

EATON COUNTY BOARD OF COMMISSIONERS

MEMBERS

Tim Barnes
Blake Mulder - Vice
Terrance Augustine
Brandon Haskell
Jeanne Pearl-Wright
Trevor TJ Youngquist
Mark Mudry
Joseph Brehler



MEMBERS

Brian Droscha
Jacob Toomey
Scott Hansen
Brian Lautzenheiser - Chair
Jim Mott
Frank Holmes
Barbara Rogers

1045 Independence Blvd, Charlotte, MI 48813

EATON COUNTY BOARD OF COMMISSIONERS/HEALTH AND HUMAN SERVICES COMMITTEE

MONDAY, JUNE 5, 2023, 9:00 A.M.

BOARD OF COMMISSIONERS' ROOM, COUNTY COURTHOUSE, CHARLOTTE

AGENDA

1. Call to Order.
2. Pledge of Allegiance.
3. Agenda Additions and Changes.
4. Approval of May 1, 2023 Minutes.
5. Limited Public Comment.
6. Tri-County Office on Aging Semi-Annual Report – Kate Long.
7. Community Mental Health Semi-Annual Report – Sara Lurie.
8. Juvenile Justice Millage Program Proposal Presentations:
 - Truancy Intervention Mental Health – CMHA-CEI
 - Integrated Community Youth Outreach – CMHA-CEI
 - Truancy Intervention – Eaton RESA
 - College Access – CapCAN
 - Shared Housing Intervention – Housing Services Mid-Michigan
9. Miscellaneous.
10. Limited Public Comment.

A quorum of the Board of Commissioners may be present at this meeting.

HEALTH AND HUMAN SERVICES COMMITTEE MEETING

MONDAY, MAY 1, 2023

9:00 A.M.

MINUTES

MEMBERS PRESENT: Commissioners Tim Barnes, Mark Mudry, Joseph Brehler, Brian Lautzenheiser, Barbara Rogers, and Jeanne Pearl-Wright

MEMBERS ABSENT: Commissioner Blake Mulder

ALSO PRESENT: Commissioners Jim Mott, Brian Droscha and Scott Hansen; and Controller/Administrator Connie Sobie.

The May 1, 2023 regular meeting of the Health and Human Services Committee was called to order at 9:00 a.m. by Chairperson Lautzenheiser.

The Pledge of Allegiance was given by all.

It was reported that Tri-County Office on Aging was unable to present. Commissioner Barnes moved to approve the agenda, as amended. Commissioner Rogers seconded. Motion carried unanimously.

Commissioner Brehler to approve the March 6, 2023 minutes, as presented. Commissioner Mudry seconded. Motion carried unanimously.

Tri-County Office on Aging was included in the meeting materials. The report will be presented at the next meeting.

Controller/Administrator Connie Sobie noted the Juvenile Millage Requests for Proposal have been sent to agencies and proposals from agencies will be presented at the next meeting. Discussion was held related to the youth facility expansion and use of millage funding.

Limited Public Comment

Chairperson Lautzenheiser adjourned the meeting at 9:12 a.m.

The next regularly scheduled meeting of the Health and Human Services Committee will be held on Monday, June 5, 2023 at 9:00 a.m., in the Board of Commissioners Room of the Courthouse located at 1045 Independence Blvd, Charlotte MI 48813.

Brian Lautzenheiser, Chairperson



Tri-County Office on Aging Semi-Annual Report May 2023

General TCOA update: We thank the County for your ongoing support over the years.

In November 2022, Andrea Radel, former TCOA Human Resources Director, assumed the role of Executive Director upon Marion Owen's retirement.

TCOA continues to coordinate the Friendly Reassurance Program, with volunteers providing once weekly "check in and chat" phone calls to TCOA clients to help reduce social isolation.

TCOA continues to monitor the need for access to the Covid-19 vaccine and KN-95 facemasks while continuing to address needs such as housing instability and assistance in identifying available public benefits. Staff also provided scheduling support to older adults seeking tax preparation assistance through the AARP Tax Aide Foundation, and served as a Host Site for appointments as was done prior to the pandemic.

Three leadership staff from TCOA attended the USAging Conference policy brief in April 2023 in Washington DC to prepare for the discontinuation of COVID-19 relief funding and gain the tools to advocate for appropriate funding levels for older adult services.

In April 2023, TCOA was a recipient of 2,000 medication disposal bags from Eaton RESA in partnership with the Substance Awareness and Prevention Coalition in Ingham county. These will be made available to participants across the Agency to assist with safe disposal, which is a benefit in particular for those unable to leave the home as the bags are able to be discarded directly at home.

As one of 16 Area Agencies on Aging (AAA) who are in part funded by the Bureau of Aging, Community Living, and Supports (ACLS Bureau), TCOA must operate under an annual plan approved by the State Commission on Services to the Aging (CSA) to ensure compliance with the Older Americans Act and the Older Michiganians Act. There have been no major changes or additions for the 2024 planning cycle and existing efforts continue through the approved 2023-2025 Multi-Year Plan with the 2024 Summary available online at www.tcoa.org/documents. Two Public Hearings have been scheduled on May 2 via Microsoft Teams and May 3 at TCOA to gather input and comments on the proposed plan before it is submitted to the TCOA Advisory Council, Administrative Board, and the local units of government for approval. The Commission on Aging will review the submitted plan for final approval in August or September.

The three counties that make up TCOA's service area have seen an estimated 12% increase in the 60 and older population (2016-2020 American Community Surveys). As of 2020, older adults represented 22% of the total tri-county population, and older adults represent 25% of Eaton County's population. In light of the continued growth of the older adult population across our service area, TCOA's Consortium Dues proposals to all members reflected a request for a 3% increase for the 2024 fiscal year. We appreciate the County's ongoing support and consideration.

Advisory Council Vacancies: TCOA's Advisory Council has 1 vacancy for a senior who resides in Eaton County. Terms are three years long with a maximum of two consecutive terms.

The TCOA Advisory Council acts in an advisory capacity to the Consortium Board. At least one-half of the

council consists of senior citizens, appointed by their respective units of government. The remaining members represent community agencies appointed by the Consortium Board. This composition offers the perspectives of both seniors and service providers on aging issues. Meetings are held at 1:00 PM on the second Thursday of each month at TCOA and include an online option for joining. Thank you to Sue Hoffman, current President, and Barbara Smith who represent Eaton County.

Aging and Disability Resource Center (ADRC) and Long-Term Care Collaborative (LTCC): TCOA is a partner with the ADRC-Capital Area Partnership offering both Information & Assistance/ Referral (I&A/R) and Options Counseling to the community. The LTCC was established in 1999 as a work group within the ADRC focused on improving the long-term care network through sharing of information, education presentations and supporting new initiatives effecting long term care. The LTCC met in November, January, and March. Each meeting invited a speaker from a different organization to share their work, experiences and barriers faced related to long term care planning and the current housing crisis. Guest speakers include representatives from a local shelter, hospital discharge planners and Nursing Facility Transitions workers. The LTCC continues to gather information to better understand how homelessness and other housing issues are experienced in our communities in order to identify future projects for the group. Meetings will continue to be held virtually every other month on the third Thursday at 1:30 PM.

TCOA served 300 individuals from Eaton County through I & A/R calls between October 2022 and March 2023, 15% of the total 2,000+ individuals served. TCOA also contracts with Capital Area Community Services for additional I & A/R support in the tri-county area. In the six months of TCOA's fiscal year, CACS assisted over 1,993 tri-county residents with 789 from Eaton County, representing 40% of callers.

TCOA's two Community Resource Navigators (CRNs) connect underserved communities with existing resources and assist clients in overcoming barriers to health and social services while addressing social determinants of health. The CRNs served over 40 people from October to March, with 7 from Eaton County.

Nutrition:

TCOA served 42,215 meals to 313 Eaton County participants through the Home Delivered Meals program between October 2022 and March 2023. The return to daily hot meal delivery as well as the interaction with the volunteers, has been well received by participants. Some participants continue to receive weekly deliveries to accommodate their schedules. Social interaction is supplemented with friendly reassurance calls to participants who want them.

Collaboration continues with Eaton RESA as the volunteer continues to work in the office once a week for two hours. The Eaton County Meals on Wheels gift giving program in collaboration with the Charlotte Baptist Church was a great success. Gifts and holiday cards delivered by MOW volunteers were appreciated by program participants. Emergency shelf stable meal boxes distributed were utilized by participants during the inclement weather experienced during the winter season.

The TCOA Senior Dining Site at the Delta Township Enrichment Center (Delta 39ers) continues to offer dine in service as well as carry out meals, three days per week. Effective April 10, 2023, individually wrapped meals will change to cafeteria-style dining. Beginning May 1, 2023, carry-out meals will only be available through the Eaton County Meals on Wheels office in Charlotte. TCOA has served more than 1,240 meals to 33 Eaton County residents through the Congregate Senior Dining program.

Health Promotion/Disease Prevention: TCOA has partnered with several Area Agencies on Aging to provide online workshops to help participants self-manage their health condition(s). TCOA has also started to offer in person workshops throughout the service area again. From October 2022 to March 2023, TCOA completed the following online workshops: 3 Diabetes PATH, 2 Powerful Tools for Caregivers, and 1 Matter of Balance. In addition to the online workshops, TCOA completed one in person Matter of Balance in Eaton County. A total of 23 Eaton County residents enrolled in an evidence-based health and wellness workshop listed above.

Medicare & Medicaid Assistance Program (MMAP): The MMAP program assisted 912 beneficiaries from October 2022 to March 2023 with 160 of them from Eaton County. That is an increase of 68% from last year during the same time period for Eaton County residents served. The program focuses on Medicare, Medicaid, Supplemental Insurance, Long Term Care Insurance, waste, fraud and abuse prevention, and Medicare Prescription Drug Coverage.

Project Choices: TCOA served over 300 people from Eaton County between October and March through MI Choice Medicaid Waiver, Care Management and Case Coordination (over 1,300 PSA wide) with an additional 86 residents waiting for these in-home services and support. Region wide, the Medicaid Waiver and Case Coordination wait lists persist with a total of 374 people waiting as of March 28, 2023 (400 last year, 6.5% percent decrease). Case Coordination is offered, when possible, to individuals on the Waiver wait list. Case Coordination may offer homemaker services, personal care, and respite to enable older adults to remain in their homes. TCOA continues to advocate for sufficient and balanced funding to address these unmet needs.

Volunteer Opportunities: The need for volunteers agency-wide, particularly Meals on Wheels delivery drivers, is ongoing. The needs vary by area and may change over time, with opportunities for both regular volunteers (i.e., delivery every Tuesday) and for flexible “on call” volunteers to fill in as substitutes. TCOA continues to offer a remote volunteer experience with the Friendly Reassurance Program as noted above. Anyone interested in volunteering to deliver meals may call the Eaton County Meals on Wheels office at 517-541-2330. Information on additional volunteer opportunities at TCOA are available by contacting volunteer@tcoa.org, at 517-887-1487, or visiting www.tcoa.org/volunteer.

Events for 2023

Statewide Senior Action Week: May 15-19

Older Michiganians Day Hybrid/Livestream Advocacy event, Wednesday May 17, 11:00 am-12:30 pm

35th Annual Meals on Wheels Golf Outing – Tuesday, June 13, 2023 at Forest Akers West, Lansing.

38th Annual Dinner and Auction- Thursday, November 16, 2023 at the Kellogg Center, East Lansing.

HOPE & HEALING

2022

REPORT
TO THE
COMMUNITY



Community

MENTAL HEALTH

CLINTON • EATON • INGHAM

Together we can.





Letter to the Community

Sara Lurie, CEO

.....

Supporting hope and healing, innovations in access and treatment capacity, obtaining Certified Community Behavioral Health Clinic (CCBHC) certification, and the power of community partnerships, characterize the work of the agency this past year.

In 2022, we celebrated **Hope and Healing** by resuming a long-standing community event that had been interrupted by the pandemic. On a beautiful day in September, over a thousand individuals, including families and children, arrived at the Potter Park Zoo to participate in the CMHA-CEI Potter Park Event, and enjoyed a day dedicated to giving back to CMHA-CEI staff, those we serve, and to the community.

The 2022 CMHA-CEI Annual Report underscores our commitment to workforce development, community outreach, and to providing whole person care. You will find feature stories about Wellness Coaching, NAVIGATE, and CCBHC that reflect our continued innovation in adopting best practices to meet existing and emerging needs.

Through the vital efforts of dedicated board and staff leadership, committed community partners, local champions, innovative

staff, and passionate mental health advocates, we served nearly 13,000 individuals in 2022. We are hopeful as we look towards the future and together, we will continue to step up to new opportunities to improve and further expand service delivery to the community.

CMHA-CEI is proud to be one of 13 demonstration sites as Michigan begins to utilize the highly successful federal CCBHC model of care to transform the delivery of behavioral health services. 2022 was the first year of this state project and we look forward to continued improvements in access to care over the course of the multi-year state demonstration project.

In 2023, we will also become a state pilot site for the development of a Crisis Stabilization Unit to serve the Capital Area. This exciting project will meet long standing community need for a one-stop crisis center that can provide secured treatment for up to 72 hours.

Together we can!

Sara Lurie

Chief Executive Officer

2022 Board of Directors

.....



**Al
Platt**



**Commissioner,
Ken Mitchell**



**Commissioner,
Emily Stivers**



**Commissioner,
Joe Brehler**



**Timothy
Hanna**



**Dianne
Holman**



**Adam
Matson**



**Dale
Copedge**



**Kay
Randolph-Back**



**Raul
Gonzales**



**Maxine
Thome**



**Paul
Palmer**



OUR MISSION

CMHA-CEI's mission is to fulfill two complementary but distinct roles:

Behavioral healthcare

provider: Providing, directly and through partnerships, a comprehensive set of person-centered, high quality, and effective behavioral health and developmental disability services to the residents of this community.

Advocate, catalyst, thought

leader, convener: Fostering the transformation of all aspects of community life, eliminating inequities, and promoting the common good for all, especially for persons with mental health needs.



Community

MENTAL HEALTH
CLINTON • EATON • INGHAM

Together we can.



