

Update!



Fall
2009

Nakia Maye, *Editor*

Annual Meeting 2009

If you missed this year's Annual Meeting, you missed a very special event! Our registration was larger than ever- we had over 260 people registered. Our silent auction grew from last year – we raised almost \$3,000. Our awardees were special as always. We were even able to keep Dennis Brescoll in the dark about being the recipient of the Patty Schemm Leadership Award until he actually received it. Our Advocacy Award winner, Constance Rowley, who serves on the Detroit/Wayne County Community Mental Health Agency Board of Directors, was accompanied by her husband and daughter. Our media award winner, Teresa Blossom, who works with the Detroit/Wayne County Community Mental Health Agency, has been a strong spokesperson for consumers through print media. Marrion Scott, who received the AWBS/Junior League Award, was not in attendance, but we wish her well.

about the fact that they hadn't been to the Roostertail in years and how pleasantly surprised they were. In addition, our consumers had their products for sale.

Our entertainment was The Recovery Band, which coincidentally had been profiled on Fox 2 News. Our Platinum Sponsors were Synergy Partners, LLC and St. John Hospital, represented by Isadore King and our board member, Cynthia Taueg.



Christopher Polk, Young Leaders Council Coordinator
John Villa, Leadership Development Committee Chair



Entertainment: "The Recovery Band"

We all left feeling good about the organization with which we are affiliated. Thank you to everyone who supported our event. A special thank you to our Annual Meeting Committee, Nakia, Marilyn and Janice, and all the other staff who helped make the event successful. It was good to see you as always. We appreciate your support and hope you enjoyed yourself. If you missed this year's annual meeting, we certainly hope you will join us next year!

We welcomed six new board members to our organization. We also thanked four retiring board members, LaShanda Evans, Angela Wynn, Scottie Knight and Richard Fuher. We elected members to the Board of Consultants. Our brand new Young Leaders Council was also elected to help AWBS reach out to the future generation of leaders. This will be an important direction for our organization. The slates all represented the excellent work done by the Leadership Development Committee, led by John Villa.



What a beautiful setting!



Guests viewing Silent Auction items

The selection of the Roostertail was perfect because the décor, food, drinks, space and view were all wonderful. We received so many comments from people

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Advocacy needed to preserve funding for mental health and substance abuse services

By Karen Schrock, President & CEO

As the state continues to struggle with a longstanding structural deficit, there are efforts underway to make the Detroit-Wayne County Community Mental Health system shoulder a disproportionate share of the proposed budget reductions. Earlier this fiscal year, the Michigan Department of Community Health applied funding reductions to community mental health agencies; included among those reductions was an extra reduction for Wayne County based on an opinion that Wayne County has more than its fair share of state mental health and substance abuse funding.

Without providing more detail than most of our readers would want, the bottom line is that there is yet another attempt to cut Wayne County more severely than the rest of the state. This is in spite of the fact that the cuts already applied have significantly impacted consumers and the providers who care for them. In addition to the amount of the disproportionately large reduction, the type of funds being cut creates additional concerns. Discussion is underway to reduce “general fund” dollars which can be used to assist people who don’t qualify for Medicaid. These general fund dollars are also available to match Medicaid dollars, so removal of them from the system also removes federal matching dollars. The policy question for the state is do we want to limit mental health and substance abuse funding only to people who qualify for Medicaid?

If this sounds familiar, it is one example of the discussions underway about national health care reform. We could find ourselves in a situation where seriously and persistently mentally ill people, or people with developmental disabilities, who are not on Medicaid would not be able to receive public mental health services. What would happen to them?

Failing to pay for their care through the public mental health system will not cure these neighbors of ours or make them disappear. We may see “cost shifts” rather than “cost reductions” with these state actions. Since the people currently served by general fund dollars don’t have any other insurance, those who seek treatment will add to the uncompensated care portfolio of Wayne County’s hospitals. Some will access the health care system through more expensive access points like hospital crisis centers. Some of our neighbors will become homeless. A few will commit petty crimes, create family problems and experience a range of problems prevented by effective mental health and substance abuse treatment. It is well documented that community based treatment is more humane and less costly than institutional treatment. As the state seeks to close state mental health institutions and prisons, it must invest in community based services. Since many people who leave state correctional and mental health facilities come to Wayne County, Wayne County must be supported in its efforts to serve these vulnerable citizens.

Detroit Area Agency on Aging Eliminates Funding to AWBS

By Larry Edwards, Chief Operating Officer

Budgetary cuts have become a common place occurrence in today’s world. A recent cut from Detroit Area Agency on Aging will result in the closure of 3 successful Adult Well-Being Services programs: Grandparents Raising Grandchildren, Health Promotion and Disease Prevention and Respite Services.

The loss of funding was over \$100,000 in total.

