

ALLAMAKEE COUNTY

**MENTAL HEALTH & DEVELOPMENTAL
DISABILITIES SERVICES**

MANAGEMENT REPORT

FOR

FISCAL YEAR 2010

Prepared by
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CPC Administrator
11/10

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Comments from the CPC Administrator

This past year completes the first year of the FY2010-2012 Northeast Iowa Counties Systems Administration Plan. Overall, we found our goals to provide direction as we work toward our vision:

We have a VISION of empowerment, choice & community:

People experiencing disabilities will live in a community, work at a job, and recreate, worship and volunteer in a variety of settings using the needed services of providers of choice.

Therefore, Allamakee, Bremer, Buchanan, Clayton, Delaware, Fayette, Howard, and Winneshiek counties are dedicated to providing funding for appropriate and cost effective mental health and developmental disabilities services for all citizens.

As this plan was developed, we tried to keep consumer input and interests in the forefront while being aware of our ever decreasing county pot of dollars. Many of our goals require more coordination and management than dollars as we try to maintain quality services that are the most cost effective. During the summer of 2008, CPCs from northeast Iowa began collaborating on a Northeast Iowa Mental Health & Disabilities Services plan which covers eight counties (Allamakee, Winneshiek, Howard, Clayton, Fayette, Bremer, Buchanan, & Delaware). Counties hope to administer a more uniform system that is more user friendly for both individuals and agencies and increase collaboration on new projects.

Relationships at the regional and county levels became even more important over this past year as state and federal Medicaid rules constantly changed—sometimes retroactively! Without the mutual support and working together with individuals, families, service providers and funders, many individuals would have received compromised services. Many thanks to all for working together to make a very complicated system work for the individuals we serve!

Overview of Planning Activities

The Allamakee County Mental Health & Developmental Disabilities Services Strategic Plan for FY 2010-2012 served as the guide for activities throughout FY 2010. The following describes planning efforts that occurred during FY 2010:

1. Allamakee County Mental Health/Developmental Disabilities Citizens' Advisory Board

The Allamakee County MH/DD Citizens' Advisory Board continued to meet throughout the year. Meetings were held on 9/2/09, 11/12/09, 1/6/10, 3/11/10, and 5/5/10. Scheduled meetings were conducted under the open meeting law with the agenda being posted in the Courthouse. Minutes of Advisory Board meetings are maintained in the CPC office and are available to the general public. Current CAB members include Judy Herman, Rita Erickson, Maureen Radloff, and Zachary Rethwisch with four vacancies. Advisory Board members were kept abreast of changes in service delivery as agencies moved to federal Medicaid funding streams to provide greater service variety and maximize use of county dollars.

2. Input from Other Areas

At regular meetings of the Board of Supervisors, the CPC Administrator gave progress reports. Overviews of the issues raised at the Advisory Board meetings and the concerns of the providers and families were also shared with the Board of Supervisors. The Board of Supervisors' meetings are open to the public for community participation and discussion. These discussions often appeared in the local paper so the general community was informed.

In addition, the CPC Administrator met as needed with service providers to obtain input and revise goals. Agency directors and agency boards were especially helpful in providing input and suggestions of how to manage an extremely tight budget. The result was a blend of approaches, which allowed consumers' needs to be met, agencies to provide cost-effective services within their individual philosophical framework, and Allamakee County not to have a waiting list for service funding.

Due to the ever changing rules and interpretation of rules regarding federal funding streams for services, this year continues to involve many phone calls and face-to-face meetings with agency personnel as we work together as a system to continue to provide needed services to consumers.

Areas of Concern Identified in Planning Process

Comments in *italics* denote those made by consumers. All other comments are from family members, providers, and citizens.

1. Development of focus groups for developmentally disabled and/or mentally ill clients, as well as for their parents.
2. Development of mental health awareness after-school programs, especially in the Postville area.
3. Enhance community awareness and knowledge about autism.
4. Increased community advocacy, public education, and involvement in legislative issues.

5. Concern about MH/DD clients still receiving services based on available funds. Provide consumers with information to be able to utilize other available services.
6. *Need to expand mental health services, particularly in outpatient counseling.*
7. Distribution of *From Crisis to Recovery* books is a beneficial source.
8. *Need to provide services at times that meet individual's needs considering age, disability, personal choices, etc.*
9. *Concern for everyone's mental health as more people get laid off, especially medications.*

Goals and Objectives

Note: Due to financial and political uncertainties of the next three years we have chosen to state our goals and objectives in more general outcomes. The action steps reflect some current ideas about measurable indicators of these goals.

Goal 1: People with disabilities will live lives no different than people without disabilities.

Objective A: Our community will be responsive to all people regardless of disability especially in difficult economic times.

Action Step 1: Provide one public awareness event, with one event being with local businesses, in collaboration with other entities at least annually.

FY10 Progress: On 1/6/2010, the Citizens' Advisory Board (CAB) met with Senator Mary Jo Wilhelm and Representative John Beard to review issues effecting persons with disabilities before the legislative session. Provider agency personnel, board members and the general public were invited to attend. About a dozen people attended, and feedback from the public and the legislators was very positive.

Action Step 2: CPC staff will be involved with community efforts which address the basic needs of individuals such as housing and medical issues which impacts the mental health of citizens at least six times per year.

FY10 Progress: CPC staff regularly attended quarterly meetings of the Allamakee Interagency, quarterly meetings of the Allamakee Partnership for Community Connections, and monthly meetings of the Postville Coalition until the group disbanded. Additionally, the CPC administrator has met different groups to discuss mental health services for students in the Lansing, Postville and Waukon school districts.

Action Step 3: Complete survey of local service providers as to array of services and availability in terms of times, days, and waiting lists by March 2010.

FY10 Progress: With the exception of waiting list information, this information is available in the HAWC Resource Guide found on the Decorah Public Library website. No further action required.

www.decorah.lib.ia.us/hawcresourceguide

Goal 2: Our community will provide an array of opportunities that aid in life's transitions.

Objective A: Establish a community-wide “no wrong door” policy to all service inquiries.

Action Step 1: Document the number and types of referrals to other service funding sources/agencies beginning July 1, 2009.

FY10 Progress: During the month of July 2009, CPC staff fielded over 25 inquiries about service funding. Calls came from the public, law enforcement, court personnel, attorneys, medical professionals, network providers, and out-of-county individuals. Staff reviewed the documentation and decided that the gathering of the data took more time than it was worth to confirm what staff already knew: Referrals to other agencies and coordination of services with those funded by the CPC office is a daily occurrence. If data were collected over a period of months, a pattern might be noticed. But even an established pattern would not change how staff handles inquiries. CPC staff decided to discontinue this action step.

Action Step 2: Establish “No Wrong Door” community workgroup by January 2011.

FY10 Progress: No action required.

Objective B: The transition of individuals into and out of the CPC service system will meet the service needs of the individual.

Action Step 1: Provide educational opportunity of estate planning for persons with disabilities at least once during FY10-12.

FY10 Progress: No activity in FY10.

Action Step 2: Provide transitional planning in conjunction with school personnel for students with disabilities and their families at least once during FY10-12.

FY10 Progress: On 9/15/09, Jan Heikes (CPC Administrator) and Kim Waters (Case Management Supervisor) met with Kee High School counselor, students and parents as part of a panel presenting post high school options for individuals with disabilities.

Objective C: Our community will provide a supportive and safe environment where clients can transition out of crisis and back to everyday activities.

Action Step 1: Continue CPC staff involvement in researching acute care issues on the state level, including both mental health and substance abuse commitments, through June 30, 2012 or until project ends.

FY10 Progress: The final meeting of the statewide Acute Care Taskforce was on 9/9/2009 with recommendations made to the legislature, Department of Human Services, and other entities involved in providing emergency mental health services.

There are various other groups working on implementing and/or further researching specific recommendations. Areas include local crisis/emergency services, changes in commitment rules, and workforce issues.

Action Step 2: Contract with additional entities to provide local choices in an array of daily activities that are based on an individual's needs by June 30, 2012.

FY10 Progress: Mosaic will be expanding services to individuals under the habilitation option. Because this is a Medicaid program, no contract is necessary.

Goal 3: Counties in Northeast Iowa will work collaboratively to benefit all citizens.

Objective A: Citizens of northeast Iowa will benefit from having a regional mental health and disability services plan.

Action Step 1: CPC Administrators will meet quarterly to analyze exceptions to policies made by each individual county beginning in September 2009.

FY10 Progress: CPCs met nine (9) times during the fiscal year to discuss implementation of the plan in a coherent manner. Dates of the meetings were 7/8/09, 9/11/09, 10/9/09, 11/6/09, 1/11/10, 2/5/10, 3/12/10, 4/9/10, & 6/4/10. Minutes of the meetings are available in each CPC office. During these meetings, exceptions to policies were discussed and shared. If questions arose regarding whether or not to grant an exception, e-mail correspondence was utilized between meetings. CPC Administrators discussed the types of Exceptions to Policies and the circumstances surrounding the exceptions at the monthly meetings. They further analyzed whether or not the types of exceptions warranted changes to the County Management Plan or were truly individuals with unique circumstances. It was determined that changes to the plan were not needed due to the types of exceptions seen during this fiscal year.