Adult Mental Health Services (AMHS): adults with mental illness and co-occurring disorders

Community Services for the Developmentally Disabled (CSDD): individuals diagnosed with a disability before the age of 22 and who have substantial limitations including autism

Families Forward (FF): children who struggle with emotional disturbance and behavioral concerns and their families

Integrated Treatment and Recovery Services (ITRS): adults and adolescents with substance use, co-occurring disorders and recovery interfering behaviors

AGENCY UPDATES

Supporting Hope and Healing



ACCESS TO SERVICES

Access to services has been a national focus, and CMHA-CEI has stepped forward to fill the need. Families Forward (FF) has joined Adult Mental Health Services (AMHS) in providing same-day walk-in access. Integrated Treatment and Recovery Services (ITRS) and Community Services for the Developmentally Disabled (CSDD) are also refining their intake processes to improve timely access and improve outcomes. Additionally, the Access Center has developed community partnerships to streamline the referral process and ensure that all seeking support get connected at CMHA-CEI or to an appropriate community resource.

STABLE HOUSING

Recognizing that stable housing contributes to hope and healing, AMHS has increased supportive housing partnerships through the addition of 48 affordable housing units and 12 supportive units and has finalized partnerships for two additional supportive housing projects.

TRANSITIONING YOUTH

CSDD has increased partnerships with area schools to address the needs of young people with developmental disabilities and/or autism who are transitioning out of school and may benefit from connection to services. CSDD staff attend the Individual Education Plan (IEP) meetings to assist the individual and their family to connect to support as needed. The treatment philosophy of helping individuals with meaningful connections and supporting full and equal participation in the community has led to an increase in the number of people supported by CMHA-CEI in finding success in employment.

PREVENT PRESCHOOL EXPULSION

Helping to prevent preschool expulsion, FF has implemented the Advancing Resilience in Children (ARC) program. By employing the evidence based model Infant and Early Childhood Mental Health Consultation (IECMHC), and in partnership with early childhood care providers such as Early On and the Central Resource Center, daycare and preschool providers are supported in meeting the social-emotional needs of children.



CONSUMER VOICES

The members of the Consumer Advisory Council (CAC) have partnered with the agency by sharing their voice and lived experience to inform policy and practice decisions throughout CMHA-CEI. Notably, CAC members participated in focus groups designed to help guide decisions impacting consumers as the Crisis Stabilization Center is designed. The CAC is always recruiting new members to diversify their mighty voice!

STAFF RECRUITMENT AND RETENTION

Ensuring staffing for the innovative services provided, Human Resources has launched many initiatives, expanding our presence throughout the state of Michigan and beyond, building avenues and ideas from nationwide recruiters. Retention initiatives abound, including a partnership with Michigan State University (MSU) School of Social Work, launching the first cohort of current staff to have CMHA-CEI financially support their Masters education.

DIVERSITY, EQUITY AND INCLUSION

To acknowledge and address the needs of an increasingly diverse community, the Diversity Advisory Council (DAC) facilitates mentorship, training, and education in the areas of diversity, equity, and inclusion (DEI). The Council is composed of representative staff from across the agency who strive to ensure that DEI is considered in all aspects of the agency's operations and in the treatment of all people, staff, community members, and those we serve.

BEHAVIORAL HEALTH SCREENING

In the CMHA-CEI spirit of "Together We Can," community partnerships have increased access to prevention and outreach opportunities. The online Behavioral Health Screening platform for example, has been visited by 1,031 individuals over the past year with 660 completed screenings on behavioral health issues. That is an average of 85 individuals per month accessing the agency supported free and anonymous online Behavioral Health Screening platform, helping them to identify mental health and substance use issues and connecting them with resources and services. Multiple area agencies and partnerships exist to share and promote the screening platform and those partnerships continue to grow.

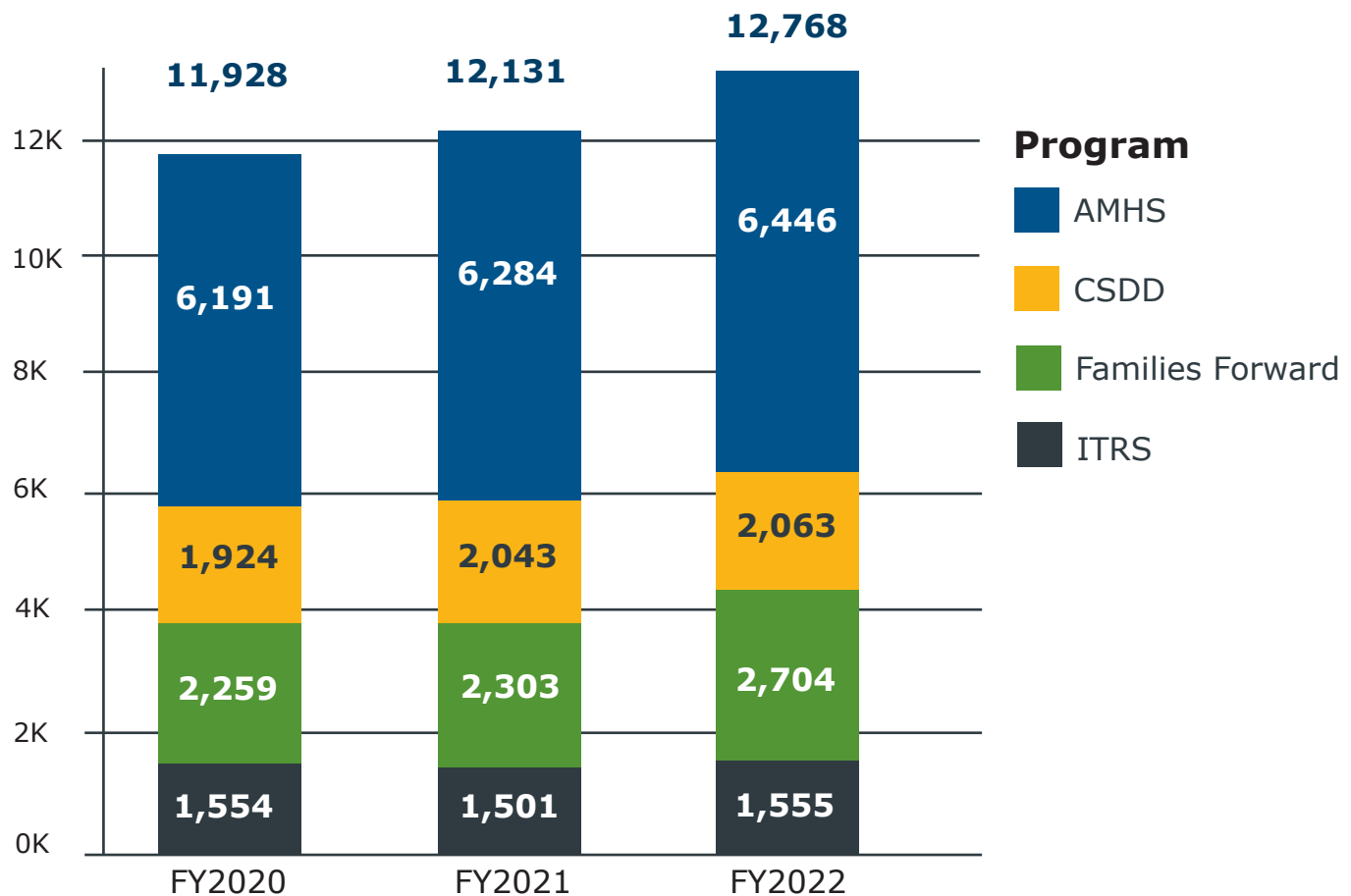
COMMUNITY GROUPS FOR YOUTH

The Integrative Community Youth Outreach Unit (ICYOU) supports community-based education, training, and early identification of youth mental health related issues. This year, through up to 18 weekly groups, the program has provided over 3000 youth with services that help develop social, coping and anger management skills, and has provided navigation to a full array of resources.

This represents just a small sample of the services, initiatives and partnerships which support hope and healing!

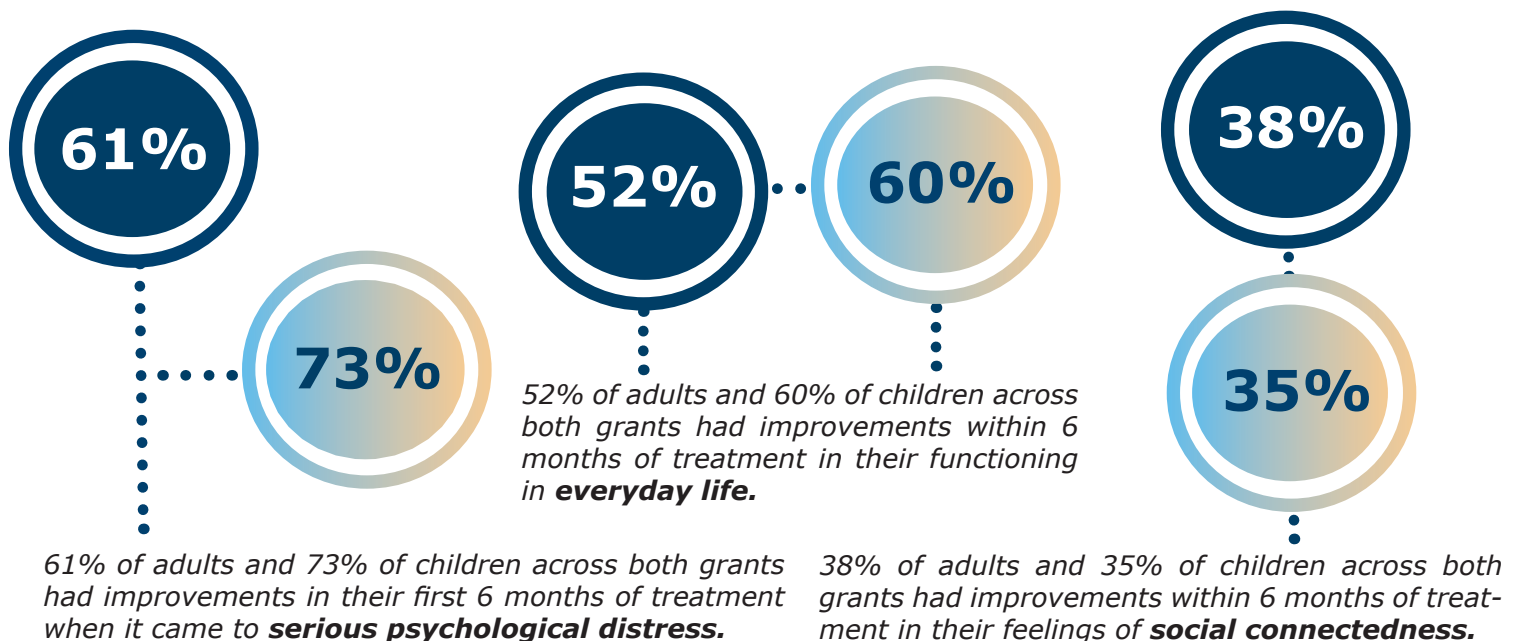
MEASURING Impact

2022 NUMBERS SERVED By Program



Making an **IMPACT!**

CCBHC Expansion Grant Consumers (Adults and Children) Outcomes
April 2019 to July 2022





Certified Behavioral Health Clinic (CCBHC)

CCBHC stands for Certified Community Behavioral Health Clinic, and it emerged primarily in response to the Opioid Epidemic and rising rates of suicide across the nation. Data showed there was a lack of access to quality behavioral healthcare that was coordinated across many systems of care. This model of care aligned with the vision, mission, and strategic plan of CMHA-CEI. Therefore, since 2016, we have been building the infrastructure and processes to align with this model of care – some of this work being supported by grant funds. In 2022, CMHA-CEI obtained certification as a CCBHC! Check out what CMHA-CEI has developed and continues to establish as part of the model below.



A model of care

CCBHC Goals:



Access to Care

*Same Day Access;
Mobile Crisis Services;
Crisis Stabilization Unit*



Care Coordination

*Continuity of Care Document;
Care Pathways; Wellness
Coaching; Connecting individuals
/families to Primary Care*



Quality Care

*Evidence-Based Practices
such as Medication Assisted
Treatment and Zero Suicide;
Consumer Advisory Council;
Outcome data*



Sustainable Funding

*Improvement of Insurance
Verification processes; Process
Mapping; Valued Based Payments*

We applaud Michigan Senator Debbie Stabenow for authoring and championing, with Senator Roy Blunt of Missouri, the passage of the historic 2014 Excellence in Mental Health and Addiction Treatment Act and the expansion of this act in 2021. This work paved the way for the bipartisan Safer Communities Act in September 2022, which will allow every state to join the CCBHC program. A report authored by the National Council for Mental Wellbeing shows that these community clinics are increasing access to high-quality mental health and addiction treatment that is making a difference in the lives of thousands of people in communities across the country. We appreciate Senator Debbie Stabenow's vision!

Wellness Coaching Supports Health Goals



CMHA-CEI offers Wellness Coaching, working with individual CMHA-CEI consumers to create healthy habits to achieve their wellness goals. "With over 16 Wellness Coaches, our agency vision for Healthcare Integration is to achieve health and wellbeing across the lifespan with a commitment to whole person care. Wellness Coaching is one way to make that vision a reality," states Stacy Fox-Elster, Healthcare Integration Supervisor at CMHA-CEI.

By building on strengths and/or skill sets they already possess, the Wellness Coach helps the individual create healthy habits to achieve their wellness goals. "If a client has the goal of drinking 16 ounces of water a day, we might look at their current routines and help weave in where and how they can gradually add in drinking more water," ex-

plained Stacy. "It takes time to create a habit, so by the end of the first month, the client should be close to or have achieved their goal. Wellness Coaches are here to provide support and resources to help the client along the way."

