers for their continued patience and steadfast dedication to the delivery of quality services in the Mid-South region.

This program is wonderful! I really have come a long way in a short time, and don't feel afraid of the rest of the process (like I did at first). Great staff! Thank goodness there's a place to get help that doesn't cost so much I have to give up having a home.

- Ingham County Client

LEVELS OF CARE

OUTPATIENT:

Outpatient services include the intake session, individual, family and group therapy. MSSAC encourages its providers to work within communities to offer services in a variety of settings to best meet the needs of our clients.

The Commission has outpatient services in all eight counties. Specialty outpatient services such as; Adolescents, State Designated Women's Services, Co-Occurring Disorders, Culturally Specific and Methadone Treatment are also offered throughout the region .

Calhoun County

SPGB Services – Battle Creek & Albion
Psychological Consultants – Battle Creek & Albion

Clinton County

CEI/Clinton County Counseling Center

Eaton County

Eaton Substance Abuse Program

Gratiot County

Gratiot Community Hospital –
Pine River (Medicaid) [Closed 9/30/2003]
Human Aid, Inc.

Hillsdale County

Bridgeway Center of Hillsdale (Co-Occurring)

Ingham County

Child & Family Services – Capital Area
CEI/Cats (Jail Programming)
CEI/CSATP – (Methadone)
Cristo Rey Counseling Services (Women)
Insight Recovery Center (Medicaid)
National Council on Alcoholism/Lansing Regional Area

Jackson County

Bridgeway Center of Jackson (Co-Occurring)
Family Service & Children's Aid (FSCA)
FSCA/Born Free (Women)
FSCA/NexGen (Adolescent)
Victory Clinic III (Methadone)

Lenawee County

McCullough Vargas & Associates (Hispanic)
Sage Center – Adrian & Tecumseh (Women & Adolescents)

OUTPATIENT ADMISSIONS PER COUNTY

COUNTY	ADMISSION	% of TOTAL
Calhoun	1073	25%
Clinton	210	5%
Eaton	361	8%
Gratiot	166	4%
Hillsdale	160	4%
Ingham	1260	30%
Jackson	495	12%
Lenawee	517	12%
Out of Region	38	<1%
Total	4,280	100%

Mid-South served a total of **4,280** clients on an Outpatient basis for FY 2002/2003.

METHADONE SERVICES

Methadone dosing is a pharmacological tool for the treatment of opiate addiction that provides the opportunity for an improved quality of life conducive to establishing and maintaining a drug-free lifestyle. It is provided at two locations in the Mid-South region: CEI/CMH – CSATP in Ingham County and Victory Clinical Services, III in Jackson County.

In FY 2002/2003, there were **61** new clients who began receiving Methadone services. This brings the total number of individuals in the region on Methadone dosing to **136**.

At first I was skeptical, but now I'm very optimistic about counseling and being honest and open.

- Gratiot County Client

INTENSIVE OUTPATIENT:

Intensive outpatient services are provided in a structured outpatient setting for at least a three (3) hour block of time, at least three (3) days per week.

Didactic lectures, group, and individual therapy in combination with the individualized treatment needs of the client are provided. Aftercare planning and referral services are also provided.

Specialty IOP services are provided at the State Designated Women's Services programs as well as for adolescents and individuals with Co-Occurring Disorders and culturally specific needs.

Calhoun County

SPGB Services – Battle Creek & Albion Psychological Consultants (Adult & Women)

Eaton County

Eaton Substance Abuse Program (Women)

Gratiot County

Gratiot Community Hospital – Pine River (Medicaid) [Closed 9/30/2003] Human Aid, Inc.

Hillsdale County

Bridgeway Center of Hillsdale (Adult & Women)

Ingham County

Insight Recovery Center (Adolescent) National Council on Alcoholism/Lansing Regional Area

Jackson County

Bridgeway Center of Jackson FSCA Born Free (Women) Washington Way Recovery Center

Lenawee County

Sage Center – Adrian & Tecumseh (Women)

INTENSIVE OUTPATIENT ADMISSIONS PER COUNTY

COUNTY	ADMISSION	% of TOTAL
Calhoun	138	22%
Clinton	4	1%
Eaton	54	8%
Gratiot	5	1%
Hillsdale	32	5%
Ingham	136	21%
Jackson	188	30%
Lenawee	78	12%
Out of Region	1	<1%
Total	636	100%

Mid-South served a total of **636** clients on an Intensive Outpatient basis for FY 2002/2003.