Action Step 2: Exception patterns and trends will be communicated to local stakeholders groups on an annual basis as part of the county annual report beginning in FY10.

FY10 Progress: CPC Administrators met on a monthly basis and reported Exceptions to Policies granted in their individual counties. The total number of Exceptions to Policy for the eight county region granted during FY10 was fourteen. Seven of the fourteen (50%) were to waive resource or income eligibility guidelines, typically for outpatient mental health services. Three of the exceptions were to exceed the number of sessions for outpatient mental health services. The other four were for a variety of unrelated exceptions. Allamakee County granted seven exceptions during this time period. (See Attachment A—Exception to Policy Grid.)

Objective B: Clients and citizens will be able to compare local county performance with other counties in northeast Iowa.

Action Step 1: Develop a consumer satisfaction survey to be implemented in all counties by September 2009.

FY10 Progress: Sample surveys were reviewed at the 7/8 & 9/11 meetings with a final version approved at the 10/9 meeting. Surveys were sent to consumers and guardians in March 2010 with the plan to send surveys out every two years (even years).

Action Step 2: Develop a provider satisfaction survey to be implemented in all counties by December 2009.

FY10 Progress: Sample surveys were reviewed at the 7/8, 9/11, & 10/9 meetings with a final version approved at the 11/6 meeting. CPCs decided that a provider survey would be conducted every two years (odd years) beginning in March 2011 to alternate with the consumer/guardian survey.

Action Step 3: Identify regional outcomes measures to be implemented in all counties by September 2010.

FY10 Progress: During the first year of our multi-county plan, CPCs were mainly concerned with creating consistency of implementing the plan across our eight counties. Talking through each county's interpretation of policy and implementing policy in the same manner consumed our monthly meetings, and involved numerous phone calls and emails between meetings. As a result, counties are implementing policy consistently and communication among CPCs and agencies has improved.

Because this effort has taken more time and energy than anticipated, CPCs have chosen to delay identifying regional outcomes. Also, the State of Iowa/Department of Human Services is in the process of determining statewide outcomes which we will adopt at the regional/county level.

Action Step 4: Analyze annual data from performance tools on a regional basis to be included as part of the county annual report beginning in FY10.

FY10 Progress: The only performance tool implemented on a regional basis was the Consumer & Guardian Satisfaction Survey. Overall, consumers in the region were satisfied with county averages that ranged from 78% to 88% satisfaction. Highest ratings were having safe living situations and being treated with respect by caregiver. Not having a job that the individual liked was the biggest issue identified. This information will help regional CPCs and stakeholders shape future plans. For a more complete summary, please see Appendix B.

Objective C: Northeast Iowa CPCs will work together to identify regional gaps in services.

Action Step 1: Identify county unmet service needs through local planning process in each county by January 1, 2010 and annually thereafter.

FY10 Progress: At each CPC meeting unmet needs were discussed as they occurred. The main unmet need discussed was crisis situations including the lack of beds for placement for adults and children both in crisis and post hospitalization. Also discussed was the rising cost of the committals from sheriff transportation, ambulance transport, hospitalizations, attorney fees and advocate costs.

Action Step 2: Identify strategies to fund unmet service needs by July 1, 2010.

FY10 Progress: NE IA CPC administrators met in March with CPC administrators from Black Hawk, Butler, Cerro Gordo, Floyd, Mitchell, and Chickasaw counties to develop a plan for a regional emergency response system. The mental health centers in our region applied for funding through the Magellan Crisis Stabilization grant which was subsequently awarded early in FY11.

Profile of Service Network

The following services and agencies have been part of the service network in FY2010:

Case Management	Allamakee County Case Management DHS Targeted Case Management Johnson County Case Management Linn County Case Management
Transportation	Northeast Iowa Community Action--Transit REM Iowa Community Services, Inc. Veridian Credit Union Five Seasons Transportation
Payee Services	Credit Counseling & Debt Management
Respite & Homemaker Aid	Girling Health Care (Auxil Health) Veridian Credit Union
Psychotropic Medication	Hartig Drug
Psychotherapeutic Services	Northeast Iowa Behavioral Health Hillcrest Community Mental Health Center Backbone Area Counseling Center Black Hawk-Grundy Mental Health Center Bridgeview Community Mental Health Alternative Treatment Associates
Vocational & Day Services	Hillcrest Family Services Opportunity Village REM Developmental Service, Inc. The Spectrum Network Systems Unlimited, Inc. T.A.S.C., Inc. G & G Living Centers Goodwill Industries of the Heartland Goodwill Industries of Northeast Iowa

Supported Community Living	Comprehensive Systems Makee Manor Hillcrest Family Services Full Circle Services G & G Living Centers Mosaic T.A.S.C., Inc. Systems Unlimited Opportunity Homes Prairie View REM Iowa Community Service, Inc. Comprehensive Systems Makee Manor The Spectrum Network Opportunity Village Cedar Valley Community Support Tailored Living Successful Living
Residential Care	Heritage Residence of Community Care Makee Manor Prairie View
Intermediate Care	Abbe Center for Community Care G & G Living Centers Harmony House Hills & Dales Krysilis
State Hospital School Inpatient Hospitalization	Davis Center (PMI) Woodward Resource Center Covenant Medical Center-Waterloo Genesis Medical Center-Davenport Independence Mental Health Institute Mt. Pleasant Mental Health Institute Mercy Medical Center-Cedar Rapids Mercy Medical Center-Mason City Mercy Medical Center-Dubuque Medical Associates-Dubuque St. Luke's Hospital-Cedar Rapids Veterans Memorial Hospital
Commitments	Evaluations Transportation Legal Representation Advocacy

Quality Assurance Activities

Consumer and Provider Outcomes and Satisfaction Surveys

On March 22, 2010, 234 surveys were sent out to the consumers and guardians of the CPC Office of Allamakee County. The survey included eleven short questions about aspects of consumers' lives that are outlined in the Northeast Iowa Counties' "Vision Statement". Consumers were informed that participation was completely voluntary. Confidentiality was assured by separating the return envelopes from the surveys as they came in and having Luther students number the surveys for tabulation and enter the data. Of the 82 (35% response rate) that were returned by April 14th, 37% were filled out by the consumer's legal parent or guardian and about 63% were filled out by the consumer, either by themselves or with assistance from a friend, relative, case manager, or employee of an agency where the consumer accesses services. See Appendix B for complete details.

Northeast Iowa Counties' CPC administrators decided that provider surveys would be sent next year. The plan is to alternate years between the two surveys so that each group would be surveyed every other year in the future.

Consumer Appeals

There was one appeal to the CPC Office in FY10. When more information was presented regarding the person's overall financial situation, the resource guideline was waived.

Waiting List

There were no individuals on the Allamakee County waiting list in FY10.

The State Payment Program (SPP) has had a waiting list off and on throughout Fiscal Year 2010. Allamakee County chose to fund individuals for outpatient mental health counseling services per the Northeast Iowa Mental Health and Disabilities Management Plan that were on the waiting list for SPP. Allamakee County paid for outpatient mental health counseling for three individuals until they were removed from the SPP waiting list.

Utilization Review

The CoMIS integrated database program developed by the Division of Mental Health/Developmental Disabilities staff is a great asset in tracking trends to make long-term service and funding decisions. 195 individuals (1.33% of county population) received service funding in FY10. Patterns of utilization are found in the Statistical and Financial sections of this report.

The CPC Office monitors internal utilization patterns on an annual basis. During the year, 63 (45% increase from FY09) new applications were processed. Of those 60 (95%) applications were approved for service. The remaining 3 were denied due to being over income/resource guidelines, not meeting diagnostic criteria or failure to return a completed CPC application. In terms of service responsiveness, applications were processed in an average of 2.4 days.

Service and Support Evaluation

- Contract agencies must supply annual documentation regarding their appeal process (including the number of appeals) and internal Continuous Quality Assurance program, a

copy of an independent audit, and correspondence relating to licensure or accreditation process.

- None of the local providers report the filing of any consumer appeals during FY2010.
- Contract rates for those agencies located in Allamakee County (Alternative Treatment Associates, Makee Manor, Mosaic, and TASC) are negotiated based on cost reports, projected needs, and the county's financial status.

Statistical Report

The county MH/DD service system is part of a larger whole that includes financial support through social security disability checks and medical services through Medicare/Medicaid. It also includes support from family, peers, and employers as well as other resources in the community. Local county dollars are the source of last payment, and meant to cover the cost of those services not funded elsewhere. Financial guidelines are set at \$2000 or less in resources, and 150% of poverty level or below. Persons must also meet the diagnostic categories of mentally ill, chronically mentally ill, mentally retarded or developmentally disabled. The median income in Allamakee County is \$57,215 (US Census, 2004). 10.8% of those persons live below the poverty guidelines.

The following five tables show the number of individuals that the county paid for services received from 7/1/09 to 6/30/2010. Not counted in the system are those individuals receiving crisis/emergency services at Northeast Iowa Behavioral Health Center.