Wellness Coaching focuses on eight dimensions of wellness: physical, environmental, financial, intellectual, social, spiritual, occupational, and emotional. Each dimension of wellness can affect our overall quality of life, because wellness directly relates to how long and how well we live. The physical dimension includes six physical wellness domains that can be important for overall balance: physical activity, sleep and rest, relaxation and stress management, eating well, habits and routines, and access to health screenings. "Because the eight dimensions and six domains are interrelated, working on one area sends positive ripple effects on other areas as well. Helping people understand that brings a sense of accomplishment and determination to make a change," explained Preet Grewal, Nurse Care Manager at CMHA-CEI. "After a strength based assessment, we focus on a priority area and develop measurable goals. Then we spend time planning to accomplish that goal; discussing challenges and resources that may be needed."

Wellness Coaching Success Story



Phoebe (name changed) explained to her therapist that she wanted to be healthier and to lose weight. The case manager had suggested Wellness Coaching. Phoebe was connected with a Wellness Coach who explained the process, helped her set a goal, and provided ongoing support. Phoebe reached her goal to get down to 150 pounds through healthy habits. While she didn't achieve the goal in her desired timeframe, Phoebe has continued with the changes she made to her diet and exercise. Phoebe really connected with her Wellness Coach; "she's so positive and optimistic all of the time! I highly recommend Wellness Coaching. It's great for general positivity. It's an important part of self-care to have someone who supports, encourages, and guides you!"



NAVIGATE Program Returns

Youth and young adults who are experiencing early symptoms of psychosis can now join a supportive team of specialists who provide a Coordinated Specialty Care model of care called the NAVIGATE Program at CMHA-CEI.

In 2009, the evidence-based model for NAVIGATE Program, first originated within the Recovery After Initial Schizophrenia Episode (RAISE) project, which is a SAMHSA funded research endeavor. CMHA-CEI was one of the original research sites implementing the model. Between 2014 and 2022, the early intervention site was moved to an offsite agency called ETCH (Early Treatment and Cognitive Health). In October 2022, the NAVIGATE program returned to CMHA-CEI.

Approximately 3 out of 100 young people may experience psychosis, which rarely occurs suddenly but may occur gradually with changes overtime. These changes may include a change in perception, including hearing voices, demonstrating strong beliefs, shifts in focus, concentration, and organization of thoughts. Research shows strong outcomes for individuals who have early access to supports when experiencing psychosis, including improved quality of life, reduction in symptom distress, more days in work/school and reduction in mood symptoms, such as depression.

The NAVIGATE model provides youth and young adults ranging from 15 to 30 years

of age with a broad range of supports. The program promotes an emphasis on a collaborative approach that provides early access to care for an individual experiencing psychosis, their family members, and their loved ones. The NAVIGATE Program offers multiple supports including Individual Resiliency Training (IRT), Supported Employment and Education (SEE), Family Education (FE), psychiatry support, a Peer Support Specialist who has lived experience with psychosis, and a Family Peer Partner, who has cared for a loved one with psychosis. "The knowledge that the NAVIGATE staff have regarding early intervention and working with individuals with psychosis is so inspiring," states AMHS Supervisor Liz Parker.

A primary goal of the NAVIGATE Program is early identification of individuals experiencing psychosis to provide a collaborative approach to support, including shared decision making, recognizing the expertise individuals and families have regarding their own experience. Early identification is supported through outreach and education with our community partners. Supporting young people in chasing their hopes and dreams is the end goal.

*"Hope" is the thing with feathers -
That perches in the soul -
And sings the tune without the words -
And never stops - at all - Emily Dickinson*



Outreach Activities

150 people trained in
Mental Health First Aid Training
 (Youth & Adult)
8 Hour Behavioral Health Crisis Training

176 people trained in
Question, Persuade, Refer Training
1 Hour Suicide Prevention Training

537 total encounters
 (including screening, transportation, etc.)
Substance Use Disorder Recovery Coaches

1,320 people engaged within
Local & Statewide community education presentations
Topics include CMHA-CEI services, access, eligibility, prevention & wellness, Stand Against Stigma, and the behavioral health screening platform

16,629 people engaged within
Community Events
Including health fairs, festivals, statewide rallies, Vendor/Exhibitor presence, CMHA-CEI organized community events

660 people completed an
Online Behavioral Health Screening
1,031 people visited the screening platform. 64% of people who visit the site completed a screening.

Prevention Partners



American Foundation for Suicide Prevention



ECSAAG
 Eaton County Substance Awareness Advisory Group



Ingham County Health Department



Eaton Rapids Health Alliance



Capital Area District Libraries

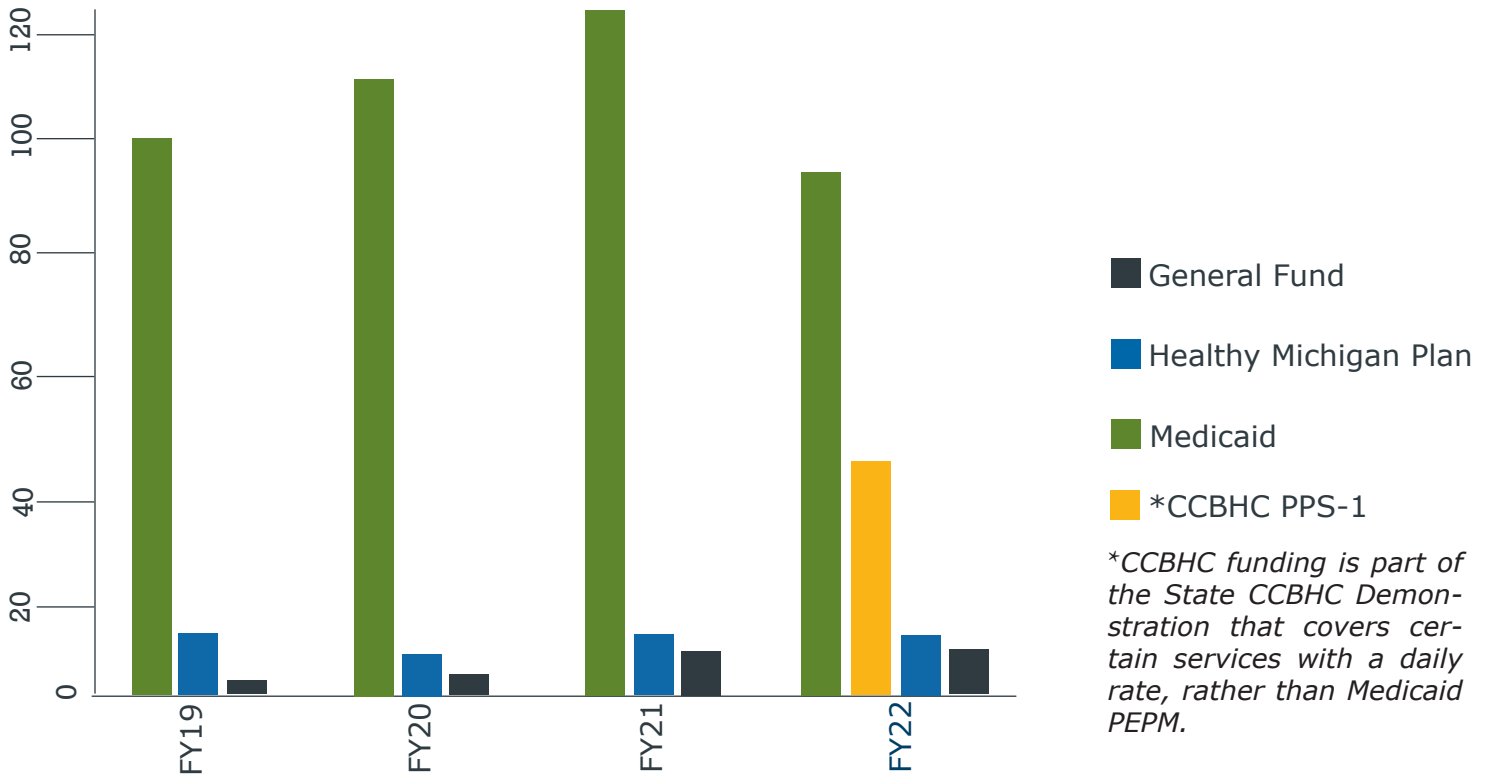


Healthy!CapitalCounties
 a community approach to better health

CMHA-CEI FUNDING SOURCE TRENDS

2019-2022

(In Millions of Dollars)



GENERAL FUND EXPENSES

	DOLLARS	PERCENT
Adults w/ Mental Illness	\$52,423,932	30.50%
Children w/ Emotional Disturbance.....	\$20,338,591	11.83%
Adults w/ Developmental Disabilities	\$53,009,069	30.85%
Children w/ Developmental Disabilities	\$15,226,408	8.86%
Substance Abuse	\$5,720,050	3.33%
Board Administration	\$21,752,461	12.66%
Community Benefit	\$2,615,302	1.52%
Supportive Housing.....	\$215,545	0.13%
Local Match	\$554,260	0.32%

TOTAL EXPENSE **\$171,855,618**

GENERAL FUND REVENUES

	DOLLARS	PERCENT
Federal Funds	\$4,399,798	2.57%
State of Michigan	\$6,554,616	3.83%
Local	\$3,938,257	2.30%
Earned Contracts	\$6,439,771	3.77%
Medicaid PEPM	\$103,503,564	60.55%
Medicaid - Fee for Service	\$1,795,976	1.05%
*CCBHC PPS-1	\$42,544,179	24.89%
SSI/SSA	\$1,090,900	0.64%
Fees	\$622,723	0.36%
Food Stamps	\$31,791	0.02%
Interest Income	\$12,007	0.01%

TOTAL REVENUE **\$170,933,582**



Community

MENTAL HEALTH

CLINTON • EATON • INGHAM

Together we can.



www.ceicmh.org



careers.ceicmh.org



facebook.com/ceicmh



812 E Jolly Road, Lansing, MI 48910



Customer Service 517-346-8244

2023/2024 Juvenile Millage Proposals

Agency	Program	Requested	CCF% Eligible	Net Millage Cost	Continuation	2022/2023 Grant Amount (net JJM)	Requested Inc. (Dec.) from Prior Year	Requested % Inc./ (Dec.) from Prior Year
Community Mental Health	Truancy Intervention Program Mental Health (TIP)	66,171 *	100%	33,086	Yes	103,808	(70,722)	-68.13%
Eaton RESA	Truancy Intervention Program (TIP)	131,500 *	100%	65,750	Yes	65,750	-	0.00%
Community Mental Health	Parent-Young Child Program (PYC)	- *	0%	-	Yes	149,942	(149,942)	-100.00%
Community Mental Health	Integrative Community Youth Outreach Unit (ICYOU)	145,258 *	0%	145,258	Yes	91,968	53,290	57.94%
Capital Area College Access Network	College Access Program	10,000	0%	10,000	Yes	10,000	-	0.00%
Housing Services Mid-Michigan	Shared Housing Intervention Program	30,000 *	0%	30,000	Yes	30,000	-	0.00%
Total Requests Received				\$ 284,094		\$ 451,468	\$ (167,374)	

* Includes Indirect Cost

2022 Actual Fund Balance	\$ 793,474.64
2023 Estimated Revenues	\$ 1,451,019.00
2023 Budgeted Expenditures	\$ (1,576,624.00)
2023 Estimated Fund Balance	\$ 667,869.64
2024 Estimated Revenues	\$ 1,543,953.00
2024 Requested Expenditures	\$ (1,450,899.00)
2024 Estimated Fund Balance	\$ 760,923.64

**COMMUNITY MENTAL HEALTH AUTHORITY of CLINTON, EATON and
INGHAM COUNTIES (CMHA-CEI)**

**Request for Continued Funding of the
Truancy Intervention Program (TIP) MAYSI Screening
and Mental Health Treatment Project for FY 2023/2024**

BACKGROUND AND OVERVIEW

The most current Michigan Profile for Healthy Youth survey (MIPHY 2021-2022) has found that the percentages of 7th and 11th graders in Eaton County reporting symptoms of depression (34.3% and 42.7% respectively) is far higher in Eaton County than the overall average across the State of Michigan. The MIPHY survey has also discovered the alarming finding that 26.4% of Eaton County 7th graders have seriously considered attempting suicide, with 16.6% of these students having made a plan about how they would attempt suicide. Sadly, 10.3% of these 7th graders have reported actually attempting suicide within the prior 12 months. It is alarming that these percentages have been holding relatively steady over the past several yearly cycles of MIPHY survey data collection.

Bullying at school appears to be at least one factor in this situation, with MIPHY results finding that 79.5% of Eaton County 7th graders, and 63.1% of Eaton County 11th graders have heard students get called mean names or get “put down” one or more times in the prior 12 months. Some students actually report having seen other students get pushed, hit, or punched one or more times within the past 12 months as well (67.6% for 7th graders and 53.2% for 11th graders). Family conflicts and problems also underlie many Eaton County students’ emotional problems as 41.8% of 7th graders and 50.6% of 11th graders report that people in their families have serious arguments.

According to the Michigan Youth Risk Behavior Survey 2020-2021 (YRBS), trauma has also become an increasing problem in Eaton County, with 33.6% of 7th graders and 42.2% of 11th graders reporting that 2 or more of the following things have happened to them during their life: 1). The death of a parent or care giver; 2). Mental abuse; 3). Physical abuse; 4). Sexual abuse; 5). Witnessing violence in the home or neighborhood; 6). Living with person who had mental illness or have attempted suicide; 7). Living with a person who was an alcoholic or used drugs; and/or 8). Living with a person who went to jail or prison. We now know that the impact of exposure to such adverse childhood experiences (ACES) can have lifelong negative impacts if left untreated, and certainly can result in many immediate problems in school functioning.

Aside from these alarming findings from the most recent MIPHY survey, YRBS results, and given the recent COVID-19 Pandemic, it is known that mental health concerns and treatment needs among Eaton County youth and families have remained especially acute given at least some degree of lingering regional unemployment, a recent spike in completed suicide rates (also categorized recently as “deaths of despair”), as well as heightened fear and apprehension of infection. It is believed that there remains a very strong need for mental health treatment services among elementary, middle, and high school students of our community.

This project seeks to identify youth with mental health needs and to refer these youth for appropriate mental health and/or substance abuse treatment services as a means to prevent more intensive involvement with the juvenile justice system and/or more costly residential placement.