This program is wonderful. I just wish there was more funding for treatment centers.

- Jackson County Client

I feel a lot better since I've been coming and really being into this time. I'm taking this serious.

- Calhoun County

I am happy with my treatment. I think the structure of the plan is good and most generally when I leave the office after speaking with my counselor I feel better about myself and my situation.

- Lenawee County Client

DETOX & RESIDENTIAL SERVICES:

Detoxification services are medically supervised care provided for the purpose of managing the effects of withdrawal from alcohol and/or other drugs. Detox services typically last three (3) to five (5) days.

The Commission has two (2) region-wide contracts for detoxification services. 1) Salvation Army/Turning Point, Grand Rapids and 2) Washington Way Recovery Center, Jackson.

DETOX ADMISSIONS PER COUNTY

COUNTY	ADMISSIONS	% of TOTAL
Calhoun	49	15%
Clinton	9	3%
Eaton	20	6%
Gratiot	8	3%
Hillsdale	6	2%
Ingham	138	43%
Jackson	68	21%
Lenawee	18	6%
Out of Region	3	<1%
Total	319	100%

Mid-South funded **319** clients for detoxification services for FY 2002/2003.

Residential services are provided either as Short-term or Long-term care. Short-term Residential Service is an intense, organized, daily treatment regimen in a residential setting which includes an overnight stay. Such programs typically are between ten (10) to fourteen (14) days, with no more than thirty (30) days. Long-term Residential Service is a professionally-supervised program that includes planned individual and/or group therapeutic and rehabilitative care. These services are provided in a residential setting and include an overnight stay. Such programs typically are more than thirty (30) days and no more than ninety (90) days.

Regional Short-term Residential Providers:

Blue Lake/Clearview – Port Huron (Medicaid & for Women & Women w/Children)

Gratiot Community Hospital – Pine River (Medicaid) [Closed 9/30/2003]
 Salvation Army/Turning Point – Grand Rapids
 Washington Way Recovery Center – Jackson
 Daktoah Family Treatment Center – Grand Rapids (Adolescents) [Closed 9/30/2003]
 Karios Healthcare Inc – Bridgeport (Adolescents)
 House of Commons – Mason (Men)

Regional Long-term Residential Providers:

Blue Lake/Clearview – Port Huron (Medicaid & for Women & Women w/Children)
 Dakota Family Treatment Center – Grand Rapids (Adolescents) [Closed 9/30/2004]
 National Council on Alcoholism/Lansing Regional Area – Glass House (Women)
 National Council on Alcoholism/Lansing Regional Area – Holden House (Men)
 House of Commons – Mason (Men)

RESIDENTIAL ADMISSIONS PER COUNTY

COUNTY	LT/RES	%/TOTAL	ST/RES	%/TOTAL
Calhoun	38	12%	76	21%
Clinton	9	3%	9	2%
Eaton	23	8%	21	6%
Gratiot	9	3%	19	5%
Hillsdale	3	1%	6	2%
Ingham	154	50%	123	34%
Jackson	40	13%	80	22%
Lenawee	17	6%	25	7%
Out of Region	12	4%	4	1%
Total	305	100%	363	100%

Mid-South funded **668** clients in either short or long term residential services for FY 2002/2003.

My counselor has been the best (very) best therapist I have ever had...I can't even begin to put it into words or thank her enough, I plan to continue to meet with her/staff...I would highly recommend her, to anyone needing help with just about anything.

- Clinton County Client

ACCESS, ASSESSMENT & REFERRAL SERVICES (AAR)

The Commission contracts with Central Diagnostic and Referral Services, Inc. (CDRS) to perform the AAR functions. The goals of the AAR system are to improve the accessibility of substance abuse services and to provide objective, unbiased assessments to ensure appropriate placement in treatment.

CDRS has offices in East Lansing, Jackson and Battle Creek. The Commission also contracts with Family Service and Children's Aid of Adrian to perform assessments and authorizations for Lenawee County residents. While physically located in these cities, CDRS conducts assessments across the region via the telephone or face-to-face.

Beyond the initial assessment, CDRS also provides authorizations for all treatment paid for by the Commission, including requests for continued care. Utilizing a secure web based system CDRS is able to perform real time authorizations for our network of providers.