Table A--Persons Served - Age Group by Primary Diagnostic Category

Date Prepared 11/8/2010

DISABILITY GROUP	Children	Adults	Unduplicated Total
Mental Illness	6	71	76
Chronic Mental Illness	0	37	37
Mental Retardation	0	76	76
Other Developmental	0	6	6
	6	190	195

One-hundred-sixteen (116) individuals were served in FY97, 111 individuals in FY98, 171 individuals in FY99, 143 individuals in FY00, 168 individuals in FY01, 169 individuals in FY02, 159 individuals in FY03, 156 individuals in FY05, 158 individuals in FY05, 159 in FY06, 171 in FY07, 166 in FY08, 178 in FY09, and 195 in FY10. This growth represents an increase of 79 (68%) individuals since FY97.

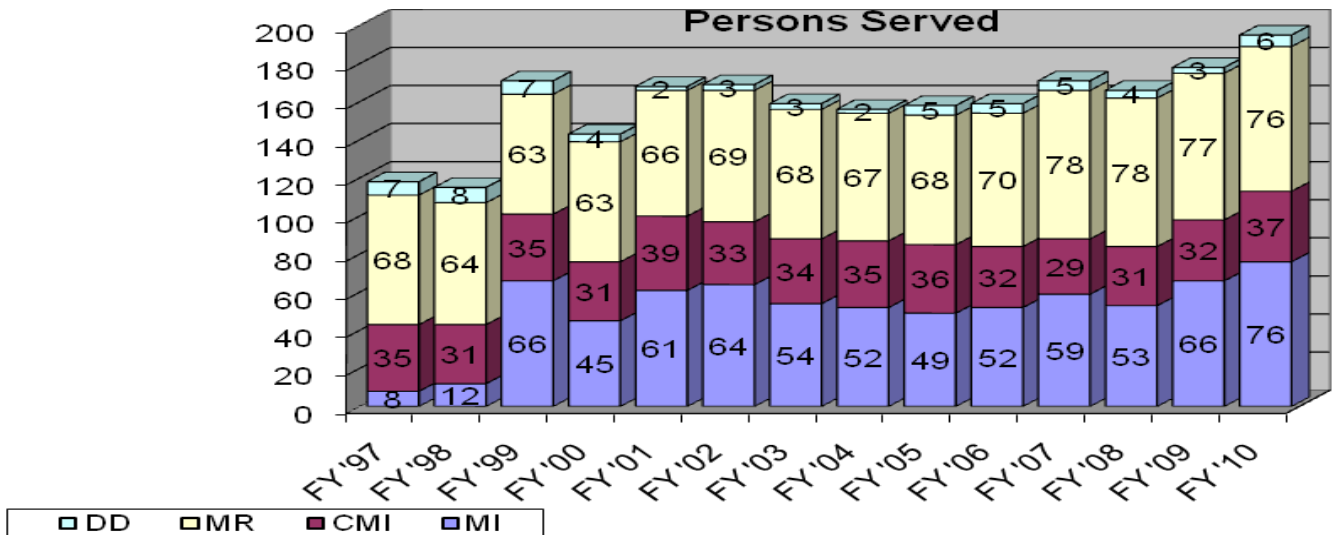


Table B-- Unduplicated Number of Persons Served by COA code and Disability Type

Date Prepared 11/8/2010

For Allamakee County FY: 2010

Account Code	Mental Illness	Chronic Mental Illness	Mental Retardation	Developmental Disability	Other	Service Total
Adult						
21374 Case Management - T19 Match		5	63			68
21375 Case Management - 100% County		7	11	4		22
31000 Transportation (Do not use)	1	4	44	1		50
31354 Transportation		2	45	1		48
32320 Homemaker/Home Health Aid			1			1
32325 Respite			1			1
32327 Representative Payee		1				1
32329 Supported Community Living (Hourly)		15	26			41
32399 Other			3			3
41306 Physiological Tmt. Prescription Medicine	2					2
42305 Psychotherapeutic Tmt. Outpatient	50	6				56
44396 Community Support Programs	1					1
50360 Sheltered Work			28	1		29
50362 Work Activity Services		4	21			25
50368 Supported Employment Services		4	3	1		8
50399 Day Services		6	48	2		56
63329 Supported Community Living (Day)		1	39			40
64314 RCF (Comm. 6 & over Bed)		5	1			6
64316 RCF/PMI (Comm. 6 & over Bed)		1				1
64317 Nursing Facility (Comm. 6 & over Bed)		1				1
64318 ICF/MR (Comm. 6 & over Bed)			4			4
71319 Inpatient (State MHI)		2				2
72319 Inpatient (State Hosp. School)			1			1
73319 Inpatient (Other Priv./Public Hospitals)	9	3				12
74300 D & E Related to Commitment		2				2
74353 Sheriff Transportation	13	9				22
74393 Legal Representation (cmtmt court costs/legal fees)	10	14				24
74395 Mental Health Advocates	16	18	1			35

Account Code	Mental Illness	Chronic Mental Illness	Mental Retardation	Developmental Disability	Other	Service Total
Child						
42305 Psychotherapeutic Tmt. Outpatient	1					1
73319 Inpatient (Other Priv./Public Hospitals)	1					1
74353 Sheriff Transportation	4					4
74395 Mental Health Advocates	4					4

Table C--Mental Health System Growth / Loss Report

Date Prepared 11/8/2010

For Allamakee County FY: 2010

DISABILITY GROUP	First Quarter	Second Quarter	Third Quarter	Fourth Quarter	Net Change
Chronic Mental Illness	35	28	26	26	-9
Mental Illness	37	33	35	34	-3
Mental Retardation	73	67	66	64	-9
Other Developmental	5	3	3	3	-2
	150	131	130	127	-23

Table D--County Dollars Spent by COA Code and Disability Type

Date 11/23/2010 For Allamakee County FY: 2010

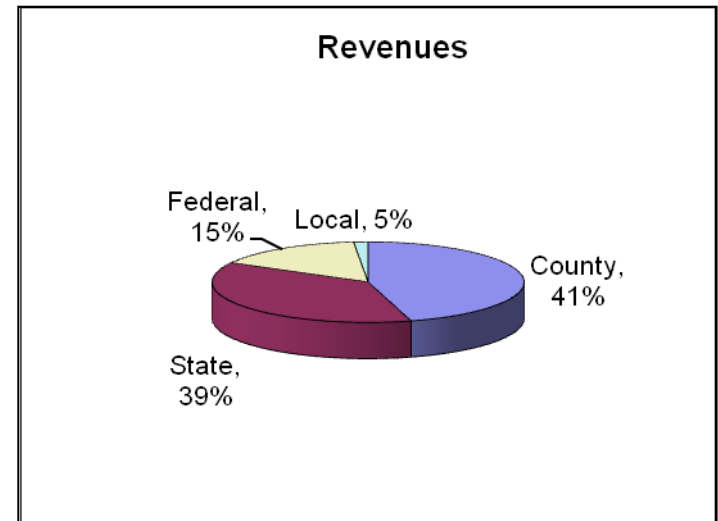
Account Code	Mental Illness	Chronic Mental Illness	Mental Retardation	Developmental Disability	Other	Service Total
05000 Public Education Services	\$32.00	\$227.00	\$255.00	\$210.00		\$724.00
11100 Direct Administrative	\$22,936.00	\$13,455.00	\$32,585.00	\$1,394.00	\$2,933.05	\$73,303.00
12000 Purchased Administrative	\$486.40	\$288.80	\$714.40	\$30.40		\$1,520.00
21374 Case Management - T19 Match		\$3,383.11	\$24,051.56			\$27,434.67
21375 Case Management - 100% County		\$4,240.31	\$1,800.35	\$1,489.36		\$7,530.02
21399 Other Case Management		\$46,506.00	\$184,116.00	\$4,813.00		\$235,435.00
31000 Transportation	\$22.21	\$1,421.50	\$24,478.18	\$3,047.35		\$28,969.24
32320 Homemaker/Home Health Aid			\$2,547.21			\$2,547.21
32325 Respite			\$1,242.33			\$1,242.33
32327 Representative Payee		\$185.00				\$185.00
32329 Supported Community Living (Hourly)		\$31,945.77	\$38,930.22			\$70,875.99
32399 Other			\$907.40			\$907.40
41306 Physiological Tmt. Prescription Medicine	\$1,985.22					\$1,985.22
42305 Psychotherapeutic Tmt. Outpatient	\$49,439.26	\$5,758.70				\$55,197.96
44396 Community Support Programs	\$2,475.00					\$2,475.00
50360 Sheltered Work			\$181,536.98	\$4,707.15		\$186,244.13
50362 Work Activity Services		\$1,359.77	\$46,895.71			\$48,255.48
50368 Supported Employment Services		\$1,210.45	\$3,034.37	\$259.56		\$4,504.38
50399 Day Services		\$3,665.85	\$67,517.50	\$60.76		\$71,244.11
63329 Supported Community Living (Day)		(\$1,423.05)	\$573,424.86			\$572,001.81
64314 RCF (Comm. 6 & over Bed)		\$22,146.89		\$20,040.56		\$42,187.45
64316 RCF/PMI (Comm. 6 & over Bed)		\$17,866.64				\$17,866.64
64317 Nursing Facility (Comm. 6 & over Bed)		\$8,739.88				\$8,739.88
64318 ICF/MR (Comm. 6 & over Bed)			\$61,510.07			\$61,510.07
71319 Inpatient (State MHI)		\$18,161.57				\$18,161.57
72319 Inpatient (State Hosp. School)			\$36,483.81			\$36,483.81
73319 Inpatient (Other Priv./Public Hospitals)	\$18,242.99	\$1,700.19				\$19,943.18
74300 D & E Related to Commitment	\$100.00	\$110.00				\$210.00
74353 Sheriff Transportation	\$4,715.23	\$2,040.15				\$6,755.38
74393 Legal Representation (cmtmt court costs/legal fees)	\$1,699.80	\$3,298.74				\$4,998.54
74395 Mental Health Advocates	\$4,306.41	\$12,219.95	\$382.17			\$16,908.53
Total County \$:	\$106,440.15	\$198,507.95	\$1,282,413.4	\$36,052.34	\$2,933.05	\$1,626,346.91

The previous figures reflect services and expenditures on an accrual basis (incurred from 7/1/09 to 6/30/10). Accrual figures reported by the Auditor's office will vary slightly due to differences in procedures. Those figures are \$1,631,391 for the total Mental Health fund including the Allamakee Case Management program. The majority of the difference is due to differences in accounting procedures in different software programs.