Diverting youth with mental health issues into treatment is a promising approach with documented success at reducing recidivism rates and teaching life skills, per a study by the National Mental Health Association (Criminal Justice Newsletter 10-01-04: Mental Health Treatment for Youth in the Juvenile Justice System: A compendium of Promising Practices).

This study found that successful treatment programs tend to intervene early, when problem behaviors first occur. More serious consequences, such as incarceration, are saved as a last resort for the more severe offenders--using instead graduated, less serious consequences initially. In addition, mental health providers offer treatment services of sufficient quantity and duration, involving “multiple interventions that address risk factors in several domains.” The study further indicated that incarceration of juvenile offenders in adult prisons more likely resulted in recidivism than did retention in the juvenile justice system. Juvenile boot camps and curfew laws were also seen as ineffective.

In keeping with these findings, the primary goal of this project is to divert youth into treatment as early as possible in their contacts with the juvenile justice system, which, for the majority of youth, is well before incarceration or more severe consequences are considered. Youth referred to treatment resources can receive intervention by qualified mental health professionals trained to address both the problem behaviors as well as the underlying mental health concerns. With facilitation of a referral by a trained mental health professional, the youth and family are more likely to commit and follow through on recommendations to obtain treatment.

The current project identifies youth, ages 10 – 17, who are already involved with, or likely to become involved with, the juvenile justice system, and who have MAYSI-2 scores or behavior that suggests the likely presence of mental health issues. Such youth, whose emotional difficulties may not otherwise be identified at the point of contact with the juvenile justice system or at the point of development of behavioral difficulties in the school, will have the opportunity to connect with a mental health professional that is skilled in relationship-building and knowledgeable about community resources. Youth and families will receive information about the risks or issues identified by the MAYSI-2, as well as descriptions of the services available from qualified mental health providers in the community. The project staff ensure that youth and families are able to access needed services by guiding the referral process and advocating for the youth/family as needed.

CMHA-CEI, in partnership with the Eaton Regional Educational Services Agency (ERESA) and Eaton County Family Court, has been providing mental health screening and treatment services since 2005 to youth and families served through the Truancy Intervention Program (TIP). The initial funding for this small pilot project was a sum of \$3,000.00 which was intended to serve approximately 6 youth and/or their families. The need for these services has grown steadily and is summarized below:

<u>School Year</u>	<u>Number of referrals received</u>	<u>Number of Youth/Families served</u>
2005/2006	10	7
2006/2007	16	13
2007/2008	34	23
2008/2009	43	38
2009/2010	37	33
2010/2011	78	38
2011/2012	68	48
2012/2013	110	48
2013/2014	79	45
2014/2015	144	48
2015/2016	119	49
2016/2017	108	29
2017/2018	89	50
2018/2019	81	64
2019/2020	92	51
2021/2022	68	56

It should be noted that funding for the current project has fluctuated greatly since 2005 based primarily upon funding availability. During the 2016/2017 project year, grant funds were unexpectedly reduced by one half. This resulted in a staffing reduction from 1.50 FTE's serving this project, to a total of 0.70 FTE's. As a result, fewer youth and their families were able to be served during that time period despite the ongoing need indicated above. Funding was restored to the previous level during the 2018/2019 project year. Due to national staffing shortages of mental health providers due to the COVID-19 Pandemic, this project could not be fully staffed during the 2021/2022 project year. Qualified staff could not be recruited, and existing CMHA-CEI staff were prioritized to serve core at-risk and vulnerable populations.

While it was initially believed in 2005 that services would be very short term in length, the history of this project has shown that many youth and/or families have continued to require treatment longer than anticipated. In projecting future need, ERESA and Court staff have estimated that there are approximately 95 to 105 youth and/or families who would likely benefit from mental health services if such were available and were more easily accessible.

For the upcoming 2023/2024 FY year, it is proposed that this project will be served by one part time Mental Health Therapist (for a total of .5 FTEs) who provide: 1) Mental health screening via use of the MAYSI-2, 2) referral to intensive community based treatment--including provision of services at school, in-home, in-office, and at court, 3) in-school outreach to assist in improving motivation, resolving behavioral problems, as well as engaging youth to facilitate participation in treatment, and 4) greater coordination and collaboration with area service providers and TIP staff. It is requested that a staffing level of (.5 FTE's) be approved for the 2023/2024 FY. This request marks a reduction from the 2022-2023 FY year due to additional mental health block grant dollars being used to support portions of the program and additional Medicaid dollars to support other aspect.

TARGET POPULATION

The Eaton Regional Education Services Agency (ERESA) and Eaton County Family Court have operated a Truancy Intervention Program which served youth and their families who were mandated to address identified problems in school attendance and/or other truancy related behaviors. As such, a component of the TIP program is to link youth and their families with mental health services when such appear indicated. In the proposed new model, CMHA-CEI TIP staff will continue to coordinate and link the ERESA truancy worker and Eaton County Family Court with CMHA-CEI family therapists.

The therapists conduct screenings using the MAYSI-2, complete mental health assessments, and based on the outcome of these assessments provide referrals to behavior health providers and provide navigation services to community resources such as housing, health care, food and clothing, transportation, etc. Through the process of identifying and referring these youths and/or their families, it has become apparent that there are occasions whereby such persons do not have adequate resources to allow engagement in mental health treatment.

CMHA-CEI is a Certified Behavioral Health Clinic via CCBHC, therefore the agency works with all insurances as well as under-insured individuals and families.

PROGRAM DESCRIPTION

This project is intended to provide MAYSI-2 screening, triage, mental health assessment, and referral for treatment planning, individual and/or family therapy, as well as referral to additional services when indicated, to persons falling within the target population described above. Depending upon the outcome determination of the MAYSI-2 and the initial intake evaluation, services may be provided in an outpatient or home-based setting. Experience with this population has shown more and more youth and/or families are requiring longer, more intensive treatment.

The TIP model has been utilized in Clinton and Ingham Counties as well and Families Forward, in partnership with MDHHS, has developed an efficient referral and treatment process with the schools and courts in those counties via the TIP program. Families Forward will be shifting internal programming allotments to support the integration of this model of referral and treatment into Eaton County TIP protocols and procedures. The introduction of this process will begin in partnership with Eaton County Juvenile Courts and ERESA. Once this process has become streamlined, TIP workers will begin taking referrals directly from schools as well. Initially, Juvenile probation officers, upon identifying a possible TIP referral candidate, will refer families to the TIP program and provide a referral sheet to the TIP worker. The TIP worker will contact the family, explain the program, and conduct the MAYSI-2 screen and the Pediatric Symptoms Checklist (PSC), according to the age of the youth. Depending upon the results of the MAYSI-2 or PSC screen, the TIP worker will either then schedule and conduct an initial intake assessment with the family for Families Forward services or will refer the family to alternative behavioral health service providers in the community and other available community services and/or resources as needed. Should the family enroll in services at CMHA-CEI, the family will then be assigned to a therapist in either outpatient or home-based programming. These services will be provided for a duration of time dependent on individual family need.

The assigned ongoing Families Forward therapist will utilize a variety of mental health treatment techniques and procedures which are consistent with established standards of care within the mental health treatment field. Such techniques may include behavioral intervention, identification and regulation of emotions, improvement of family relationships or dynamics, cognitive behavioral interventions for anxiety, depression, and/or other problems, solution focused approaches to common problems, interpersonal therapies, trauma work, play therapy for younger youth, and other techniques as needed. All services are delivered by licensed mental health therapists and are monitored by an appropriately licensed and credentialed clinical supervisor.

The long term goal of this modified TIP implementation plan is to develop referral sources beyond the Court, such as schools, community partners, and direct referrals by families throughout Eaton County.

BUDGET/STAFFING

In FY23, we requested approximately \$196,000. For FY24, we are requesting \$66,171. This decrease in requested funding is a result of obtaining grant funding through MDHHS Mental Health Block Grant funding that allows us to provide this type of screening service for the tri-county area. Additionally, we have allocated approximately \$50,000 in Medicaid funding for the portion of the program that can be now billed to Medicaid or other insurances. The funding requested will be allocated for staffing costs to continue the screening and coordination that occur through this program that exceed current capacity and funding.

For the operating year 2023/2024, it is proposed that one part-time mental health therapist, for a total of .5 FTEs, will provide services to the project described above. The therapist will work closely with the Court as well as with school personnel to provide MAYSI screenings, PCS, assessment, and referrals directly to those youth and families screened by the TIP Mental Health Therapist. Clinical supervision and oversight is provided by CMHA-CEI and the project therapist maintains office space at the Ingham Counseling Center but can travel to Eaton County for TIP screening and Liaison work.

The activities of the TIP Mental Health and MAYSI projects have historically qualified as preventative in nature under Child Care Fund guidelines, and thus had been reimbursable to Eaton County on such a basis. As a result, the actual net cost to Eaton County under such an arrangement would then be approximately one half of that listed on the following Program Budget Summary pages.

See attached program budget summary sheet and cost detail.

INTENDED OUTCOMES AND MEASURES

The intended outcome of the TIP mental health treatment project is to enhance the availability of mental health services to the youth and families described above. The primary goal is to provide linkage to treatment of various mental health conditions or difficulties which directly contribute to truancy or behavioral problems at school, thus preventing these from developing into more severe conditions which then often adversely impact the social and community functioning of these youth and can lead to costly residential placement or detention.

A second goal of this project is to make assist families via navigation to mental health services and other community resources that may be available with an emphasis on minimizing the cost to families. Removal of financial and other barriers have historically proven to increase the interest of TIP participants in mental health treatment.

A third goal, added during the 2008/2009 project year, is to identify and connect families in need of intensive, home-based, services with appropriate providers (such as the CMHA-CEI Family Guidance Program). This has occurred on many occasions during the 2022/2023 year of this project, with these families being believed to be extremely unlikely to have sought such services on their own.

A fourth goal, added during the 2010/2011 FY, is to provide those youths served with a less intensive alternative to costlier enrollment in the Eaton Day Treatment Program, Eaton Residential Treatment Program, and/or the foster care system. This has become particularly evident as an area of need over the past six years of the project. Furthermore, a greater number of younger truant children (ages 7 to 11) have been served by this project over the past few years, and it is evident that these children are not appropriately served through the Day Treatment Program and/or are too vulnerable for placement at the Eaton County Youth Facility for residential treatment due to their young ages.

A variety of measures are utilized to gauge progress toward completion of the above outcomes. These include tracking referral rates, utilization patterns, the number of youth/families referred for other more intensive services, as well as treatment outcomes. Progress during mental health treatment, and overall treatment outcome, is measured using the Preschool and Early Childhood Functional Assessment Scale (PECFAS) and the Child and Adolescent Functional Assessment Scale (CAFAS). The PECFAS/CAFAS is a Michigan Department of Community Health sanctioned measure which objectively

evaluates youth functioning in eight domains: school, home, community, behavior toward others, moods, self harm, substance abuse, and thinking problems. Scores of 0 to 30 are possible in each domain, with 30 indicating severe impairment, 20 indicating moderate impairment, 10 indicating mild impairment, and 0 indicating no impairment. Scores in each of the 8 domains are summed, with a total possible score ranging from 0 to 240. A higher total score has reliably been shown to reflect greater overall impairment in functioning, with a decrease of 20 or more points over time reflecting clinically and statistically significant improvement. The PECFAS/CAFAS is given at the start of treatment, every three months thereafter, and then at termination of treatment. These scores are compared and the total change from pre to post treatment is calculated. It is anticipated, that on average, the majority of all youth served will achieve at least a 20-point reduction in PECFAS/CAFAS score.

PROGRAM BUDGET - COST DETAIL SCHEDULE

ATTACHMENT B.2

Use WHOLE DOLLARS Only

PROGRAM EATON COUNTY TRUANCY INTERVENTION PROGRAM		BUDGET PERIOD From: 10/1/2023 To: 9/30/2024		DATE PREPARED 5/30/2023
CONTRACTOR NAME CMHA of Clinton-Eaton-Ingham Counties		BUDGET AGREEMENT ☒ ORIGINAL ☐ AMENDMENT		AMENDMENT #
				Grant Covered Costs
1. SALARY & WAGES: POSITION DESCRIPTION	COMMENTS	POSITIONS REQUIRED	TOTAL SALARY	
MENTAL HEALTH THERAPIST	\$ 76,744.92	0.500	\$ 38,372	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
1. TOTAL SALARY & WAGES:		0.500	\$ 38,372	
2. FRINGE BENEFITS: (Specify)		Composite Rate %		
☒ FICA	☒ LIFE INS	☒ DENTAL INS	49.00%	\$ 18,803
☒ UNEMPLOY INS	☒ VISION	☐ WORK COMP	7.65%	
☒ RETIREMENT	☒ HEARING INS			
☒ HOSPITAL INS	☐ OTHER: specify-			
2. TOTAL FRINGE BENEFITS:			\$ 18,803	
3. TRAVEL: (Specify if category exceeds 10% of Total Expenditures)				
Travel				\$ 2,400
Conferences				
3. TOTAL TRAVEL:				\$ 2,400
4. SUPPLIES & MATERIALS: (Specify if category exceeds 10% of Total Expenditures)				
Supplies				\$ 300
4. TOTAL SUPPLIES & MATERIALS:				\$ 300
5. CONTRACTUAL: (Subcontracts/Subrecipients)				
Name	Address	Amount		
5. TOTAL CONTRACTUAL:				\$ -
6. EQUIPMENT: (Specify)				Amount
LAPTOP (1 LAPTOP)				\$ -
6. TOTAL EQUIPMENT:				\$ -
7. OTHER EXPENSES: (Specify if category exceeds 10% of Total Expenditures)				Amount
Communication:	AIR CARD	\$ -	\$ -	
	CELL PHONES	\$ 180	\$ 180	
	PHONES	\$ -	\$ -	
SPACE:	RENT-SPACE	\$ -	\$ -	
Licensing	License fees	\$ 100	\$ 100	
OTHER:	FACILITY ALLOCATION	\$ -	\$ -	
	REP AND MAINT- CLEANING	\$ -	\$ -	
	RENT EQUIP-COPIERS	\$ -	\$ -	
7. TOTAL OTHER EXPENSES:				\$ 280
8. TOTAL DIRECT EXPENDITURES: (Sum of Totals 1-7)		8. TOTAL DIRECT EXPENDITURES:		\$ 60,155
9. INDIRECT COST CALCULATIONS:				
Rate #1	Base \$	10.00%	x Rate	\$ 60,155 = \$ 6,016
Rate #2	Base \$		x Rate	\$ 60,155 = \$ -
9. TOTAL INDIRECT EXPENDITURES:				\$ 6,016
10. TOTAL ALL EXPENDITURES: (Sum of lines 8-9)				\$ 66,171

**COMMUNITY MENTAL HEALTH AUTHORITY OF CLINTON, EATON, AND
INGHAM COUNTIES**

**Request for Funding of the
Integrated Community Youth Outreach Unit (ICYOU)
for FY 2023/2024**

CMHA-CEI recognizes the importance of early prevention and intervention in the lives of children. Early prevention is critical in helping youth avoid the onset of Serious Emotional Disturbances, juvenile justice involvement, and substance use. Early prevention helps contribute to academic success, can help prevent suicide in youth and adults, and can help improve people's global level of functioning on a day-to-day basis. Despite this importance, many youths who would benefit from behavioral health services do not receive any.