CDRS assessed **2753** clients to determine their need for substance abuse treatment and the appropriate level of care. Not all clients assessed were referred for treatment. This number does not include the number of assessments performed by the outpatient providers.

Additional responsibilities CDRS performs for the Commission are Regional Women and Families Specialist, Wait List Management and Community Outreach.

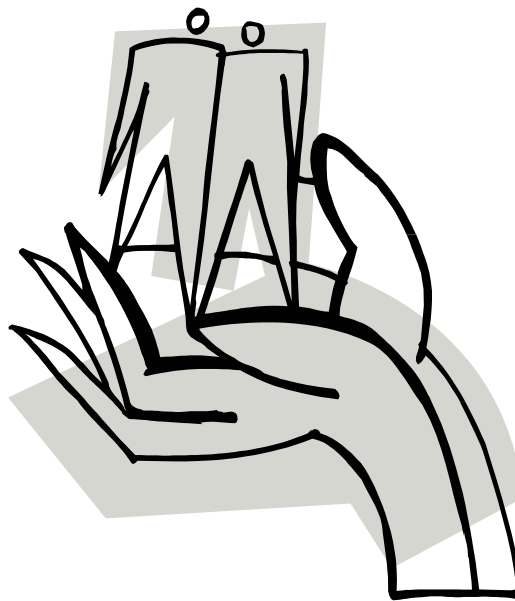
The Women and Families Specialist provides technical assistance to the region's Women Specialty Programs. One very important function she does is case manage pregnant women who are seeking treatment in either a regional residential program or a regional methadone program to increase the likelihood the mother-to-be will remain in treatment and deliver a healthy baby.

Unfortunately, there are times when the capacity for residential and methadone treatment is not sufficient for the region's

needs. At that time, CDRS manages the 'Wait List' to ensure that clients are admitted into treatment as quickly as possible following all federal and state admission guidelines and that interim services are being provided.

To help community referral sources and groups understand the publicly funded system, CDRS staff spend time performing community outreach. CDRS staff participate on community committees and work-groups, provide in-services for agencies and speak at local group meetings.

I look forward to coming and haven't missed any; it's definitely made me a stronger person.
- Hillsdale County Client



**For Assessment and Referral
Call 1-800-342-0349.**

DEMOGRAPHICS and OTHER INFORMATION

FY 2002/2003 TREATMENT ADMISSIONS BY GENDER

COUNTY	MEN	WOMEN	TOTAL
Calhoun	950	424	1374
Clinton	166	75	241
Eaton	323	156	479
Gratiot	135	72	207
Hillsdale	159	48	207
Ingham	1204	607	1811
Jackson	507	364	871
Lenawee	450	205	655
Out of Region	37	21	58
Total	3931	1972	5903

SERVICES TO PREGNANT WOMEN

Mid-South Substance Abuse Commission's Women's Specialty Programs provided services to **46** pregnant women during FY 2002/2003. In total there were **88** admissions in all levels of care of women who were pregnant at time of admission.

FY 2002/2003 TREATMENT ADMISSIONS BY AGE

AGE	NUMBER	% OF TOTAL
Under 17	479	8%
18-25	1422	24%
26-40	2469	42%
41-64	1526	26%
Over 65	7	<1%
Total	5903	100%

The number of youth referrals **again increased by 1%** from last fiscal year. Mid-South is committed to working with providers to increase outreach activities in order to meet the needs of youth and families in need of treatment.

FY 2002/2003 TREATMENT ADMISSIONS BY INCOME

INCOME	NUMBER	% OF TOTAL
\$ 0 – 23,999	5727	97%
\$24,000 – 39,999	151	2.5%
\$40,000 and higher	25	<1%
Total	5903	100%

Mid-South is commissioned to serve low-income residents of the region.

FY 2002/2003 TREATMENT ADMISSIONS BY PRIMARY DRUG AT TIME OF ADMISSION

Alcohol continues to be the number 1 substance of abuse or dependence problem in the region.

* Reflects results of Student Assistant Screenings.