The following figures reflect cash expenditures during that time. These figures are included because cash figures are what are published in other county reports. The FY10 cash budget was \$2,103,684 with \$1,622,627 (77%) being spent.

FY 2010 Revenues (Cash)

		<u>Source</u>	
County		\$ 747,869	38.1%
Current Property Tax	\$ 665,510		
Delinquent Property Tax	\$ 4,407		
Other County Taxes	\$ 77,952		
State		\$ 937,029	47.7%
MH Property Tax Relief	\$ 455,101		
MHDD Allowed Growth	\$ 327,994		
MHDD Community Services	\$ 95,817		
State Reimbursements	\$ 26,680		
Other Replacement/Tax Credits	\$ 31,437		
Federal		\$ 268,637	13.7%
Social Services Block Grant	\$ 63,866		
Medicaid Case Management	\$ 204,771		
Local		\$ 9,107	0.5%
Consumer Co-payments	\$ 8,034		
Misc. Receipts	\$ 1,073		
Total Revenues	\$1,962,642		100%
County		\$ 747,869	38.1%



**FY10 Expenditures
(Cash)**

	<u>MI</u>	<u>CMI</u>	<u>MR</u>	<u>DD</u>	<u>Service Total</u>
<i>Information and Education Services</i>	\$ 32	\$ 227	\$ 255	\$ 210	\$ 724
<i>Administration-CPC Office (4%)</i>	\$ 23,200	\$ 13,533	\$ 33,797	\$ 1,484	\$ 72,014
<i>Purchased Administration</i>	\$ 486	\$ 289	\$ 714	\$ 30	\$ 1,520
<i>Coordination Services</i>					
Case Management - Medicaid Match		\$ 3,880	\$ 25,499	\$ 74	\$ 29,453
Case Management - 100% County		\$ 3,866	\$ 2,036	\$ 1,489	\$ 7,392
Other - Case Management Program		\$ 46,527	\$ 184,217	\$ 4,817	\$ 235,562
<i>Personal & Environmental Support</i>					
Transportation					
NE Iowa Transit	\$ 22	\$ 1,016	\$ 27,990	\$ 1,942	\$ 30,970
Various providers	\$ -	\$ 128	\$ 1,327	\$ -	\$ 1,455
Homemaker/Home Health	\$ -	\$ -	\$ 3,294	\$ -	\$ 3,294
Respite	\$ -	\$ -	\$ 1,771	\$ -	\$ 1,771
Representative Payee	\$ -	\$ 222	\$ -	\$ -	\$ 222
Supported Community					
Living					
TASC, Inc.	\$ -	\$ 22,169	\$ 33,681	\$ -	\$ 55,849
Other Providers	\$ -	\$ 9,890	\$ 6,856	\$ -	\$ 16,746
<i>Treatment Services</i>					
Prescription Medicine					
Various providers	\$ 2,081	\$ -	\$ -	\$ -	\$ 2,081
Outpatient					
NEIBH	\$ 40,243	\$ 2,982	\$ -	\$ -	\$ 43,226
Various providers	\$ 7,811	\$ 3,710	\$ -	\$ -	\$ 11,521
Community Support Program-NEIBH	\$ 2,475	\$ -	\$ -	\$ -	\$ 2,475
<i>Vocational & Day Services</i>					
TASC, Inc.	\$ -	\$ 3,341	\$ 269,289	\$ 4,109	\$ 276,738
Makee Manor	\$ -	\$ 3,020	\$ -	\$ -	\$ 3,020
Various providers	\$ -	\$ 11	\$ 31,961	\$ 433	\$ 32,404
<i>Living Arrangements</i>					
TASC, Inc.	\$ -	\$ -	\$ 211,751	\$ 157	\$ 211,909
Mosaic	\$ -	\$ -	\$ 176,594	\$ -	\$ 176,594
Makee Manor	\$ -	\$ 13,924	\$ 58,448	\$ 20,051	\$ 92,424
Various providers	\$ -	\$ 35,277	\$ 179,896	\$ -	\$ 215,174
<i>Institutional Services</i>					
MHIs/Resource Centers	\$ -	\$ 12,533	\$ 36,228	\$ -	\$ 48,761
Other Hospitals	\$ 18,246	\$ 1,591	\$ -	\$ -	\$ 19,837
<i>Commitments</i>					
Evaluations	\$ 100	\$ -	\$ -	\$ -	\$ 100
Sheriff Transportation	\$ 4,644	\$ 2,357	\$ -	\$ -	\$ 7,001
Legal Representation	\$ 2,011	\$ 2,954	\$ -	\$ -	\$ 4,965
Judicial Advocate	\$ 4,853	\$ 12,178	\$ 394	\$ -	\$ 17,425
Total Expenditures	\$ 106,205	\$ 195,626	\$1,285,999	\$ 34,797	\$ 1,622,626
Budgeted Expenditures	\$ 119,388	\$ 251,188	\$1,690,592	\$ 42,516	\$ 2,103,684

77%

The following table shows an overview of the Mental Health & Developmental Disabilities Fund (Fund 10). Of particular note is the trend that began in FY 2000 where expenditures exceeded revenues thereby lowering the fund balance. In all but FY 2000, the mental health levy was set at the maximum allowed by law. With no new revenue sources apparent from the state (as previously believed to be the plan), overall expenditures will have to be brought down to the level of current revenues.

Beginning in FY 2002, Community Services allocations were based on the level of the fund balance. This determination is based on accrual figures. The FY 2010 accrual fund balance is \$963,799 or 59% of the FY 2010 expenditures of \$1,631,391. Please note that the following table shows cash figures from which the county develops budgets.

MH/DD Fund—Historical Perspective

<u>Source</u>	<u>FY05</u>	<u>FY06</u>	<u>FY07</u>	<u>FY08</u>	<u>FY09</u>	<u>FY10</u>
<u>Cash</u>						
Beginning Fund Balance	\$ 517,455	\$ 847,269	\$ 582,418	\$ 456,971	\$ 405,255	\$ 808,351
Revenues	\$1,856,084	\$ 1,356,311	\$ 1,643,720	\$1,893,086	\$2,168,366	\$1,962,642
Expenditures	\$(1,526,270)	\$(1,621,162)	\$(1,769,167)	\$(1,944,802)	\$(1,765,270)	\$(1,622,625)
Ending Fund Balance	\$ 847,269	\$ 582,418	\$ 456,971	\$ 405,255	\$ 808,351	\$ 1,148,368
% of budgeted exp	85%	93%	91%	97%	86%	77%
Levy Rate	\$ 1.40539 100% levy	\$ 1.17692 86% levy	\$ 1.38291 100% levy	\$ 1.37965 100% levy	\$ 1.31016 100% levy	\$ 1.23770 100% levy

The maximum amount that can be levied is based on FY96 expenditures(\$1,279,497) minus the amount of property tax relief (\$492,722). That amount is \$786,775 minus the Utility Replacement Tax.