The Integrative Community Youth Outreach Unit (ICYOU) of Community Mental Health Authority of Clinton, Eaton and Ingham counties is a youth outreach program whose primary purposes are to identify youth with Severe Emotional Disturbances (SED) and link them with behavioral health services, and also reach those who have not yet developed an SED in order to prevent the onset of these symptoms early on. ICYOU engages youth by providing groups designed to enhance coping skills, social skills, and anger management skills of youth in the tri-county area and linking them with behavioral health and other community services and resources. These skill building groups also help to strengthen protective factors that are key in the prevention of substance use disorders.

To this end, CMHA-CEI is requesting the continuation of funding for the amount of \$ 145,258 for the period of October 1, 2023 through September 30, 2024 to support the invaluable and impactful work of the ICYOU in Eaton County.

TARGET POPULATION

The primary target population of ICYOU services is all youth aged 3-17 and their families within Eaton county. ICYOU services take place both on-site and in the community. In their navigator role, ICYOU staff are trained to assist any community member who is seeking help locating community services or resources, regardless of whether they have children and irrespective of insurance status.

PROGRAM DESCRIPTION

Youth across the nation have experienced a major decline in their mental health over the past several years. According to the Michigan Profile for Health Youth (MiPHY), prior to the pandemic, approximately 3 in 4 tri-county middle school students witnessed bullying, and almost half of all Eaton County high school and middle school students experienced major depression. Tragically, nearly 1 in 5 high school students across the three counties planned suicide in the past year, with almost half that number actually attempting suicide. Furthermore, between 10-20% of tri-county middle school students reported ever planning suicide and between 7-13% actually attempting suicide.

Clearly, youth were struggling with mental health issues before the COVID-19 pandemic, and research on the negative impact the pandemic has had on their mental health is still emerging. However, studies shared by the National Institute of Health have shown that depressive and anxiety based symptoms have increased since the COVID-19 pandemic. (Samji et al, 2022)

What may be more alarming is that, per the CDC, “Emergency department (ED) visits for suspected suicide attempts among females ages 12–17 increased 51% during February–March 2021 compared with 2019.” (Canady, V.A. (2021) These are just the females who were treated in an ED. It is not feasible to capture all the additional suicide attempts by that population in that time due to the fact that a high percentage of suicide attempts go unreported.

Locally, at CMHA-CEI Children’s Crisis Services (CSS), requests for mobile crisis service interventions have increased significantly in the past year. Although the rates of hospitalizations have remained roughly static, the number of psychiatric inpatient hospitalizations has risen accordingly to the number of youth presenting to the agency.

The most current Michigan Profile for Healthy Youth survey (MIPHY 2021-2022) has found that the percentages of 7th and 11th graders in Eaton County reporting symptoms of depression (34.3% and 42.7% respectively) is far higher in Eaton County than the overall average across the State of Michigan. The MIPHY survey has also discovered the alarming finding that 26.4% of Eaton County 7th graders have seriously considered attempting suicide, with 16.6% of these students having made a plan about how they would attempt suicide. Sadly, 10.3% of these 7th graders have reported actually attempting suicide within the prior 12 months. It is alarming that these percentages have been holding relatively steady over the past several yearly cycles of MIPHY survey data collection.

Bullying at school appears to be at least one factor in this situation, with MIPHY results finding that 79.5% of Eaton County 7th graders, and 63.1% of Eaton County 11th graders have heard students get called mean names or get “put down” one or more times in the prior 12 months. Some students actually report having seen other students get pushed, hit, or punched one or more times within the past 12 months as well (67.6% for 7th graders and 53.2% for 11th graders). Family conflicts and problems also underlie many Eaton County students’ emotional problems as 41.8% of 7th graders and 50.6% of 11th graders report that people in their families have serious arguments.

According to the Michigan Youth Risk Behavior Survey 2020-2021 (YRBS), trauma has also become an increasing problem in Eaton County, with 33.6% of 7th graders and 42.2% of 11th graders reporting that 2 or more of the following things have happened to them during their life: 1). The death of a parent or care giver; 2). Mental abuse; 3). Physical abuse; 4). Sexual abuse; 5). Witnessing violence in the home or neighborhood; 6). Living with person who had mental illness or have attempted suicide; 7). Living with a person who was an alcoholic or used drugs; and/or 8). Living with a person who went to jail or prison. We now know that the impact of exposure to such adverse childhood experiences (ACES) can have lifelong negative impacts if left untreated, and certainly can result in many immediate problems in school functioning.

Aside from these alarming findings from the most recent MIPHY survey, YRBS results, and given the recent COVID-19 Pandemic, it is known that mental health concerns and treatment needs among Eaton County youth and families have remained especially acute given at least some degree of lingering regional unemployment, a recent spike in completed suicide rates (also categorized recently as “deaths of despair”), as well as heightened fear and apprehension of infection. It is believed that there remains a very strong need for mental health treatment services among elementary, middle, and high school students of our community.

These results are alarming and demonstrate the importance of behavioral health services for youth. There are many barriers to at-risk youth being able to access this much-needed treatment, however. These barriers may be due to issues such stigma, limited resources, lack of transportation, health and wealth disparities, and both attitudes toward as well as lack of awareness of behavioral health related issues and treatment. During the COVID-19 pandemic, additional barriers arose such as government restrictions on meeting in person, a decrease in referral sources due to youth being more confined to the home, and providers or families being unwilling to meet in person out of fear of contracting the virus. All of these make it challenging for

youth to access necessary behavioral health services, demonstrating a need for additional youth outreach and prevention efforts to help youth access services.

This project seeks to identify youth with mental health needs and to refer these youths for appropriate mental health and/or substance abuse treatment services as a means to prevent more intensive involvement with the juvenile justice system and/or costlier residential placement, as well as to help all youth learn appropriate and effective coping skills to manage mental wellness and lower the likelihood of their developing a Severe Emotional Disturbance in the future.

The initial phases of ICYOU began in late Fall 2021 and were focused on building staff, forming initial community partnerships, training staff, and starting to develop groups for the program. ICYOU began providing these community groups in February 2022 and the program spent the next year focusing on expansion across Clinton, Eaton, and Ingham counties. As of May 2023, ICYOU has formed 15 community partnerships and currently provides 19 groups weekly across the tri county area. Seven of these groups are held within Eaton County.

As a youth outreach and prevention program the premise of the program is that more youth would be enrolled in behavioral health services if they had an easier time accessing these services. The ICYOU strategy for improving access is to put youth in regular contact with a trusted adult who can assist them and their families by:

- Being a positive person who youth interact with on a regular basis
- Teaching youth about positive mental health related issues
- Answering questions youth and/or families have about mental health services and how to access them
- Providing initial brief screen assessments in the community to determine best path for families to access behavioral health services either within CMHA-CEI or with community providers
- Assisting children, adults, and families access additional community resources and services.

Integral to this premise is the placement of ICYOU staff in the community at a variety of youth-facing sites and meeting youth where they are at. ICYOU engages youth via groups utilizing fun activities that are coupled with behavioral health and wellness components. These groups provide opportunities to enhance youth growth, development, and skills-mastery in areas such as mental health, coping strategies, self-care, positive relationships, and other core resiliency-building areas by providing carefully these vetted groups in the community in both open group and closed group modalities.

Several benefits come of these community groups which are difficult to quantify. For instance, these groups:

- Provide a safe, structured space for youth to discuss important mental wellness related topics. These topics, such as “how to recognize when you are starting to get upset and what you can do manage those feelings” or “how to recognize and when a peer is struggling and what you can do to help them” for example, are often new topics to the youth attending these groups.
- Teach numerous coping skills which youth are unlikely to have encountered before.
- Introduce youth to the practice of mindfulness exercises. These exercises often focus on breathing exercises and awareness of one’s senses.
- Create pro-social spaces where youth of varying ages can meet and form positive relationships with youth who frequently are of a different age, race, culture, or socioeconomic status than they are.
- Help youth to improve their emotional vocabulary as well as their emotional and social intelligence.

The length of time of each group varies according to age. The groups provided to the 3 to 6 year olds last approximately 30 minutes. The groups for older children usually last 60 minutes. Although the groups all follow the same general format, activities and conversations are adjusted so that they are age appropriate.

It is proposed that this project will be served by two Youth Engagement Specialists funded at .75 FTEs each and a program administrator funded for .050 FTE (for a total of 1.550 FTEs) who provide: 1) regular mental wellness and stress reduction/management groups; 2) navigational services to access community resources and behavioral health services; 3) referral to outpatient and intensive community based treatment.

The Youth Engagement Specialists are Bachelor’s level staff with extensive training in youth mental health related issues and have been leading ICYOU groups for the past 15 months. The current direct coordinator of the program is a Licensed Master Social Worker of 20 years of experience covering areas of home based therapy, crisis services, prevention programming, coalition development, program development and education & training. The coordinator is responsible for program development and maintenance.

The ICYOU program has partnered with numerous sites across the tri-county which have hosted ICYOU programming, including schools, shelters, libraries, teen centers,

Parks and Rec programs and churches. Within Eaton County, ICYOU has partnered with:

- Delta Township Library (2-3 groups weekly)
- Grand Ledge District Library (2 groups weekly)
- Eaton Rapids Teen Space (1-2 groups weekly)
- Crosswalk (Teen Center in Charlotte) (1 group weekly)
- Eaton Regional Education Service Agency (Photo Voice and Nurturing Parent Program)

72 Eaton County Youth received ICYOU services in FY23 Q1.

BUDGET/STAFFING

In FY23, Eaton County generously provided approximately \$90,000 to support the on-going work of the ICYOU program after the anticipated loss of ARPA funding.

In FY23, Eaton County provided approximately \$196,000 for the Eaton TIP project and \$149,000 for the Eaton PYC project. This year CMHA-CEI is requesting \$145,258 for Eaton TIP, due to obtaining alternative funding for certain aspects of the project. Also, in FY23, Eaton County provided approximately \$149,000 for our PYC program. CMHA-CEI is not requesting funding for PYC project as we are able to allocate Medicaid funding for this project due to the ability to bill for these services. Thus, CMHA-CEI is requesting that a portion of this could be allocated to ICYOU in the amount of \$145,258. This would still result in an overall request in funding from Eaton County Millage Funding.

It is proposed that this project will be served by two Youth Engagement Specialists funded at .75 FTEs each and a program administrator funded for .050 FTE (for a total of 1.550 FTEs) who provide: 1) regular mental wellness and stress reduction/management groups; 2) navigational services to access community resources and behavioral health services; 3) referral to outpatient and intensive community based treatment.

The Youth Engagement Specialists are Bachelor's level staff with extensive training in youth mental health related issues and have been leading ICYOU groups for the past 15 months. The current direct coordinator of the program is a Licensed Master Social Worker of 20 years of experience covering areas of home based therapy, crisis services, prevention programming, coalition development, program development and education & training. The coordinator is responsible for program development and maintenance.

INTENDED OUTCOMES AND MEASURES

GOAL 1: Eaton County youth will receive intervention early before the onset of severe and/or acute mental health symptoms.

- OBJECTIVE: By 9/30/2024, ICYOU staff will have documented contact with 100 Eaton County youth.
 - o ACTIVITY: ICYOU staff may be located at schools, community centers, libraries, and shelters throughout Eaton County to provide groups and/or navigational services.
 - o ACTIVITY: ICYOU staff will participate in public outreach events throughout the Eaton County area to provide navigation services and information regarding the program as well as general CMHA-CEI services.
- OBJECTIVE: BY 09-30-2024, the ICYOU program will have established 2 additional partner sites totaling 9 sites served throughout the fiscal year to provide groups and navigational services.
 - o ACTIVITY: ICYOU coordinator will utilize existing connections via the CMHA-CEI youth prevention and outreach program to find referrals to potential partner sites.
 - o ACTIVITY: ICYOU coordinator will present the ICYOU program to coalitions to spread public awareness of the program.

GOAL 2: Tri-county youth will gain greater ease-of-access to behavioral health services and other needed community resources or services.

- OBJECTIVE: By 09/30/2024, ICYOU staff will have referred an additional 15 Eaton County youth, families, or adult individuals to behavioral health services or other community resources and services.
 - o ACTIVITY: ICYOU staff will work with community partner site staff to identify youth who may have need of navigational services.
 - o ACTIVITY: ICYOU staff will hold “open navigation office hours” at select partner sites to assist the general public in accessing community resources.

A number of data points will be utilized to evaluate the program, including: number of groups held; number of unique group attendees; total number of ICYOU encounters with youth, including both outreach events and ICYOU groups; total number of encounters with parents; number of brief screens conducted; number of youth enrolled in services at CMHA-CEI following an initial intake assessment via referral from an ICYOU team member; qualitative self-reports in weekly group feedback forms

This data will be measured in several ways: SmartCare reports, Group attendance and feedback forms (which include any referrals made for group attendees and parental contacts), tracking of referrals made outside of group, and hand counting at outreach events.