COUNTY	ALCOHOL	MARIJUANA HASHISH	COCAINE CRACK	NARCOTICS OPIATES HEROIN	METHAMPHETAMINE OTHER AMPHETAMINES	OTHER	NONE
Calhoun	655	364	254	97	1	2	1
Clinton	160	32	31	14	4	0	0
Eaton	278	86	52	36	19	5	3
Gratiot	132	44	10	20	1	0	0
Hillsdale	113	41	22	20	8	3	0
Ingham	845	309	357	251	7	5	37*
Jackson	483	190	109	77	9	3	0
Lenawee	404	150	63	28	5	3	2
Out of Region	31	5	11	8	0	3	0
Total	3101	1221	909	551	54	24	43

FY 2002/2003 TREATMENT ADMISSIONS BY RACE/ETHNICITY

	Calhoun	Clinton	Eaton	Gratiot	Hillsdale	Ingham	Jackson	Lenawee	Out of Region	Homeless**	Total
African American/Black	391	11	19	1	4	536	148	38	10	2	1160
Hispanic/Latino*	47	12	22	14	2	168	26	103	1	1	396
Multi Racial	17	4	8	3	0	31	4	15	0	0	82
Native American	8	5	10	5	1	29	4	3	0	0	65
White	894	206	419	184	200	1030	684	494	38	3	4152
Asian/Pacific Islander	8	1	0	0	0	6	1	0	0	0	16
Arab American/ Arab Chaldean	2	0	0	0	0	1	1	0	1	0	5
Refused to Provide	1	1	0	0	0	1	0	0	0	0	3
Unknown	6	1	1	0	0	9	3	2	2	0	24

* Hispanic/Latino is made up of individuals who identified themselves as Mexican, Hispanic, Cuban, Other Hispanic or Puerto Rican.

** Homeless is a category of individuals who did not list a county or residency.

Prevention Services FY 2002-2003

As a result of the Request for Proposal process completed last fiscal year, the Mid-South Substance Abuse Commission is funding seven Prevention Programs in our eight county region. The prevention providers are listed below.

Calhoun County

Minority Program Services, Inc.
Substance Abuse Council of Greater Battle Creek

Clinton, Eaton and Ingham Counties

Cristo Rey Counseling Services (Greater Lansing Area)
Neighborhood Youth & Parent Prevention Partnership (Greater Lansing Area) [Closed end of FY]
Professional & Program Services/Eaton Intermediate School District (EISD)
(Eaton & Ingham Counties; subcontracting with Clinton County Counseling Center for some services in Clinton County)

Gratiot County

Professional & Program Services/EISD
(Subcontracting with Human Aid, Inc. in Gratiot County)