<u>Accrual</u>						
Beginning Fund Balance	\$ 367,686	\$ 664,216	\$ 351,774	\$ 26,723	\$ 157,687	\$ 621,026
Revenues	\$,849,590	\$,346,289	\$ 1,681,207	\$,872,080	\$,175,045	\$ 1,974,164
Expenditures	\$,553,060)	\$(1,658,731)	\$(1,806,258)	\$(1,941,116)	\$(1,711,706)	\$(1,631,391)
Ending Fund Balance	\$ 664,216	\$ 351,774	\$ 226,723	\$ 157,687	\$ 621,026	\$ 963,799
% of expenditures	42.8%	21.2%	12.6%	8.12%	36.3%	59.1%

Appendix A Northeast Iowa Counties Exceptions to Policies Granted

NORTHEAST IOWA COUNTIES CPC/COMMUNITY SERVICES
Record of Exceptions to Policy Granted
FY 2010

County	Date	Diagnostic Group (MR, DD, CMI, MI, BI)	Policy to Which Exception Was Made
Allamakee	7/27/09	MI	Waived income eligibility for outpatient. High expenses due to child support.
Allamakee	7/27/09	MI	Waived 3 mo. Med limit. High expenses due to child support.
Allamakee	9/14/09	CMI	Waived income eligibility. RCF costs over income.
Allamakee	1/25/10	CMI	Waived resource eligibility for RCF service costs. Family of 4 savings.
Allamakee	1/28/10	MI	Waived resource eligibility for outpatient. Living off savings.
Allamakee	3/15/10	MI	Waived resource eligibility for outpatient. Living off savings.
Allamakee	6/8/10	MI	Waived income eligibility for advocate. Administrative discretion.
Bremer	5/1/10	BI	Serving BI on BI Waiver only.
Buchanan	11/13/09	DD	Waived resource limit. Unable to sell house that was unlivable.
Howard	7/16/09 on	CMI	Waived income guidelines. Ongoing bills increase mental health symptoms
Howard	7/1/09	MI	Waived limit of 24 sessions.
Howard	7/1/09	MI	Waived limit of 24 sessions.
Winneshiek	7/1/09	MI	Waived outpatient limit of 24 visits
Winneshiek	8/11/09	CMI	Approved overnight aid & additional public health visits to prevent move to RCF

Appendix B

Allamakee County Consumer/Guardian Survey Data CPC Office of Allamakee County

May 2010

On March 22, 2010, surveys were sent out to 180 consumers and to 54 guardians of the CPC Office of Allamakee County. The surveys included eleven short questions about aspects of consumers' lives that are outlined in the county's "Vision Statement". Both consumers and guardians were informed that participation was completely voluntary. (See Attachment A.) Confidentiality was assured by separating the return envelopes from the surveys as they came in and having CPC personnel number the surveys for tabulation and enter the data.

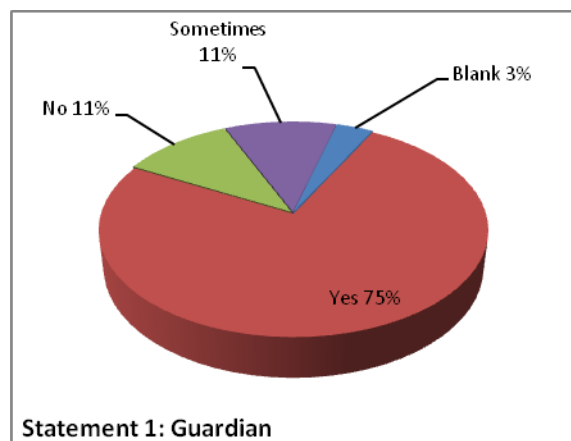
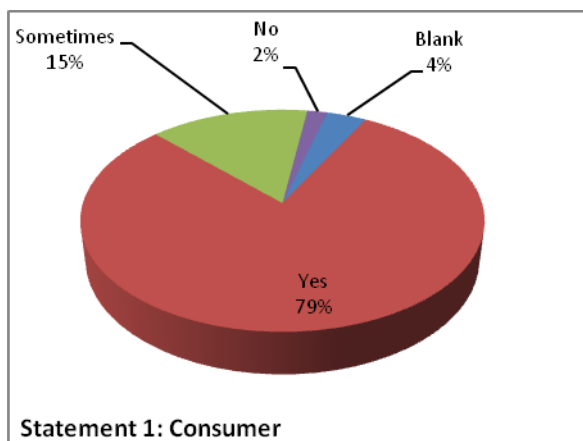
Of the 82 (35% response rate) that were returned by April 14th, 37% were filled out by the consumer's legal parent or guardian and about 63% were filled out by the consumer, either by themselves or with assistance from a friend, relative, case manager, or employee of an agency where the consumer accesses services. This year's response rate was down from 38% rate in FY07.

Eleven statements were used in conjunction with a three point scale (Yes, Sometimes, and No) to measure the consumer or guardian's level of satisfaction with services provided through the CPC Office. A pie graph was composed for each question to show the trends of consumer and guardian satisfaction of the services offered by the CPC Office.

The first three statements and last statement (1-3 & 11) address service delivery system:

Statement 1: I have a choice in the services I receive.

On the statement, "I have a choice in the services I receive," 79% of consumers responded "yes" to having choice in services received and 75% of guardians responded "yes" as well.

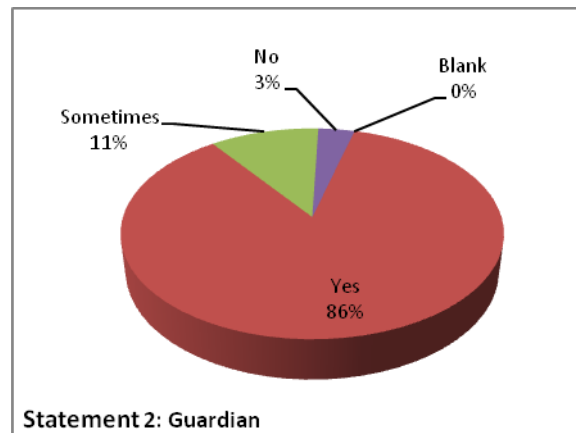
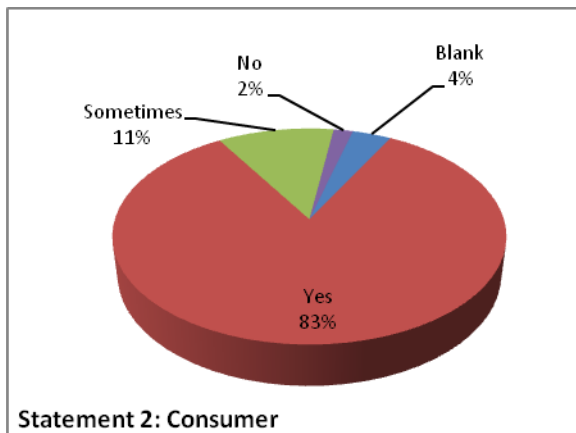


The pie graph above shows how consumers and guardians feel about having a choice in the services received. Only 2% of consumers answered "no" to not having choices for services

received; however, 11% of guardians answered “no” to this question. This small percentage of consumers may have unique situations where there were limited choices available in the community.

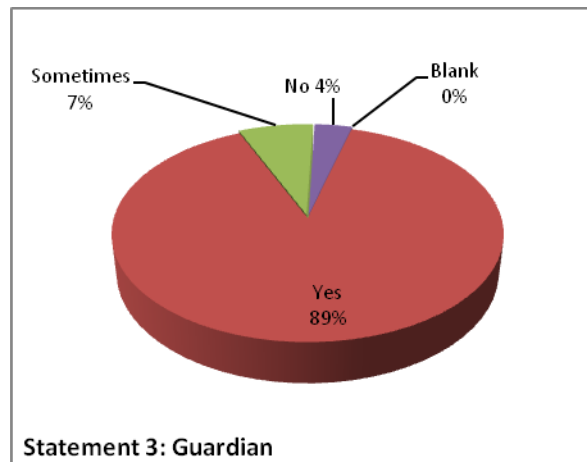
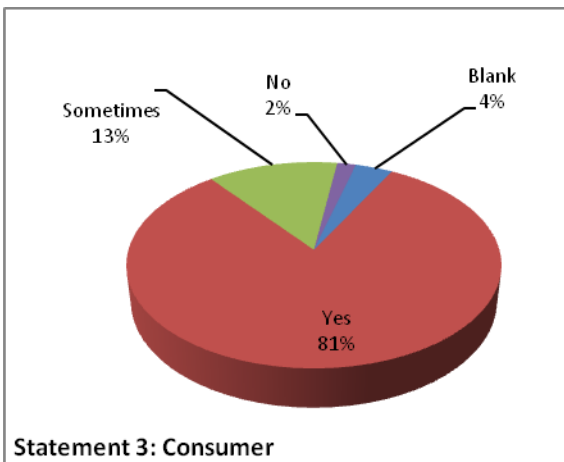
Statement 2: The services I receive help me.

Statement 2 asked consumers if they felt services helped them. Eighty-three percent (83%) of consumers responded “yes”, while 86% of guardians responded “yes”. Eleven percent (11%) of both consumers and guardians who submitted a survey felt services did help sometimes. There were only 2% of consumers and 3% of guardians answering “no” that services did not help.



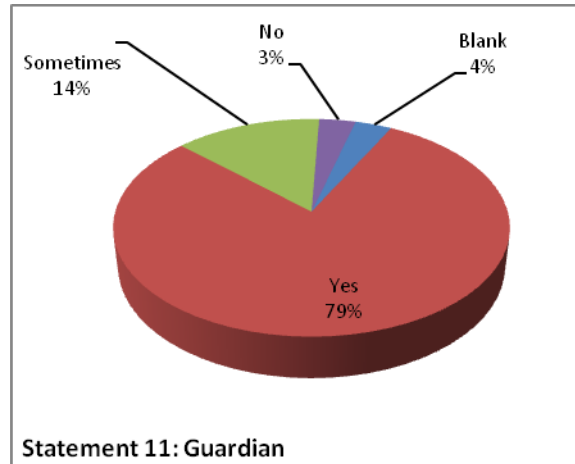
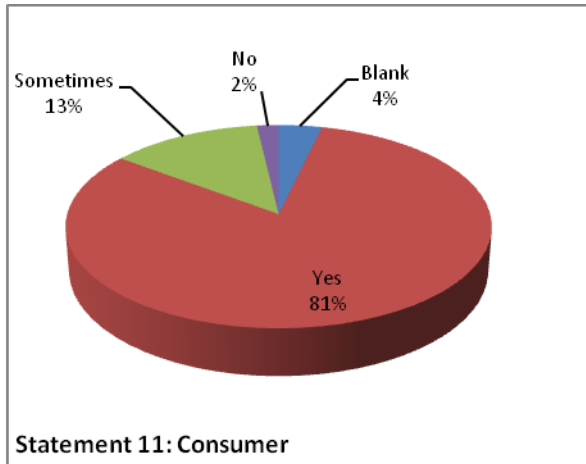
Statement 3: My service providers treat me with respect.