The loss of services is immeasurable. Hundreds of seniors were assisted during this time. Letters were sent to notify those affected. Adult Well-Being Services is pursuing other options for each request on a case by case basis. We anticipate the “opening of new doors” in the future. As always we will maintain the advocacy for the seniors.

If you wish to contact Healthy Aging please call: (313) 925.1135

Expansion at AWBS

By Larry Edwards, Chief Operating Officer



 Plug In To Your **change** Potential

DID YOU KNOW? Adult Well Being Services has expanded into three new service sites in the past few months. The Grosse Pointe site is a well appointed 1100 square foot office suite within the multi-service Park Plaza Building on Jefferson Avenue. The suite contains four individual offices, a kitchen, bathroom, storage room, and a large common area. The building offers parking and is surrounded by a complementary mix of small businesses and residences. This office site provides AWBS increased visibility and expands outreach opportunities to seniors within the area. The site facilitates services to persons living on the far eastside of Detroit, the Grosse Pointes and Harper Woods. The Healthy Aging staff responses to their new location are overwhelmingly positive. AWBS welcomes this new opportunity to collect valuable information about senior needs and to provide expanded outreach and prevention services within this area. AWBS is very appreciative of the Southeast Community Alliance and United Way for Southeastern Michigan for their continued support of our seniors in this area.

The second site, Russell Industrial Center is located just east of the New Center area. at the I-75 Freeway and Clay Street. This site is located within an arts community. There are several offices and open space lofts located within this converted warehouse district. This thriving center for the arts is frequented by many local and national artists. On the weekends you can find an open market selling a wide variety of merchandise. This is a perfect location for our new CHARGE program which stands for the Center of Healing Arts, Recovery, Growth and Empowerment. Gerald Butler, peer supporter specialist and the project coordinator, sees this program as a great opportunity for consumers to find recovery through the arts. He envisions the arts program as a way of displaying the vast talents found in individuals with mental illness, substance use disorders and developmental disabilities. He would like for the program to sustain itself through the sale of products and services produced by consumers. He also believes that an agency such as AWBS is important to the prevention of relapse. He looks forward to a long and continuous partnership with AWBS. CHARGE's new home is a 7,000 square foot space possessing large windows and an elevator with access to a loading dock. The space allows for various types of large equipment used in the various forms of art, such as painting, sculpture, music



The C.H.A.R.G.E. program is located here inside the Russell Street Bazaar Center

etc. to be easily transported to and from the space. The CHARGE program participants will have ample space to practice, produce and sell their art. The AWBS vision is to help develop a self-sustaining club house operated and supported by consumers. We thank the Detroit Wayne County Community Mental Health Agency for this investment in our community!

The third site, Stapleton Center is a safe, secure and nurturing senior living community with single story apartments comprised of studio, one and two bedroom units. Seniors can enjoy the peace of mind of carefree living with three wholesome meals per day and plenty of social activities.



Stapleton Center was donated to AWBS by Trinity Senior Living Communities (a division of Trinity Health)



Mental Health & Substance Abuse Services

By Dr. Sandra Schiff, Director of Mental Health & Substance Abuse Services

The Mental Health and Substance Abuse Program has grown significantly. People with mental health and substance abuse disorders now have more choices in programs for recovery at Adult Well-Being Services. After a market study determined that there was a high need for mental health and developmental disability services in Romulus, AWBS marshaled resources and staff to locate both programs in one building there.

What is exciting about this new site is that it will soon accommodate an evidence-based integrated care model of delivering services. As we strive to meet health care needs of vulnerable populations with diminishing resources, it is important to find ways to collaborate and coordinate care. More importantly, the history of separating physical health from mental health has resulted in a fragmented system and poorer health for people who rely on publicly provided care. People with severe and persistent mental illness and/or developmental disabilities often have co-occurring physical problems such as diabetes, heart disease or substance abuse that go undetected. These co-occurring conditions complicate their health status and increase their utilization of more costly, emergency services. Adult Well-Being Services is determined to provide all the people we serve with more integrated, holistic and economical health care choices. We are now in the process of working to achieve our goal by partnering with a federally qualified health center to locate a primary care clinic in our Romulus facility.