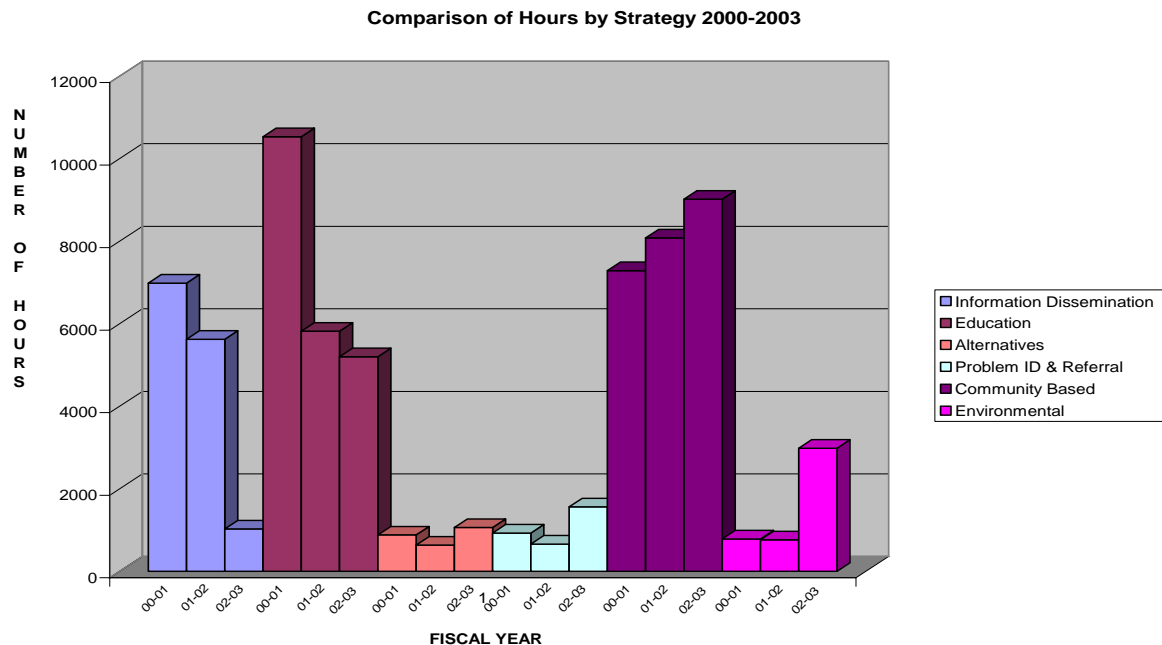
Hillsdale and Jackson Counties

Prevention Partners (Student Assistance Program & Community Prevention Services merged)

Lenawee County

Prevention First/Lenawee Intermediate School District

Over the last several years Mid-South's prevention programming has been putting into practice the concept, "That you cannot teach what a community will not support and have it last." Since the RFP process there has been a dramatic increase in Community-Based and Environmental prevention hours, an increase in Alternatives and Problem Identification, and a decrease in Information Dissemination and Education. The chart below shows the changes in hours by strategy since 2000.



The table below reflects the total prevention hours by strategy for FY 2002/2003.

<i>The Six Center for Substance Abuse Prevention Strategies</i>	<i>Total Direct Service Hours Provided FY 2002/2003</i>
Information Dissemination	5,625
Education	5,818
Alternatives	635
Problem ID & Referral	659
Community-Based Process	8,082
Environmental	764
TOTALS	21,583

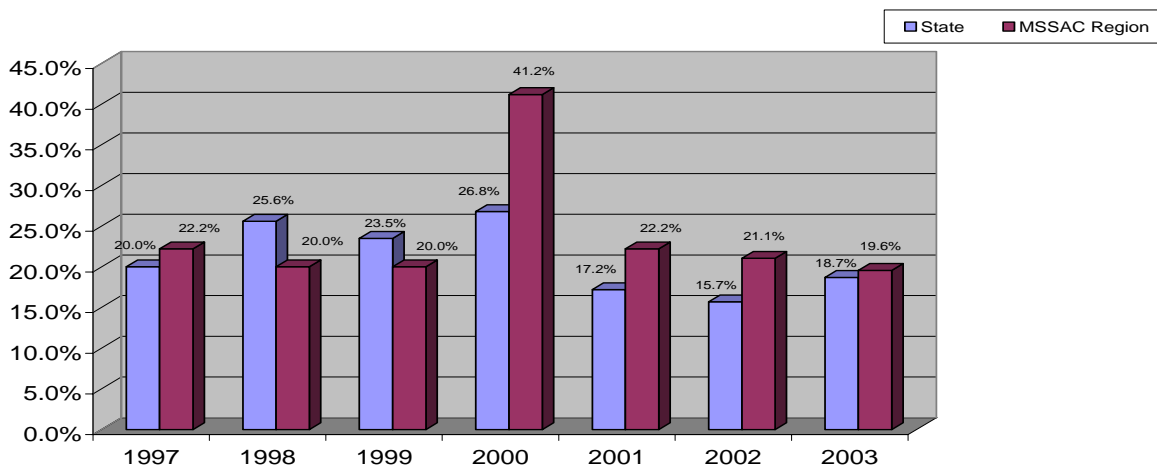
These changes reflect the hard work being done by the Mid-South Substance Abuse Commission's Prevention Coordinator and staff working with the Prevention Providers to improve the quality of prevention services being offered throughout our region.

"Synar Rate"

In 1992, Congress enacted the Alcohol, Drug Abuse and Mental Health Administration Reorganization Act, which included the Synar Amendment, named after the sponsor Congressman Mike Synar of Oklahoma, aimed at decreasing access to tobacco products among individuals under age 18. The goal of the amendment is to reduce the number of successful illegal purchases by minors to no more than 20% of attempted buys by minors in each state within a negotiated time period. Each state must annually conduct random, unannounced inspections of a sample of tobacco vendors to assess their compliance with the state's access laws. If a state is found to be non-compliant with its "Synar Rate", the state may lose up to 40% of its Federal Community Grant funds for substance abuse prevention and treatment. The majority of the Commission's prevention providers are involved with annual inspections throughout the region.