Eighty-one percent (81%) of consumers feel they are treated with respect and 89% of guardians said their individuals with services were respected as well. Only 2% of consumers and 4% of guardians answered “no” to this statement saying they did not feel they were treated with respect.



Statement 11: I am happy with the service providers I use.

The final question on the survey asks consumers and guardians if they are happy with their service providers. Among consumers, 94% answered “yes” or “sometimes” to being happy with their service providers. Individuals not generally satisfied were dissatisfied on other more specific questions.

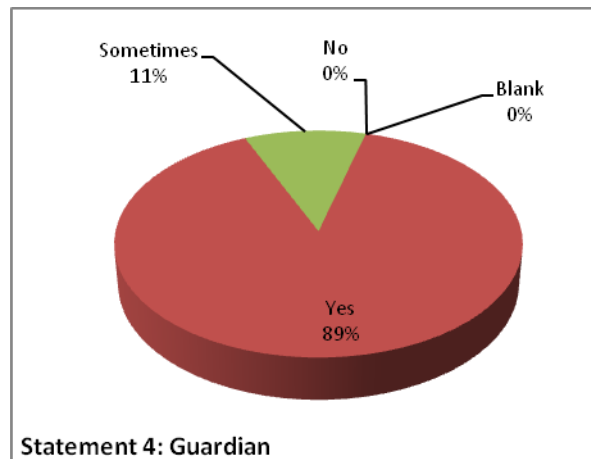
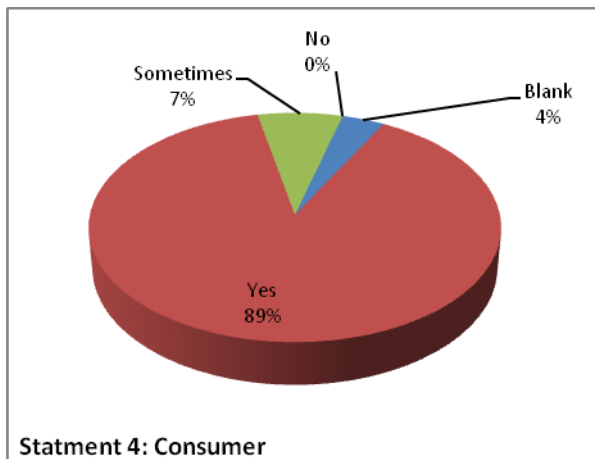


Those answering “no” to this statement did not list any service providers which may indicate a need for further outreach to some individuals.

Questions 4 through 6 address the issue of health and safety.

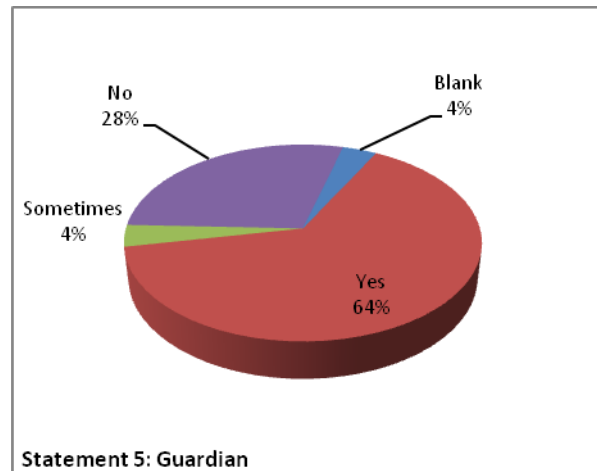
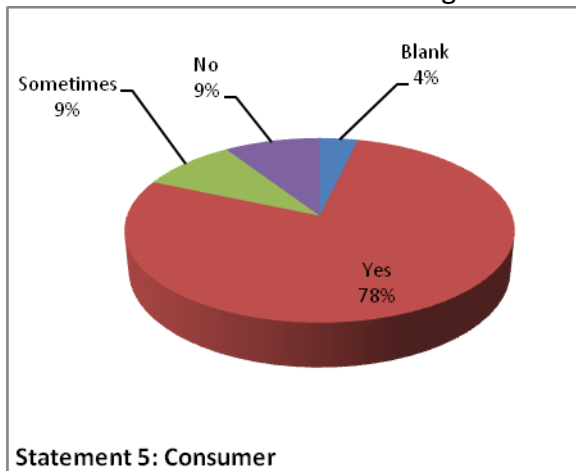
Statement 4: I have safe living arrangements.

Most consumers (89%) and guardians (89%) feel they have safe living arrangements. Seven percent (7%) of consumers responding to the survey felt that sometimes they feel they do not have safe living arrangements.



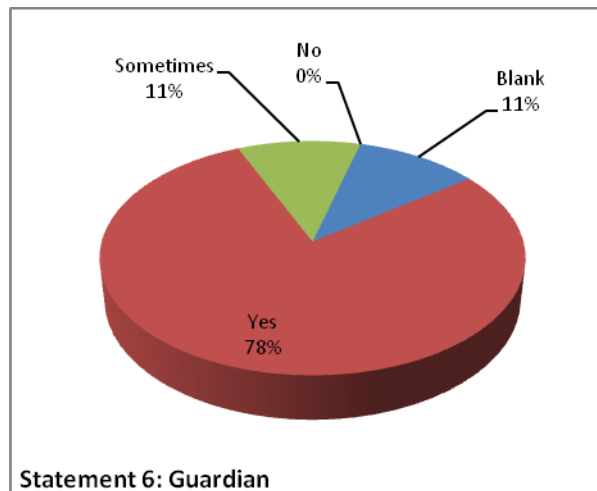
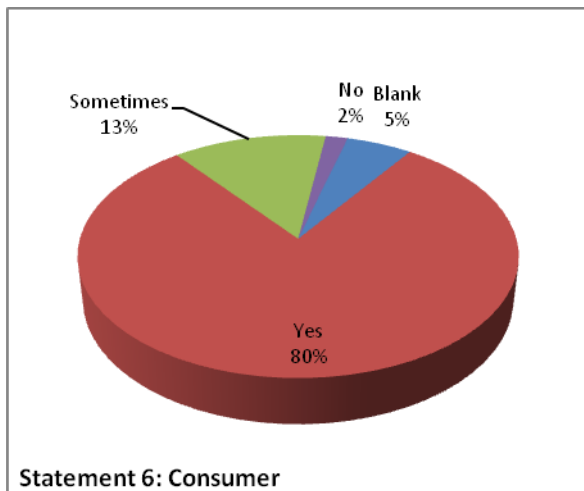
Statement 5: I know how to get help in an emergency.

In regards to knowing how to get help in an emergency, 87% of consumers either said yes (78%) or sometimes (9%), while guardians did not feel quite as confident in their individuals knowing emergency procedures with only 68% answering “yes” (64%) or “sometimes”(4%). The biggest concern in this area is that 9% of consumers, and 28% of guardians, answered “no” to the statement, “I know how to get help in an emergency.” All consumers and guardians should feel confident and know how to access help in an emergency. Case managers and service providers will be asked to continue reviewing this with individuals.



Statement 6: My medicine helps me feel better.

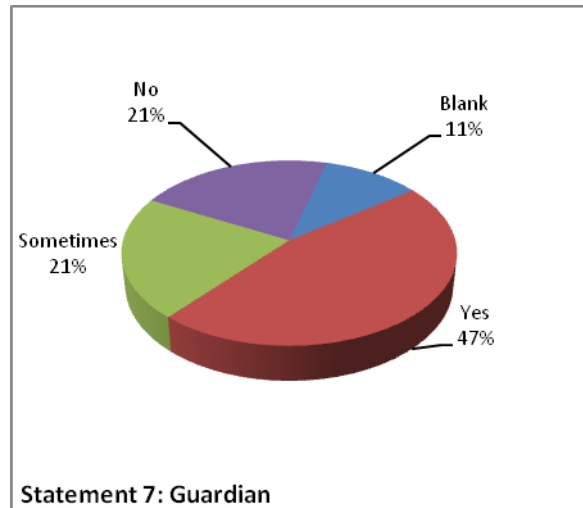
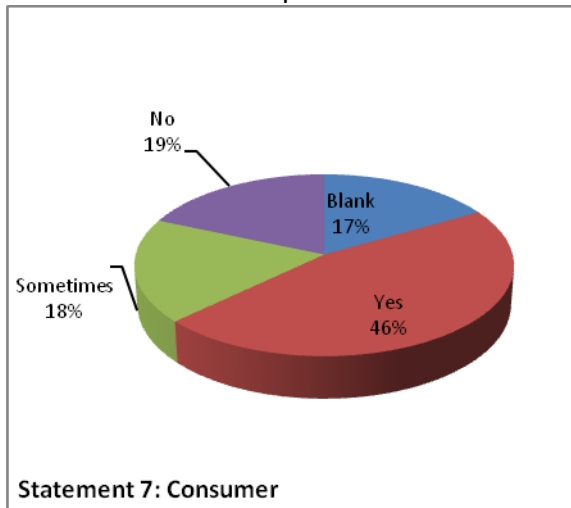
Statement 6 asked consumers and guardians how they felt their medication helped them. Among consumers, 80% answered “yes” and 13% answered “sometimes”. Consumers felt that medicine did help them, more than guardians, with 78% answering “yes” and 11% answering “sometimes” to the statement.