PROGRAM BUDGET - COST DETAIL SCHEDULE

ATTACHMENT B.2

View at 100% or Larger

Page

Of

Use WHOLE DOLLARS Only

PROGRAM		BUDGET PERIOD		DATE PREPARED
Eaton County ICYOU		From: 10/1/2023	To: 9/30/2024	5/30/2023
GRANTEE NAME		BUDGET AGREEMENT		AMENDMENT #
CMHA-CEI		☒ ORIGINAL ☐ AMENDMENT		
1. SALARY & WAGES:				
POSITION DESCRIPTION	COMMENTS	POSITIONS REQUIRED	TOTAL SALARY	
Client Services Specialist		0.750	\$ 39,929	
Client Services Specialist		0.750	\$ 41,809	
Coordinator 2A		0.050	\$ 4,874	
1. TOTAL SALARY & WAGES:		1.550	\$ 86,612	
2. FRINGE BENEFITS: (Specify)		Composite Rate %		
☒ FICA ☒ LIFE INS ☒ DENTAL INS		49.00%		\$ 42,440
☒ UNEMPLOY INS ☒ VISION ☒ WORK COMP				
☒ HOSPITAL ☒ HEARING INS ☐ Tuition Remission (list amount)				
☒ RETIREMENT ☐ OTHER:specify				
2. TOTAL FRINGE BENEFITS:				\$ 42,440
3. TRAVEL: (Specify if category exceeds 10% of Total Expenditures)				
Travel				\$2,400
3. TOTAL TRAVEL:				\$ 2,400
4. SUPPLIES & MATERIALS: (Specify if category exceeds 10% of Total Expenditures)				
Supplies				\$ 600
4. TOTAL SUPPLIES & MATERIALS:				\$ 600
5. CONTRACTUAL: (Subcontracts/Subrecipients)				
Name	Address	Amount		
5. TOTAL CONTRACTUAL:				\$ -
6. EQUIPMENT: (Specify)		Amount		
6. TOTAL EQUIPMENT:				\$ -
7. OTHER EXPENSES: (Specify if category exceeds 10% of Total Expenditures)		Amount		
Communication:				
Space Cost:				
Others (explain):				
7. TOTAL OTHER EXPENSES:				\$ -
8. TOTAL DIRECT EXPENDITURES: (Sum of Totals 1-7)		8. TOTAL DIRECT EXPENDITURES		\$ 132,052
9. INDIRECT COST CALCULATIONS:				
Rate #1	Base \$ 132,052	x Rate 10.00%	=	\$ 13,205
Rate #2	Base \$ -	x Rate	=	\$ -
9. TOTAL INDIRECT EXPENDITURES:				\$ 13,205
10. TOTAL ALL EXPENDITURES: (Sum of lines 8-9)				\$ 145,258

Juvenile Treatment and Prevention Services Program

**Eaton County
Truancy Intervention Program (TIP)**

May 2023

**Prepared by: Eaton Regional Education Service Agency
Prevention Program Services
Kimberly Thalison, Prevention Supervisor
Harriett Dean, TIP Coordinator**

TIP Scope of Service:

Truancy is a sign of trouble, a critical indicator that a young person is losing his or her way. When younger school-aged children are chronically truant from school, it is often indicative of poor family management. When teenagers skip or miss multiple days from school, it is often their way of communicating to their parents, school authorities, and the community that they are struggling and could use our help in keeping them moving toward a productive future. This is true more than ever as our youth are impacted by the global pandemic and the complete change back to in-person learning from virtual and blended learning countywide. Even three years later, the struggle continues. High risk and delinquent behavior such as substance abuse, violence, sexual and criminal activity can be related to truancy. Left unaddressed, truancy can have negative effects on students, schools, and the community. The Eaton County Truancy Intervention Program (TIP) intent is to offer students and their families a continuum of services to support appropriate attendance.

COVID-19 changed the way our schools operated nationwide. This is equally true for our districts here in Eaton County. Even though schools returned to in-person learning for the 2021-22 school year, many students struggled to transition back to daily learning. Through the end of April 2023, schools in Charlotte, Eaton Rapids, Grand Ledge, Island City Academy, Connections Academy (online learning) Waverly, Maple Valley, Potterville, Relevant Academy, Holt, Lakewood, Mid Michigan Leadership Academy, St. Mary, and Lansing School District referred 230 students in the Eaton RESA Truancy Intervention Program, including 38 students carried over from 2022-23. An additional 42 received pre-referral intervention, **totalling 272 students and families receiving truancy intervention services**. There were 54 petitions filed to date, so no further truancy involvement was needed in 218 cases.

To measure improvement, attendance data is documented 45 days pre-tip TIP involvement and 45 days post-TIP involvement. Collected data indicates improvement at all levels of intervention, including tardies and absences at elementary, middle, and high school levels*:

- At the elementary level, pre-intervention cumulative tardies totaled 443 and 573 absences cumulative. Post intervention, cumulative tardies dropped to 245, a reduction of 45%. Absences post intervention dropped to 295, a 49% reduction in days missed.
- At the middle school level, pre-intervention cumulative tardies totaled 141, and post-intervention tardies totaled 151, a 1% increase. Cumulative absences pre-intervention at middle school totaled 254, and post-intervention absences totaled 144, a 43% reduction in absences.
- High School outcomes also showed vast improvement. Pre-intervention cumulative tardies totaled 76, and post-intervention totaled 92, a 2% negative change after intervention. A reduction in absences significantly improved, with 102 cumulative absences pre-intervention and 56 absences post-intervention, a 50% reduction in the number of absences countywide.*

*This data is from 2018-19, which due to Covid19 shut downs, online, blended, and sporadic face-to-face learning options, was the most recent data to be collected.

Target Population and Number of Youth Served:

Between October 1, 2023 and September 30, 2024, TIP will serve a minimum of 200 Eaton County youth between the ages of 6-17 identified with school attendance problems. The law in Michigan MCL 380.1147 states that:

- (1) ..."the child's parent, guardian, or other person in this state having control and charge of the child shall send that child to a public school during the entire school year from the age of 6 to the child's eighteenth birthday.

In January of 2015, the Michigan Legislature lowered the age of adjudication to 17 for all crimes. This means that on or after a person's 17th birthday, that person committing a crime would no longer be charged as a juvenile, but would be charged as an adult. Child truancy legislation MCL 712A.2:

- (a) Exclusive original jurisdiction superior to and regardless of the jurisdiction of another court in proceedings concerning a *juvenile under 17 years of age* who is found within the county if 1 or more of the following applies:

- (4) The juvenile willfully and repeatedly absents himself or herself from school or other learning program intended to meet the juvenile's educational needs, or repeatedly violates rules and regulations of the school or other learning program, and the court finds on the record that the juvenile, the juvenile's parent, guardian, or custodian, and school officials or learning program personnel have met on the juvenile's educational problems and educational counseling and alternative agency help have been sought.

Since the beginning of the current 2022-23 school year through mid April 2023 TIP has provided services to 272 Eaton County youth and families.

TIP offers support to parents/guardians and youth in Eaton County and at the same time, enforces Michigan's Compulsory School Attendance Act (P.A. 451 of 1977). TIP provides positive support to increase continuous and consecutive school attendance. The intent is to enforce the mandatory attendance law by holding parents accountable, and provide truant students a diversion opportunity offering assessment, support, and services to address the underlying causes of truancy. In the spring of 2021, Eaton County courts, in collaboration with the existing Eaton RESA TIP program, the Eaton County Prosecuting Attorney, and the Honorable Judge Thomas Byerley, piloted a Truancy Court to offer parents of youth age 11 and under court oversight in a diversion program to improve their children's attendance. To date, 28 families have agreed to participate and 2 more families are pending arraignment and an offer to participate in May and June 2023. While too soon for program outcomes, we have already seen a significant increase in student attendance since April 7, 2021. This program continues to serve families successfully.

TIP simultaneously focuses on prevention and intervention. As described by the National Center for School Engagement, many factors contribute to truant behavior. Youth fail to attend school due to personal, academic, school climate, and family-related

issues. Many families with school attendance problems struggle with significant issues such as homelessness, poverty, substance abuse, mental health issues, transportation issues, child care, and an overall lack of family organization. For example, TIP is called to help a family obtain counseling, advocate for a family to receive services through Eaton SIREN Shelter or Department of Health and Human Services (DHHS), secure proper clothing or school supplies, negotiate a new school schedule, or solve transportation problems. Program services include case management for each youth and their family who are referred. Each TIP student's case is assessed for the reasons contributing to the attendance problem, and solutions are sought to remove barriers to regular school attendance. Students may be referred to the court's LINK program if suspended from school, and a referral to other local programs such as Choices (an early intervention program for youth ages 13-17 who have experimented with alcohol, marijuana, or other drugs) will be utilized as appropriate. Michigan legalized marijuana in November of 2018, and initial anecdotal reports from schools is that marijuana use is on the rise, contributing to absenteeism and truancy of youth.

Program Description

Upon the initial referral, the TIP Coordinator contacts the truant youth's parent or guardian. The Coordinator will discuss the attendance concerns with the parent/guardian, problem-solve ways to resolve the attendance problems, and make an informal plan for improved attendance. Parents/guardian(s) are alerted to consequences if their child's attendance does not improve significantly. The TIP attendance facilitators meet with all youth aged 12-17 at their schools if deemed appropriate. They discuss the reasons for the student's absences with each student, meet with teachers, counselors, and administrators to help the student put a plan in place at school to improve their attendance, and monitor the student's attendance, grades, and school behavior. When necessary, students are assessed for the need of tutoring to improve academic skills and, in districts that provide after-school tutoring, TIP students can be matched with tutors or other after-school academic assistance. Updates on each student are provided to the TIP Coordinator weekly, or more often if needed. Currently, attendance facilitators communicate virtually with most students weekly. The student's attendance, grades, and behavior are monitored, and if there is no significant improvement within 3-4 weeks, the Truancy Coordinator may meet with the family and school staff to sign a formal TIP agreement. The TIP attendance facilitators continue to monitor truant youth and provide any assistance they need with organizing schoolwork, securing a mentor/tutor, and having meetings with teachers and administrators regarding the student's attendance, behavior, and academic performance on a weekly basis. Attendance facilitators report back to the TIP Coordinator on each student's progress. If a student's attendance does not improve during this process, a hearing is scheduled directly with the Juvenile Court Referee.

NOTE: As the county sees fewer and fewer Covid-19 cases and restrictions are lifted, the TIP program will continue to adjust services and programming by conducting assessments within families on caseload to understand and impact barriers to staying engaged in traditional and nontraditional learning. TIP will provide allowable expenses and interventions as needed based on family circumstances and student needs to support regular school participation.

Once the truancy petition is issued, an inquiry hearing is scheduled through the Juvenile Court, currently via Zoom. An offer of an informal consent calendar is offered as a diversion to formal probation via the Eaton County Youth Services referee. Unless a student has already been offered a consent calendar in the past, a consent calendar would be the least restrictive diversion for first time offenders. Formal probation, day treatment, community based treatment, or boot camp, are other possible dispositions in extreme cases. This protocol continues a transition to a formal Truancy Court in Eaton County, where the Juvenile Court Referee is hearing truancy cases weekly and assigning one Probation Officer to handle truancy probation. The model program and fidelity remains, but the referral process is streamlined.

In collaboration with the Eaton County Counseling Center (ECCC), truant youth participating in TIP are offered a free mental health screening when appropriate. Counseling and other supportive services are arranged for or provided to the truant youth and their families.

In situations where a child is age 11 or under, the TIP Coordinator will attempt to engage the parent/guardian(s) of the truant child via the TIP Attendance Agreement. If compliance is not reached, the Eaton County Prosecuting Attorney's office will issue a warning letter to the parent, requesting immediate compliance with TIP. If compliance still does not occur, the parent will be referred back to the Prosecutor for participation in the Truancy Court as an option, or to pursue charges against parents who are found to be in violation of the Compulsory School Attendance Act as per the prosecutor's discretion.

Progressing into the 2023-24 school year and beyond, truancy issues will continue to challenge our schools and our youth. We will continue to review evidence-based interventions for youth ages 12-17 to assure that we are using best practices in working with the high school population, and make adjustments where necessary in our 2023-24 practices, including braiding Truancy Prevention with the Positive Behavior Intervention (PBIS) Multi-tiered System of Supports and Social Emotional learning currently taking shape in our local school districts.

Program Methodology

In 2001, the TIP Advisory Group, made up of local community agencies including the Eaton County Circuit Court, the Prosecuting Attorney, and local school districts, was established. The TIP Advisory Group guided the development of truancy prevention programming in Eaton County. The philosophy and implementation guidelines were established based on the best practices for developing and implementing an effective truancy program by the U.S. Office of Juvenile Justice and Delinquency Prevention (OJJDP) Program. OJJDP offers five primary elements of a comprehensive community and educational strategy to combat truancy. They include:

- Involve parents in all prevention/intervention strategies.
- Ensure students face firm sanctions for truancy.
- Create meaningful incentives for parental responsibility.
- Establish ongoing truancy programs in schools.

- Schools should address the unique needs of each child and consider developing initiatives to combat the underlying causes of truancy.

Such initiatives include tutoring programs, drug prevention initiatives, mentorship efforts, campaigns for involving parents/guardians in school attendance, and referrals to social service agencies.

The guidelines also recommend that truancy programs should be comprehensive and include four major components:

- System reform and accountability.
- Continuum of services to address youth needs.
- Data collection and evaluation.
- A community education and awareness program to address the need to prevent truancy in kindergarten through 12th grade and to intervene with truant students.

Eaton County continues to make progress with the strategies submitted in the Truancy and Dropout Prevention Plan submitted to the Michigan School-Justice Partnership in December, 2013 and updated annually, in an attempt to impact the School to Prison Pipeline.