At both the Samaritan and Romulus sites, the Mental Health and Substance Abuse Services Program has launched a policy of “no wrong door” to benefit consumers. This means that people in need will be welcomed wherever they try to gain access to services. Persons with mental illness often have many associated health, social service and support needs. It can be frustrating to try to find different agencies that provide the different types of services that they need. With a “no wrong door” policy, AWBS is committing to responding to the individuals’ stated and assessed needs immediately and thoroughly. Instead of sending a person from one agency to another, he or she will receive the help they need in our “one stop shop”. All staff will be trained in identifying and treating co-occurring disorders to carry out this policy of coordinated care. To ensure that our programs continue to offer high quality care, staff are also being trained to provide this comprehensive approach to services with two evidence-based practices: Integrated Dual Diagnosis Treatment (IDDT) and Motivational Interviewing. Persons with severe mental illness and co-occurring

conditions have more opportunities than ever before at AWBS. We are able to provide transportation for consumers who wish to attend supported education classes at Wayne State University. There have been four graduating classes, with three more consumers recently graduated. Consumers are regularly engaged in advocacy efforts by meeting with elected officials and testifying at public hearings to make their voices heard. If you were to interview any consumer, it is likely that they would say that they enjoy the extra-curricular activities most of all. These recreational and social opportunities are designed to provide consumers with much-needed physical exercise such as swimming and social integration with other people who live in their community.

The Assertive Community Treatment (ACT) program is yet another example of how AWBS is fulfilling its strategic goal to provide evidence-based services. This program is located in Detroit’s Midtown area and is the only local Older Adult ACT program available for people with severe mental illness who require intensive, round-the-clock monitoring and care.

Last, but certainly not least, we now employ three Certified Peer Specialists. The 1999 Surgeon General’s Report on Mental Health recognized the value of peer-to-peer support in achieving recovery from mental illness. Certified Peer Specialists offer the perspective of “having been there.” Through their lived experience with recovery, they lend unique insight into mental illness and what makes recovery possible. They are role models who inspire hope and possibility in every peer with whom they are partnered.



Our site in Romulus (pictured above) houses our Mental Health & Substance Abuse services as well as Developmental Disability & Healthy Aging services

Moving Towards Independence: Victoria's Story



By Irene Andary

Adult Well-Being Services (AWBS) is Guardian for 320 wards that are mentally ill, developmentally disabled or otherwise in need of special supervision. As Guardian, AWBS decides where a ward will live. Most of our wards live in Adult Foster Care (AFC) Homes. Some wards are content with their living arrangement. But for other wards, living in an AFC Home is very difficult.

AWBS evaluates the wards periodically to determine whether their placement arrangements continue to be the "the least restrictive" setting. More often than not, the wards remain in an AFC Home - a "dependent" setting - because they cannot manage the activities of daily living. But sometimes, after a lot of work, a ward makes a move to a semi-independent or independent living setting. Such moves are very rewarding for the ward and the AWBS staff.

Recently, AWBS made a decision to move one of our wards, Victoria, from an AFC Home to an upper flat owned by her cousin – a semi-independent setting. This move follows three (3) years of work and a lot of patience on the part of AWBS and Victoria.

Victoria suffers from Schizophrenia and struggles daily with decisions most of us take for granted. When AWBS was first appointed Guardian for Victoria, she was living in a trailer with her dog. She refused to move, insisting that she could pay her own bills and take her medication without help. It was not long before Victoria was proven wrong. Despite her assurances, Victoria failed to take her medication and became delusional – believing that intruders were inside her trailer. Victoria's condition required hospitalization for several weeks.

After release from the hospital, AWBS searched for an AFC Home where Victoria could live with her dog. The

AFC Home we found provided good care and Victoria took her medication regularly. After several months, Victoria started to feel better and wanted, again, to live independently. She asked if she could "go back to the trailer." We worked closely with Victoria for several months to help her realize she could not live alone – that she had tried that twice before and failed. This was difficult for Victoria to accept. We continued to talk with Victoria and encouraged her to think about an alternative to living alone.

Over the next year we learned that Victoria had a cousin who lived nearby and we arranged for Victoria to spend weekends with her cousin and his family. Although the first few months of weekend visits were difficult, Victoria started to enjoy her time with family. It was not long before Victoria wanted to move out of the AFC Home to live with her cousin.

Just recently, AWBS had Victoria evaluated by a psychologist and occupational therapist to see how well she would do living in a semi-independent setting. The reports were positive and AWBS is arranging for Victoria to move out of the AFC Home and into a flat above her cousin by the end of this month.

Victoria feels better about herself and her life and is looking forward to living with family. She no longer talks about her trailer or living alone. Victoria is grateful and feels "blessed to have family."

There is still a lot of work to do but the Guardianship Department at Adult Well-Being Services is continuing its work to promote Victoria's well-being and independence as she begins her new life with her family.

Guardianship Demographics

- * AWBS currently has 326 wards of which 77% are mentally ill and 23% are developmentally disabled
- * 23% of our wards are age 18 to 44
- * 47% are age 45 to 65
- * 30% are over the age of 66



Seniors Count Launched!

By Sara Gleicher , Director of Advocacy, Communication & Public Relations

In early May, Adult Well-Being Services and Wayne State University/Institute of Gerontology hosted our first stakeholder advisory committee for the *Seniors Count!* project. This committee has begun to determine what information on older adults in Southeast Michigan should be collected, analyzed and disseminated. Our first task has been to develop “indicators”, specific issues of adult well-being that we want to measure and understand. Examples of indicators include income, housing, and health. In the meantime, Wayne State Institute of Gerontology researchers have already been hard at work, identifying existing sources of data on older adults. They will be able to let the members of the stakeholder committee know where there are data gaps.