Questions 7 through 10 address the issue of community inclusion.

Statement 7: I have found a job that fits my needs.

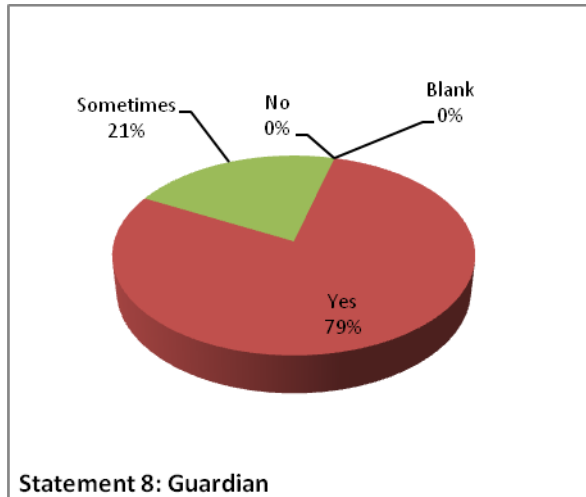
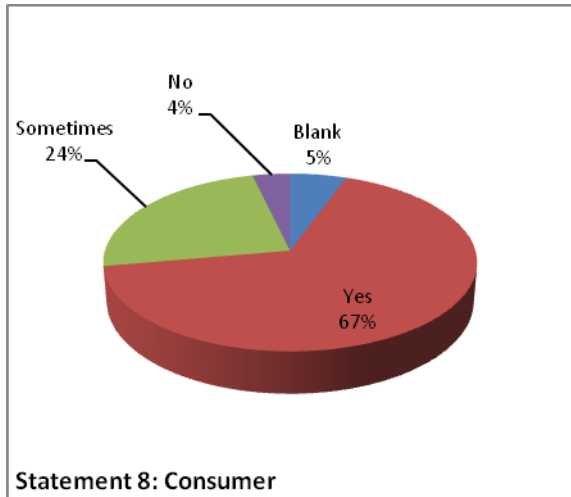
Statement 7 asks consumers and guardians if they feel they have jobs that fit their needs. Forty-six percent (46%) of consumers and 47% of guardians answered “yes” to having jobs that fit their needs in the community. While 18% of consumers and 21% of guardians answered “sometimes” to this question.



The pie chart above shows how consumers and guardians feel about having jobs that fit their needs. Among consumers, 19% answered “no” to this question. Twenty-one percent (21%) of guardians and 17% of consumers left this question blank. This is the area of most dissatisfaction and should be noted in future planning of services.

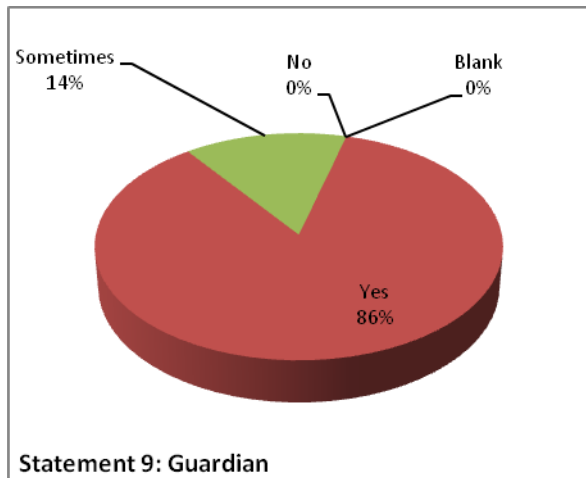
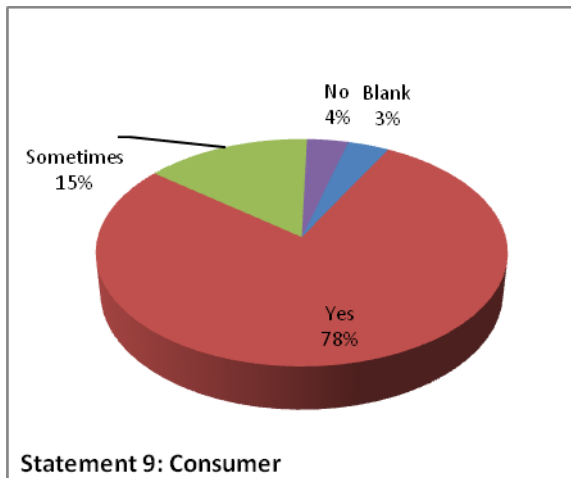
Statement 8: I have things to do in my free time.

Sixty-seven percent (67%) of consumers and 79% of guardians answered “yes” they have things to do in their free time, while 24% of consumers and 21% of guardians answered “sometimes” to having things to do. Overall, consumers and guardians for the most part, feel there are things to do in their free time.



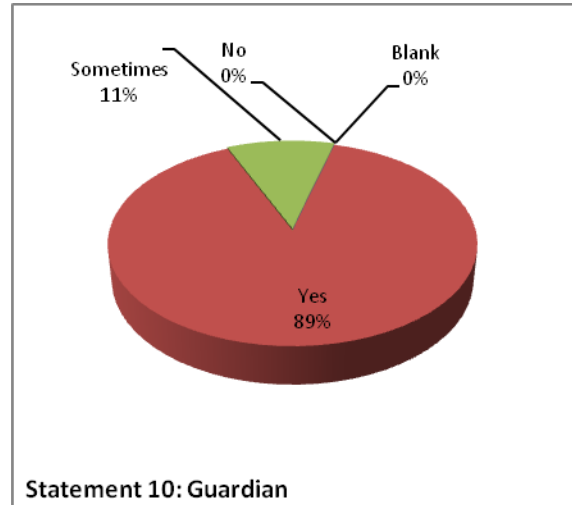
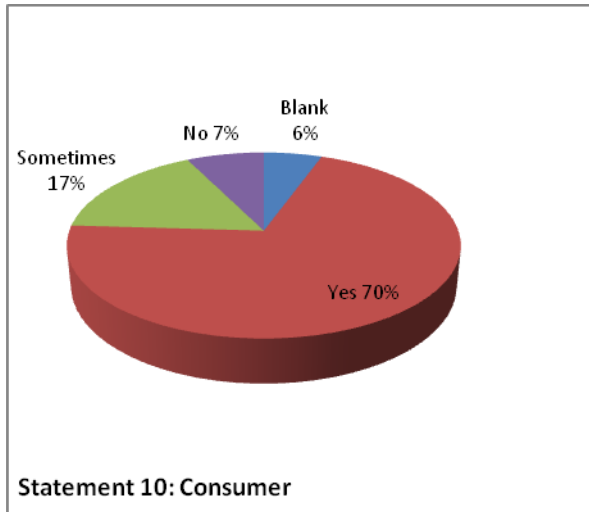
Statement 9: I am able to get to the places I need to.

Statement 9 asks consumers and guardians if they are able to get to the places they need to go. Ninety-three percent (93%) of consumers stated “yes” or “sometimes” and 100% of guardians answered the same way. These results show consumers are utilizing the community transportation and resources available to them.



Statement 10: I feel included in my community.

Statement 10 asks consumers how they feel like they are included in the community. Eighty-seven percent (87%) of consumers and 100% of guardians answered “yes” or “sometimes”. Only 7% of consumers answered “no” to this statement.