Implementation Plan

Month:	Task:	To be completed by whom:
August – June	Follow up with 2022-23 students carried over to be monitored in 2023-2024. Receive, process, and facilitate referrals. Provide case management services for all TIP students throughout the school year.	TIP Coordinator Attendance Facilitators Clerical Support
August – May	Identify TIP youth who could benefit from a tutor and work with local schools to provide adult or peer tutoring.	TIP Coordinator Attendance Facilitators
August – June	Meet with Eaton County Counseling Center therapist to discuss TIP students needing mental health screening and counseling services as needed.	TIP Coordinator Attendance Facilitators Prevention Supervisor
August – June	Meet with administrators, teachers, counselors, parents, and probation officers to facilitate the individual case plans of TIP students.	TIP Coordinator Attendance Facilitators
August – June	Make Wrap-Around Services, Children's Protective Services, Family Guidance, and other community organization referrals for appropriate cases. Maintain communication with community organization partners to coordinate services.	TIP Coordinator Attendance Facilitators
August – June	Maintain case notes for each TIP youth.	TIP Coordinator

		Attendance Facilitators
August– June	Collect attendance, grades, and discipline reports for each TIP student.	TIP Coordinator Attendance Facilitators
September – June	Facilitate requests for truancy petitions and/or warning letters to parents issued by the Prosecuting Attorney as needed	TIP Coordinator Attendance Facilitators
August – June	Communicate with Juvenile Court on the status of truancy petitions.	TIP Coordinator Clerical Support
August – June	Purchase and distribute incentives (coupons, pencils, folders, alarm clocks, organizers, treats, pizzas) for TIP students making progress with their attendance.	TIP Coordinator
August – June	Attend hearings as needed with youth and parents involved with Family Court.	TIP Coordinator
October-June	Collate and tabulate TIP data for annual outcome report. Prepare outcome report.	TIP Coordinator
June - August	Prepare lists of 2023-24 TIP students to be monitored in 2023-24	TIP Coordinator Attendance Facilitators Clerical Support
August – September	Visit local school districts in the first week of school to educate students on the importance of school attendance.	TIP Coordinator

Staffing Plan

TIP will have the capacity to provide truant or chronically absent Eaton County youth with the assessment, support, and services they need to address the underlying causes of their attendance problems through the following staff positions funded by this request:

0.55 FTE TIP Program Coordinator
0.05 FTE Prevention Supervisor
0.30 FTE Clerical Support
0.25 FTE TIP Attendance Facilitators

In addition, match funding to support additional Truancy Coordinator time (.45 FTE) and Attendance Facilitator time (.25 FTE) will also be requested from the Mid-State Health Network, the Substance Use Disorder Coordinating Agency as part of the Eaton County Substance Awareness Advisory Group Action Plan for 2022-23.

The TIP Coordinator oversees all of the services for referred youth, with parent/guardian(s), school administrators, teachers, school counselors, Juvenile Court officials, the Prosecuting Attorney, probation officers, the ECCC/TIP Therapist, and community service providers.

The TIP Prevention Supervisor will provide oversight of TIP including maintenance of the budget. She will also provide supervision to the TIP Coordinator, and supervision to the clerical support and attendance facilitators.

Clerical support will provide assistance with processing referrals, sending correspondence to parent/guardian(s), preparing truancy petitions, maintaining a database of referrals, attendance, grade point averages, disciplinary records, and running data reports for the annual outcome report.

The TIP Attendance Facilitators meet regularly with TIP students to provide case management, and collect and maintain attendance, grades, and school behavior records. They coordinate services through the student's schools such as tutoring, mentoring, and providing incentives to the youth when improvement is demonstrated. The TIP Attendance Facilitators confer bi-weekly with the TIP Coordinator to discuss cases, challenges and successes, and request follow-up with TIP cases. They also assist the TIP Coordinator with collating the data to prepare the annual outcome report.

Personnel

Staff in the Truancy Intervention Program have received extensive training in cultural competency, social justice, and trauma response in preparation for youth impacted by societal and personal changes due to COVID-19. Currently, both attendance facilitators are either retired Juvenile Probation officers or have worked in the Juvenile service system, with collectively over 50 years of experience working with at-risk youth and interacting with school personnel. Eaton RESA also encourages and recruits minority candidates for open positions as applicable, and are an EEOC employer and educator.

TIP Budget Detail:

DESCRIPTION: Truancy Intervention Program 2022-23

October 1, 2022 - September 30, 2023		Subtotals
Salary		
Prevention Supervisor .05 FTE (Kimberly Thalison)	4,925.00	
Clerical Support .30 FTE (Laurie Marshall)	14,814.00	
Prevention Specialist .55 FTE (Harriett Dean)	41,113.00	
Attendance Facilitators:		
431 case management hours @ \$22/hr	9,000	
		\$69,852.00
Fringe Benefits	46,335.00	
Retirement (36.88%)		
FICA (7.65%)		
Health and Other Insurances		
		\$46,335.00
Travel		
Conference Attendance & travel @ .585/mile	2,500.00	
		\$2,500.00

Supplies

Copying, paper, postage and other supplies	400.00
Youth Incentive supplies	2,600.00

\$3,000**Contractual**

N/A

Subtotal**\$118,447.00**

ERESA indirect Rate 6.06% (2022 State approved indirect rate) (Business Office, technology, facility, maintenance. This will be adjusted in July of 2021 when the new rate is negotiated)	7,514.00
---	----------

\$7,514.00**Total Costs****\$131,500.00****Budget Explanations**

Budget figures reflect maintenance of current level of staffing, supplies, and travel needed to adequately support referrals to the TIP Program. It is anticipated that we will end 2021-22 with similar students/families served than the previous year and with similar levels of intervention needed, and we expect this level to continue into 2022-23. Our ability to intervene early and to avoid the necessity of filing petitions depends on having staff deployed in the county to work with schools, students, and families early in the school year to correct the problems that are causing truancy. We are requesting the same amount of funding as we have in previous years to sustain current levels of programming.

Intended Outcomes and Evaluation Plan

The goal of TIP is to have every truant student return to school with increased regular attendance upon successful completion of TIP. Secondary gains would be an increase in each TIP student's academic success and a decrease in discipline referrals. Additional secondary gains would be an increase in parent involvement of former truant students to assure regular school attendance and an increase in the perception of value for students, parents, and community in regular school attendance. Schools have the ongoing responsibility to be inviting places for students to attend and for their families to want to be involved.

Outcomes will be measured by collecting data on unexcused and excused absences, unexcused and excused tardies, grade point averages, and in-school and out-of-school suspensions for each student participating in TIP. Data will be compared for the 45 days prior to TIP involvement and 45 days post TIP involvement.

For the youth participating in the TIP program, we will expect a 45-50% reduction in unexcused absences and tardies and a 45-50% decrease in excused absences and

tardies. We will also expect a natural increase in average grades for the youth participating in TIP.

A report has been presented annually since 2003 to all Eaton County Superintendents, the Eaton County Board of Commissioners, and the Human Services Collaborative. The report contains outcome data on TIP participants related to attendance and tardiness.

Summary

Since 2002, in collaboration with the local school districts in Eaton County, the Eaton County Juvenile Court, the Eaton County Prosecuting Attorney, and the Eaton County Counseling Center, Eaton Regional Education Service Agency has been providing a comprehensive truancy program for youth who are at risk of academic failure due to poor attendance. That has evolved, adapted, and implemented successfully despite the challenges of COVID-19 and changing school structures. TIP offers young people an opportunity to get back on track at school and reach their fullest potential. We respectfully request continuation funding for 2023-2024 for the Eaton County Truancy Intervention Program in order to provide the staffing levels needed to maintain successful outcomes. Program data in previous years indicates that while fewer students are chronically absent or truant due to outreach and early intervention, those who are chronically absent or truant are so at a much greater amount and with greater risk factors.

Request for Proposal
Eaton County Board of Commissioners
Juvenile Treatment and Prevention Services Program
From the Capital Area College Access Network
May 26, 2023

The Capital Area College Access Network (CapCAN) mission is to increase the postsecondary attainment rate of citizens particularly those who are low-income, first generation, and students of color from Eaton and Ingham counties. This is accomplished through a community collaborative network dedicated to developing a college going culture and school-based support for college readiness, participation and completion. Eaton stakeholders joined the CapCAN Board of Directors in May of 2018 to collaborate and leverage resources across the region.

CapCAN supports all five of the public high schools and Relevant Academy in the Eaton RESA service area with college advising. CapCAN also takes referrals from the Juvenile Court to provide college and career coaching to students who are court involved. In February 2023 nearly 300 ERESA juniors participated in an in-person college and career fair, over 350 students participated in college knowledge presentations, and nearly 500 students had one on one meetings with college advisers. As of April 2023, 44.2% of seniors have completed their FAFSA with support. Relevant Academy, Maple Valley, Pottersville and Eaton Rapids high schools have permanent college advising services. Grand Ledge, Charlotte, and Eaton RESA Career Center received postsecondary guidance from the CapCAN Program Manager. Two court-involved students were referred to receive one on one college and career coaching, and the court-involved students in the Eaton RESA classroom received information about the coaching services.

This new proposal will cover the 2023-24 school year.

Target Population

Approximately 1,000 high school students in Eaton RESA will receive college advising services. Court-involved graduating seniors and young adults will be referred to receive one on one college and career coaching services. As the age is implemented in Michigan, the population of court-involved students will continue to grow.

Program Description

CapCAN works among our network of high-quality strategic alliances in business, education, community and civic organizations in the region to build the college access infrastructure and systems necessary to support Eaton youth and families through the postsecondary process to achieve degree or credential attainment. CapCAN's focus on post-secondary attainment is directly aligned with the focus on prevention, basic needs and economic development of Eaton County youth by enhancing their educational and economic opportunities. As the impact of learning loss from the pandemic is felt across the community, fewer students have proceeded directly into postsecondary education.

CapCAN provides a wide- array of college and career navigation services to youth in Eaton County to prevent juvenile crime and recidivism, and support college attainment and talent development. CapCAN supports a team of college advisors and consults with the high school counselors to assist juniors and seniors in local high schools and the ERESA career center to:

- Create a college-going culture
- Provide postsecondary navigation including college and career planning, FAFSA financial aid and scholarship completion, and
- Implement an array of events including college tours, career-focused college fairs, and knowledge seminars.

Seniors will receive one on one postsecondary advising services. Juniors and seniors will be eligible to participate in college and vocational visits and will be encouraged to participate in college and career fairs, admissions visits, and open houses. The entire high school student population in the Eaton RESA service area will receive post-secondary educational information in the form of classroom presentations, parent and student workshops, participate in a career-focused college fair, and access online and social media resources.

Court-involved students referred by the Trial Court- Family Division will meet either in person or virtually with CapCAN's Pathway to Potential College and Career Coach. The Coach will conduct a needs assessment and meet with students to determine their college or career plan and facilitate transitional referrals to community services including Capital Area Michigan Works, Michigan Rehabilitation Services, and other relevant partners. The population of young adults, age 16-25, disconnected from work or school, continues to grow as raise the age is implemented. CapCAN will host one in-person resource fair in Eaton County, called the LaunchPAD, to reconnect with these young adults and start a referral process with the college and career coach.

CapCAN will expand targeted outreach and engagement activities for students with IEP or 504s who participate in special education with Eaton RESA to support their postsecondary transition. CapCAN continues to implement FAFSA Flocked an initiative to support financial readiness, including increasing FAFSA completion and Tuition Incentive Program Verification for Medicaid eligible students. CapCAN has recruited Eaton students to participate in its 2023 summer College Ambassador program. These students will be trained as peer ambassadors in their schools and community programs to foster postsecondary exposure and exploration. The students will visit the 5 regional colleges and take a trip to visit the 3 universities in the Upper Peninsula.

Budget and Staffing

Staffing Plan: CapCAN's School Liaison/Program Manager, Ashley Justice, supports the college advisers and school counselors within Eaton RESA. Ms. Justice will provide additional college advising support to Eaton RESA Career Center and the special education population to increase college readiness. She will assist the counseling teams to provide college access support including college and career workshops, application assistance, and FAFSA completion for Grand Ledge and Charlotte High Schools. She coordinates our virtual access touchpoints including the Launch Your Dream career-focused college fair, workshops, and advising.

The Pathway to Potential Initiative (PPI) College and Career Coach works with disconnected youth, age 16 to 25, including those youth who are court-involved, to assess their college and career goals and needs, and facilitate transitional resources to help the young adults be successful reengaging with work or school. The PPI coach, Jeffrey Dole, is a retired high school teacher, work-based learning coordinator, and K-12 administrator. Mr. Dole is supervised by Jonathan Rosewood, who joined CapCAN as its Outreach and Engagement Associate in the fall of 2022.

Executive Director, Michele Strasz, provides strategic vision and administration of CapCAN. She has over 30 years experience designing and implementing community-based programs in child welfare, prevention, and school-based services.

Detailed Program Budget: CapCAN is requesting \$10,000 from the Eaton County Commission to be used as matching funds for contributions from Eaton RESA (\$50,000), the General Motors Foundation, (\$75,000) and local school districts (\$5,000) to support the College Adviser dedicated to serve at Potterville and Eaton RESA Career Center for the 2022-23 school year, and grow Pathway to Potential services for young adults in Eaton County Juvenile Court.

(See budget detail attached)

Intended Outcomes and Measures

The overarching goal of the Capital Area College Access Network is to increase college attainment in Eaton County to 60% by 2030. The college attainment rate continues to increase from 38% in 2018 to 43.3% in 2022 of adults, age 25-64, who have obtained a postsecondary degree or credential. The talent crisis in Michigan has been exacerbated by COVID-19 with an aging population and lack of qualified candidates in key industries in the capital area such as advanced manufacturing, insurance, health care and information technology. The state estimates that 70% of all jobs require a postsecondary degree or credential. The Eaton County college readiness and attainment rates are lower than the state average. Seventeen percent of Eaton RESA students who attended college in 2021 needed remedial education. Forty-three percent of the Class of 2021 enrolled in post-secondary programs within 6 months after high school (decline of 3%),

including only 26% of graduates who received free and reduced lunch. After 6 years among the Class of 2015, 40% have some type of degree or credential, and 52% have dropped out or have never enrolled in postsecondary education.