Successful implementation of the Synar regulation is important for several reasons. First, it will facilitate the reduction of smoking as well as current and future health problems among adolescents. Second, it is consistent with the public's support of measures to prevent the use of tobacco by young people, and specifically efforts to discourage sales to minors. Finally, it is important to the States in order to continue receiving their full substance abuse block grant funding and to meet the Federal requirements of the Food and Drug Administration's regulations to restrict tobacco products from youth.

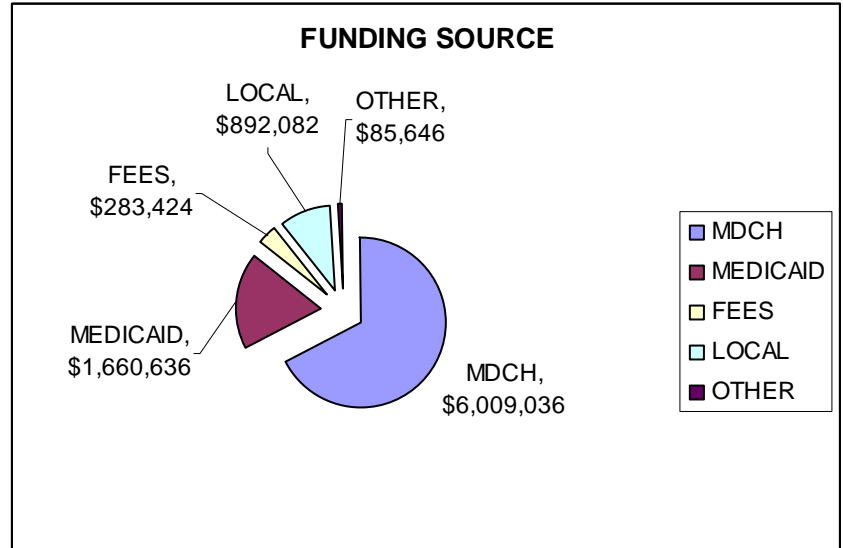
Synar Rate - State vs. Mid-South Region



FY 2002/2003 EXPENDITURE DETAIL

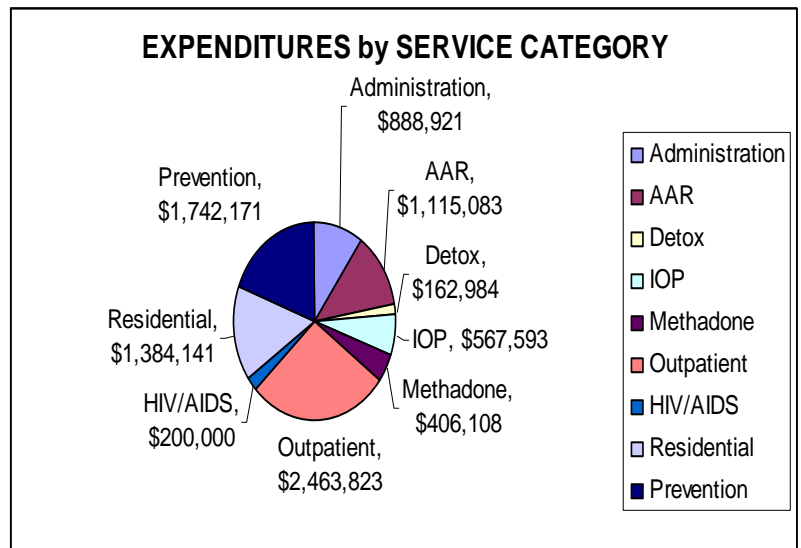
FY 2002/2003 Expenditures by Funding Source

	\$ Amount	% Spent
MDCH	\$6,009,036	67%
Medicaid	\$1,660,636	19%
Fees	\$ 283,424	3%
Local	\$ 892,082	10%
Other	\$ 85,646	1%
Total	\$8,930,824	100%



FY 2002/2003 Expenditures by Service Category

	\$ Amount	% Spent
Administration	\$ 888,921	10%
AAR	\$ 1,115,083	12%
Detox	\$ 162,984	2%
IOP	\$ 567,593	6%
Methadone	\$ 406,108	5%
Outpatient	\$ 2,463,823	28%
HIV/AIDS	\$ 200,000	2%
Residential	\$ 1,384,141	15%
Prevention	\$ 1,742,171	20%
Total	\$ 8,930,824	100%