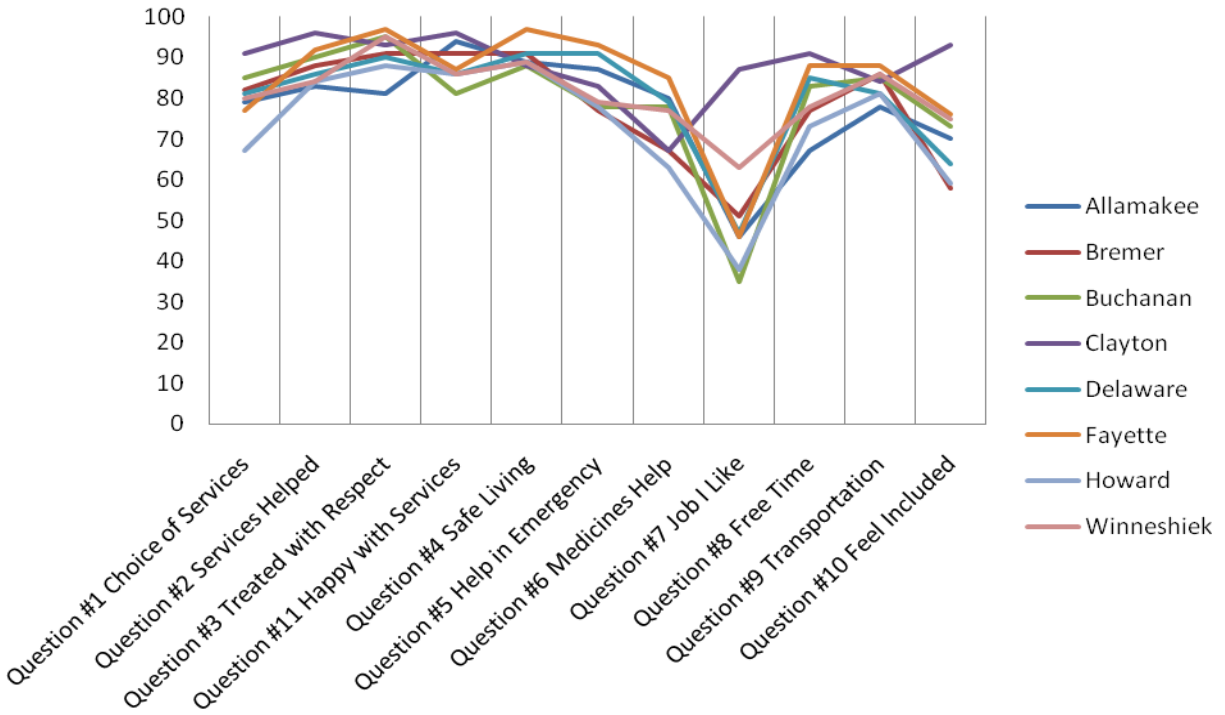


According to data gathered from the surveys, consumers in Allamakee County are accessing a variety of services from several agencies. These local organizations include Allamakee County Case Management, Mosaic, TASC, Community Action/Transit, Full Circle, Northeast Iowa Behavioral Health, Backbone Area Counseling, and Gundersen Lutheran Behavioral Health. Other providers include Prairie View and Woodward Resource Center. A variety of other supports such as Medicaid/Medicare, and pharmacies were noted as services received.

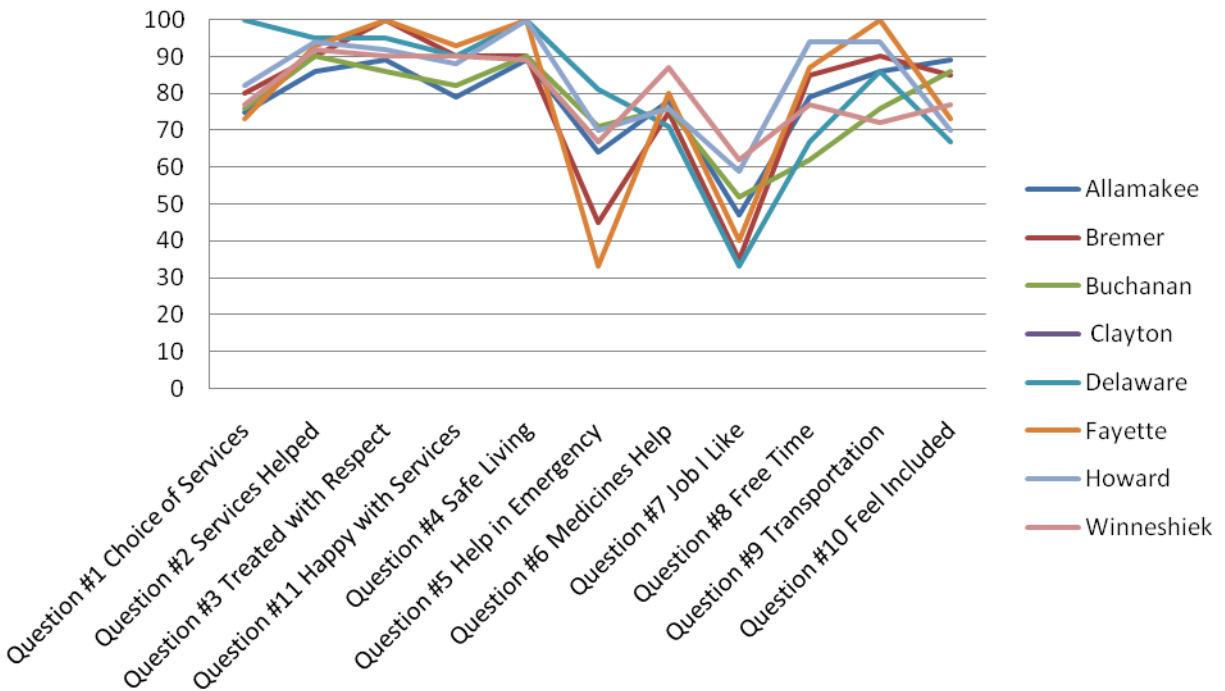
Consumers in the region were satisfied with county averages that ranged from 78% to 88% satisfaction. Highest ratings were having safe living situations and being treated with respect by caregiver. Not having a job that the individual liked was the biggest issue identified. This information will help regional CPCs and stakeholders shape future plans.

Overall, the surveys provided positive feedback about the CPC system. The consumers and guardians had mostly the same general answers to the statements. We were unable to compare previous years' results to this year as we changed the structure of the survey making it hard to compare information gathered in previous years. There are a few areas noted throughout the summary that were concerning, which need to be further researched to bring clarity to these issues.

Individual Survey Results



Guardian Survey Results



Special thanks to Christine Meling, social work intern from Luther College, for her development, implementation, and initial analysis of the data for this project and to Dr. Ginger Meyette and students of the Luther College social work research class of spring 2010.

Attachment A

INDIVIDUAL SURVEY
NORTHEAST IOWA COUNTIES

In order to improve the Mental Health and Disabilities Services System, please complete this survey and return it in the envelope provided by April 7, 2010. Thank you in advance for taking the time to respond. This survey is voluntary, and there will be no penalty if you choose not to participate. Your answers are confidential. Please CIRCLE your response.

1	I have a choice in the services I receive.	YES	SOMETIMES	NO
2	The services I receive help me.	YES	SOMETIMES	NO
3	My service providers treat me with respect.	YES	SOMETIMES	NO
4	I have safe living arrangements.	YES	SOMETIMES	NO
5	I know how to get help in an emergency.	YES	SOMETIMES	NO
6	My medicine helps me feel better.	YES	SOMETIMES	NO
7	I have found a job that fits my needs.	YES	SOMETIMES	NO
8	I have things to do in my free time.	YES	SOMETIMES	NO
9	I am able to get to the places I need to.	YES	SOMETIMES	NO
10	I feel included in my community.	YES	SOMETIMES	NO
11	I am happy with the service providers I use.	YES	SOMETIMES	NO

Are there any services that you would like that are not available in your area?

Did anyone help you fill out this form? Yes No Family/Friend Staff

Which agencies do you work with?

Name: _____ Phone _____
optional optional

Attachment B

GUARDIAN SURVEY
NORTHEAST IOWA COUNTIES

In order to improve the Mental Health and Disabilities Services System, please complete this survey and return it in the envelope provided by April 7, 2010. Thank you in advance for taking the time to respond. This survey is voluntary, and there will be no penalty if you choose not to participate. Your answers are confidential. Please CIRCLE your response.

Individual refers to the person for whom you are guardian.

1	My individual has a choice in the services received.	YES	SOMETIME	NO
2	The services received help my individual.	YES	SOMETIMES	NO
3	Service providers treat my individual with respect.	YES	SOMETIMES	NO
4	My individual has a safe living arrangement.	YES	SOMETIMES	NO
5	My individual knows how to get help in an emergency.	YES	SOMETIMES	NO
6	My individual's medication help him / her feel better.	YES	SOMETIMES	NO
7	My individual has found a job that fits his / her needs.	YES	SOMETIMES	NO
8	My individual has things to do in his / her free time.	YES	SOMETIMES	NO
9	My individual is able to get to the places he / she needs to.	YES	SOMETIMES	NO
10	My individual feels included in his / her community.	YES	SOMETIMES	NO
11	My individual is happy with the service providers he / she uses.	YES	SOMETIMES	NO

Are there any services that you would like that are not available in your area?

Which service providers does your individual work with?

Name: _____ Phone _____

Attachment C
ALLAMAKEE COUNTY
MENTAL HEALTH & DEVELOPMENTAL DISABILITIES SERVICES
CENTRAL POINT OF COORDINATION OFFICE

110 Allamakee Street

Waukon, IA 52172
563.568.6227
jheikes@co.winneshiek.ia.us

March 22, 2010

Dear Consumer/Guardian:

The CPC office has a program to find out how our services are working. We value the opinions of the people we serve, and we wish to assess the quality of the services you receive. We are asking that you fill out the enclosed survey. Please return it in the prepaid envelope by **April 7, 2010**. This will help us understand whether people who use our services are enjoying their lives, and help us better serve you in the future.

If you wish to have someone help you fill out this survey, please do so. Just ask that person to check the appropriate line of the survey so we can mark the answer correctly.

This survey is entirely voluntary. If you choose not to participate there will be no penalty. Also, you and your answers will not be identified. In other words, your opinions are completely confidential and cannot be linked to you by name. To further assure your privacy, our office staff members put together the results. If you have any questions, please feel free to call (563) 568-6227.

Your opinions, values, and experiences are very important to us. Responses will be counted up and included in our Annual Report for the Year 2010.

Thanks so much for taking the time to tell us what you think and to help us do a better job of working for you.

Sincerely yours,

Jan Heikes
CPC Administrator