We know that our population is aging quickly. According to estimates by the Southeast Michigan Council on Governments, Michigan is expected to have a larger percent of its population – 19.7% - over 65 years of age than Florida in 2030. Even more dramatically, by 2030, in Southeast Michigan, there will be a 30% increase in households without children. Nearly forty percent of all households in SE Michigan will have at least one person over the age of 65!

We know these facts, but, there is more that we do *not* know about this older population. We believe **that accurate information about persons age 50 and up is critical for the health of seniors and their communities. We must plan services and fund programs to best serve older residents, including seniors with developmental disabilities, who risk being overlooked.**

Some of the questions we hope to answer include:

- What age will we use to define being an older adult – 50? 55? 65? Existing census data and State of Michigan data, among other sources, use different ages to classify “seniors”, making it difficult to reliably compare data about older adults.
- What are the real differences in health status among the different age groupings among those over the age of 50? What are the actual physical and cognitive capacities of seniors in Southeast Michigan and how do we accommodate what are sure to be increasing special needs for appropriate housing, social services and transportation?

- The expanding senior population is made up of aging baby boomers who want to remain active and involved in their communities. In which communities will there be the largest numbers of older adults who want to be civically engaged? How should cities and counties best prepare for the impact of significantly more retired elders on the economic and cultural development of those communities?
- Seniors are not a homogeneous population. The numbers of aging citizens from minority ethnic groups is rising at unprecedented rates. What are the significant patterns and relationships we need to look for relative to income, lifestyle and health status of older adults? Which set of attributes are most important to monitor?

What is also exciting is that the project is garnering interest from other “experts” in the aging field. We were recently contacted by the Grand Traverse County Commission on Aging who heard about our project. We hope to work with them to explore ways to expand this new data base on older adults statewide.



CARF: We Did It!

By Joan Cliff, Director of Human Resources & Quality



Congratulations are so much in order! AWBS just received notice from Commission on Accreditation of Rehabilitation Facilities (CARF) that we have received a 3-year certification. We have received continuous CARF certification since 1991.

We received an “exemplary” accreditation for three years for our comprehensive prevention and treatment programs! (The Mental Health Mobile Crisis Team, Guardianship Priority Patient collaborative with Detroit Receiving Hospital, and the Developmental Disability Services Micro-Enterprise program)

What is especially rewarding about the renewed

certification is that we are now accredited in the area of Governance. This is a new area for accreditation and it is completely voluntary. Our Board of Directors are a unique and dedicated group of volunteers and many of them met with CARF reviewers.

This CARF achievement happened because of the hard-working, committed team here at AWBS. Thank you to each and everyone.



What a terrific record of holding ourselves accountable and meeting high quality standards.

Audits, Audits, Audits.....

Along with the CARF audit that AWBS prepares for, there are approximately 25 other site visits and audits. AWBS is currently funded by 27 major funders who all have different criteria that we must meet at least annually to qualify for funding. Our Quality department along with program staff work diligently to ensure that we meet all standards “excellently”.

As a part of our strategic plan, our goal is to exceed external quality expectations of accreditation, funding and regulatory entities. Our efforts have not gone unnoticed. We were recently named runner-up in *Crain's Detroit Business* search for **2009 Best Managed Non-Profit**.

Services to Seniors Depends on an Accurate Census!



The U.S. Census Bureau is issuing a call to action for every resident of our nation: “BE COUNTED IN 2010” The Census is important because it determines the distribution of more than \$300 billion annually of government funding for community services. It is also the basis for determining the Congressional representation for our state. Those two reasons affect the quality of life in Southeastern Michigan.

As a community based organization, Adult Well-Being Services relies on Census data to determine where there is a need for additional services and resources. Our recently launched Seniors Count! Initiative will use census data, along with other data, to produce a profile of seniors in the seven county region in Southeastern Michigan. An accurate census data will assist communities throughout our country serve today's seniors The 2010

Census will have only 10 questions, one of the shortest in history. It is estimated to take only 10 minutes to complete. Information provided to the Census Bureau cannot be shared with anyone, including other federal agencies and law enforcement agencies.

Adult Well-Being Services has enrolled as a 2010 Census Partner. We hope to maximize participation in the census and reassure our community that it is safe to answer the census. We also want to spread the word about temporary jobs working for the Census Bureau.

The official Census Day is April 1, 2010. The forms will be mailed or delivered during February and March of 2010. Please join in encouraging everyone to participate in the Census. Please go to 2010census.gov for more information about the census.

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