I have never have had a problem getting an appointment. I called on a Monday and had my assessment within 24 hours.
- Eaton County Client

QUALITY IMPROVEMENT

To ensure that services meet quality standards, the Commission's Quality Assurance Department regularly performs site visits to all contracted providers. Effective monitoring is performed through various methods: reports, workgroup meetings and site reviews. Reports are used to monitor access and timeliness of client service, client satisfaction, client discharge and continuum of care, performance indicators, wait list, sentinel events and delinquency of report submission. The Quality Assurance Manager annually performs on-site reviews, reviewing both policies and procedures and utilizing a protocol checklist for clinical review of client files. The site visit protocol is thorough and reviews the physical plant, client files and the treatment quality, discharge and follow-up planning process.

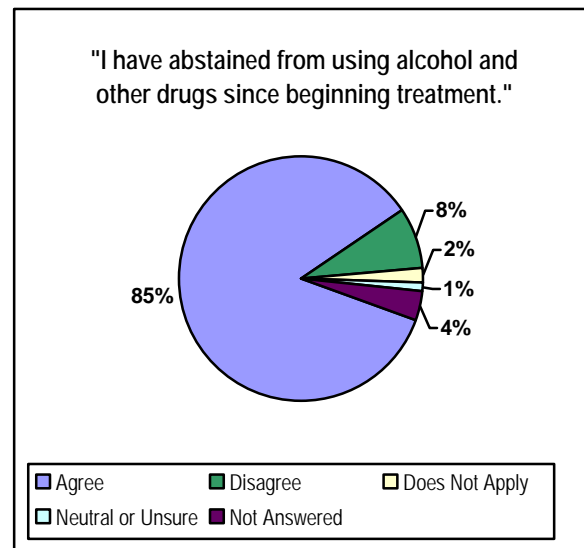
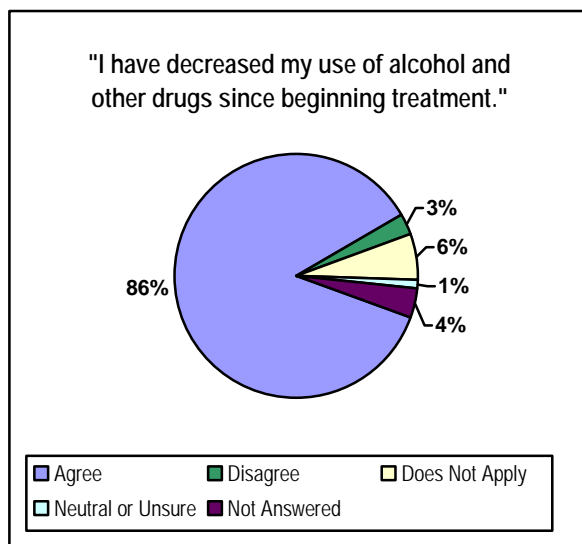
The Quality Assurance Manager also functions as the Recipient Rights Consultant for the region. She reviews and investigates clients' concerns and provides training annually on confidentiality, recipient rights and administrative hearings.

The QA staff is also responsible for the compilation of the Quarterly Client Satisfaction Surveys. The quotes from clients throughout this report were generated from this survey.

The Health Care Study Program (HSCP) continued during fiscal year 2002/2003. The plan to improve the HSCP, which included developing promotional materials for both clients and treatment providers, improving the functionality of the database, providing additional training and support to treatment providers, and developing alternate means of completing the surveys was implemented. The following is preliminary results from the HSCP:

Mid-South Substance Abuse Commission Health Care Study Program Preliminary Results Report

N=265



The Mid-South Substance Abuse Commission Staff

Executive Director	Robin Reynolds
Assistant Director	Mary Kronquist
Finance Manager	Gerrie Roeser
Quality Assurance Manager	Jeanne Diver
Prevention Coordinator	Tim Shafto
Finance Assistant	Jill Gawronski
Information Analyst	Linda Proper
QA Evaluation Analyst	Doris Mann
Executive Secretary	Lori Griffin
Prevention Assistant	Sarah Szwejda
Claims Adjudicator	Monica Young
QA Administrative Assistant	Shawn George
Information Systems/Billing Assistant	V. Ruth Reynolds

Mid-South Substance Abuse Commission
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