Intended Outcomes:

1. Increase the percentage of high school graduates who enroll in post-secondary educational institutions or credentialing program within one year of graduation.
 2. Increase college advising capacity in area high schools to create a college going culture.
 3. Raise awareness of the community about programs and services that will increase college readiness, participation, and completion.
 4. Reduce the number of young adults, age 16 to 24, who are disconnected from work and school.
 5. Increase financial readiness and capacity of rural residents to pursue post-secondary education.
- Objective 1:* Increase FAFSA completion and reduce verification
Objective 2: Increase utilization of the Tuition Incentive Program (TIP) by rural low-income students

How is program success measured? The college advisers and counselors track the:

1. Number of students who have submitted 1 or more college applications
2. Number of families who have submitted FAFSA financial aid forms
3. Number of students who have received 1:1 college and career advising
4. Number of students who have committed to attending a post-secondary institution at the end of the school year.

As of May 3, 2023, the three college advisers at Potterville, Eaton Rapids, Maple Valley and Relevant Academy reported that:

Total number of one on one advising sessions: 223

FAFSA completion: 44.2%

Eaton RESA students attended career-focused college fair: 300

Percent of seniors who enrolled in college within 6 months of high school graduation: 43%

Respectfully submitted,

Michele Strasz

Capital Area College Access Network

Executive Director

strasz@capcan.org

517-712-2014 cell

www.capcan.org

CapCAN Executive Committee						
Budget planning and comparison 2023-2024						
	3/31/2022 FYE	Budget 12 month 2021/2022	3/31/2023 FYE	Budget 12 month 2022/2023	Budget 12 month 2023/2024	
Revenues						
Grants (MCAN)	12,500	25,000	12,500	25,000	25,000	
School District Contributions						
Holt Schools	5,000	5,000	5,000	5,000	5,000	
Ingham ISD - Career Center	10,000	10,000	25,000	25,000	25,000	
Lansing School District	25,000	25,000	30,000	25,000	30,000	
Stockbridge Area Schools		3,000	6,000	3,000	3,000	
Waverly Community Schools	5,000	5,000	5,000	5,000	5,000	
Webberville Schools		2,000	2,000	2,000	2,000	
Pottersville Schools	2,000	2,000		2,000	2,000	
Dansville Schools	2,000	2,000	2,500	2,500	-	
East Lansing					7,500	
Lansing Community College	10,000	10,000	10,000	10,000	10,000	
Davenport University			1,100			
Lansing School District contract School Climate			7,000			
Launch Your Dream (College Fair)	19,300	10,000	500	10,000	2,500	
Eaton RESA Educational Contract	52,500	55,000	50,000	55,000	55,000	
College YAC Fund	2,000	3,500		2,500	2,500	
Non-School Grants						
MSU FAFSA - Student Activities (MSUFCU)	2,500	2,500	4,000	2,500	4,000	
RE Olds Foundation		500		500	500	
Pentecost Foundation	6,800	10,000	10,000	10,000	10,000	
LEAP	15,000	5,000		5,000	-	
Other Funders	7,500	21,500	4,270		3,000	
NCAN			30,000	30,000		
CRCF: Student Activities		3,500	2,500	2,500	-	
Lansing Exchange	1,000	1,000		1,000	1,000	
Eaton County	6,000	10,000	10,000	10,000	10,000	
Lansing Promise	10,500	10,000		30,000	30,000	
Ingham County	2,500	6,500	3,750	10,000	7,500	
CAUW - GM Foundation	140,000		150,000	75,000	75,000	
UpLift our Youth	2,000	1,000	3,000	2,000	3,000	
Rathbun Agency				500	500	
Paycheck Protection Program	28,240					
UWSCMI Cap Area Allocations				7,500		
Individual Donations	148	2,000	150	2,000	2,000	
Workplace Pledges	5,770	1,500	875	1,500	1,500	
Endowment Distribution	1,368	1,420	7,787	3,000	7,800	
Total Revenues	374,626	233,920	382,932	365,000	330,300	
Expenses						
Total Salaries & Wages	97,311		119,988			
Payroll Taxes & W/C 8%	11,181		8,744			
Group Insurance	22,594		25,768			
Retirement	3,509		11,999			

	3/31/2022 FYE	Budget 12 month 2021/2022	3/31/2023 FYE	Budget 12 month 2022/2023	Budget 12 month 2023/2024	
CapCAN Executive Director Salary		70,000		75,000	38,784	
Exec Dir: Payroll Taxes & W/C 8%		5,600		6,000	3,103	
Exec Dir: Group Insurance		16,428		19,780	10,893	
Exec Dir: Life & LT Disability		1,526		536	277	
Exec Dir: Retirement		4,900		7,500	3,878	
Allocation for 1/3 Non-CapCAN Responsibilities				(36,236)		
Eaton County RESA: Exempt Associate		42,722		48,000	50,568	
Eaton County RESA: Exempt Associate Ret Option		1,269				
Eaton County RESA: Payroll Taxes & W/C 8%		3,426		3,840	4,045	
Eaton County RESA: Group Insurance		4,172		5,303	5,622	
Eaton County RESA: Life & LT Disability		959		343	343	
Eaton County RESA: Retirement		880		4,800	5,057	
College Access Engagement Associate				41,470	44,038	
CAE Associate: Payroll Taxes & W/C 8%				3,318	3,523	
CAE Associate: Group Insurance				5,000	9,272	
CAE Associate: Life & LT Disability				296	296	
CAE Associate: Retirement				4,147	4,404	
CapCAN Computer Depreciation 2021-06-30	220	220		220	220	
Career Advisor Independent Contractor	19,400	25,000	14,900	15,000	15,000	
VISTA member (3 x \$9,500 Budget)	28,213	34,000	36,291	28,500	30,000	
Collier Consulting for DEI	2,000	2,000				
CapCAN Advisors			8,925	25,000	-	
College Advisors			19,500			
MSU College Advisor - Holt	15,000	15,000	15,000	15,000	15,000	
MSU College Advisor - Waverly	15,000	15,000	15,000	15,000	15,000	
MSU College Advisor - Webberville/Other	12,000	15,000	15,000	15,000	15,000	
MSU College Advisor - Everett	15,000	15,000	15,000	15,000	15,000	
CapCAN Computer & Equipment Supplies	785	220	2,845	1,000		
Electronic Communication	2,415	500	823	500	750	
Marketing: Public Relations & Media		15,000	2,885	5,000	6,000	
Summer College Advising	3,500	3,500	6,500	1,500	500	
Meals, Travel & Conferences	419	1,500	10,134	2,000	4,000	
Print materials	817	1,000		1,000	1,000	
Student Activities & UP Trip	6,400	10,000	5,536	10,000	25,000	
Focus Group		1,500		1,500	1,000	
Launch Your Dream	6,470	9,000	2,390	5,000	2,500	
Total Expenses	258,843	315,322	337,228	345,317	330,073	
Total Revenues	374,626	233,920	382,932	365,000	330,300	
Total Expenses	258,843	315,322	337,228	345,317	330,073	
Indirect Costs 5%			19,147	18,250	16,515	
Increase (Decrease) in Net Assets	115,783	(81,402)	26,558	1,433	(16,288)	
Prior Year Excess Net Assets	(15,782)		100,000			
Increase <Decrease> in Net Assets	115,783		26,558			
Net Assets Available for following year	100,000		126,558			

Juvenile Justice Application

Target Population:

Shared Housing Intervention Program (SHIP) is collaborative program seeks to assist those households who are couch homeless (living from place to place) with children who are also struggling with chronic poverty and constant mobility necessitated by their homeless status. Priority will be given to households with school aged children whom, under the McKinney-Vento Act, are not eligible for relocation funds by the Department of Housing and Urban Development.

McKinney-Vento Grant Coordinator reports that during the 2022-2023 school year, more than 570 students in Eaton county were documented as Department of Education homeless with the majority being doubled up in shared housing living situations. We are projecting to work with 35 families (123 people) in our SHIP Juvenile Justice program for the 2023-2024 school year.

The collaboration is between 3 agencies. Housing Services Mid Michigan (Eaton & Clinton), Advent House Ministries (Ingham), Child & Family Charities (all 3 counties: Youth financial literacy).

Program Description:

This program will work with these couch homeless households to develop strategies to increase financial stability which will include case management, a housing agreement with the host family to enable the couch homeless family to remain with the host family until they can move to a permanent housing solution, financial education for both the parents and the youth (teens and young adults), connections to housing search assistance, first month's rental assistance without becoming HUD homeless (HUD homeless definition requires the family to enter the shelter system or be living in a non-habitable location such as on the street), advocacy, linkages to medical and mental health services for the whole family, referrals to all helping agencies based on the families' needs and when applicable, assistance with SSI applications.

This application is to request funds that support stable housing for at-risk juveniles. Any amount of funding would be accepted and assist in this matter.

To achieve all of these aspects, this program will include the following:

- a) strength-based, trauma informed case management
- b) the development of a housing agreement with the host family which will create a plan for the immediate need of housing until they can locate their own safe and affordable housing
- c) interfacing with the host families' landlord to ensure evictions do not occur due to lease violations or overcrowding
- d) provide financial education for both the parents and young adults
- e) individual and group literacy meetings that discuss employment "soft skills" of time management, conflict resolution, communication, taking direction from management, working as a team with coworkers, etc

- f) connections to caring mentors for youth and young adults
- g) making connections to housing search assistance
- h) providing first month's rent assistance without the household becoming HUD defined homeless
- i) advocacy
- j) creating linkages to medical and mental health services for the whole family
- k) offering referrals to all helping agencies based on the families' needs
- l) assistance with SSI application as applicable
- m) helping youth and the parents understand the benefits of staying in school
- n) providing youth specialists to communicate with the youth to focus on specific needs such as education, financial literacy and employment readiness

Evidenced-based methods to achieve these program outcomes will include:

The overall program design is based on known protocols from HUD for the literally homeless population which reports on efficacy through white-papers, University studies, national focus groups and national surveys. These strategies will be modified for this population.

The program will collect data in order to measure metrics' outcomes and will monitor the outcomes at monthly staff meetings which will assist with any adjustments to program aspects as necessary. Attention is made to ensure an-duplicated count is produced which can assist us with the numbers of persons served and demographics for future reporting.

The financial literacy component of this grant will use evidence-based approaches that have been piloted, field-tested, deemed efficacious and used nationally for over three decades. The materials were created by experts in the field of independent living for use with foster care and emancipated youth. The financial literacy curriculum for this program is from these known sources and can measure outcomes.

These outcomes will be monitored on spreadsheets as Child and Family Charities uses pre and post financial literacy tests to measure outcomes. Housing Services Mid Michigan and Advent House use surveys to measure these financial outcomes.

School achievement rates have been benchmarked by the University of Michigan's "Poverty Solutions" study by Jennifer Erb-Downward. Ms. Erb-Downward offers a collection of information about the "couch-surfing" youth's educational outcomes including the lack of engagement at school. School engagement is measured by attendance. Her information states that Eaton County's youth, in this category, have a reduction in school engagement of 28% over non-homeless youth, and that Ingham County has a 45% reduction over non-homeless youth. These facts point to why this program will engage parents with the importance of school attendance as well as the youth themselves. This program initiated with the local McKinney-Vento School Liaison reaching out to the agencies participating in this partnership to increase school attendance, family stability, and general welfare of her identified couch homeless students.

Additionally, other research by the Federal Department of Health and Human Services indicates that homelessness is the highest precursor to drop out rates over special education, disability or other issues. This fact alone begged for this intervention.

The program's implementation plan is heavily reliant on collaboration between the host, couch homeless family and supporting agencies/community partners. The impact of this program will be to provide financial literacy to a population that faces severe financial crisis and whom invariably end in homelessness. For the majority of the families in this situation in our area they end up sharing housing with relatives or friends. Although the general public may consider these families homeless, they do not meet the Federal statute literally homeless definition and they find themselves in a housing crisis with little or no assistance. This project proposes to assist them to resolve their financial instability by offering financial education, life skills training and specific housing interventions.

The following methods proposed for this project to achieve the short term goals include:

- a) Child and Family Charitie's case managers, who specialize in working with youth, and Advent House and Housing Services Mid Michigan's case managers will work with the parents, to provide literacy education in either group or one-on-one settings to improve financial decision making skills. The youth and parents will learn how to manage money they currently have and how to make positive decisions with their future earnings based on knowledge rather than shortsightedness, which is often reactive to a crisis.
- b) Creating a host family agreement to provide immediate housing stability and decrease couch surfing and frequent moving. This may include interfacing with the host families' landlord
- c) Reviewing the current economic situation and creating an immediate survival budget to meet the bare minimum needs of the present situation
- d) Resource connections to all helping services to assist with immediate stability: child care, food stamps, health care, mental health care, transportation, employment services and SSI application process when applicable

Mid term goals include:

- a) Increasing the parent's knowledge of the impacts of homelessness on their children and the benefits of their children staying in school
- b) Motivating parents to raise expectations and support for their children to graduate from high school
- c) Decreasing barriers to consistent school attendance
- d) Providing the parent's support for them to complete their own education
- e) Providing employment skills connections for adults and youth for them to increase their income
- f) Developing a housing budget that provides stability over time and includes learning how to track expenses, understanding credit and beginning to practice a life plan that has a balance between "needs and wants" to help families budget in a realistic way. Teaching

parents and young adults how to prioritize expenses with basic needs being met before recreation

- g) Increasing consumer education, financial literacy and connection to all available supportive resources

Long term goals include:

- a) Identifying each families' housing goal and associated resources to create long-term stability
- b) Linkages to helping agencies including medical and mental health services which lead to better health outcomes
- c) Referrals for specific needs which can result in these special needs being met and improving functionality
- d) Assistance with filing SSI claims, if applicable, which can lead to increased income stability
- e) Increased high school graduation rates and participation in educational opportunities for the whole family. Research has demonstrated that homelessness is the highest precursor to poor school performance above being in special education, having a disability, one's race or ethnicity or any other category. Homelessness can dictate future accomplishments
- f) Self-Advocacy improvement: the family knows how to successfully utilize community resources to prevent housing crises

Housing Services Mid Michigan's role in this collaboration includes the following:

- a) Provide a case manager to this population for Eaton County
- b) Supervision of this case manager
- c) Collect data and perform outcome evaluation for program improvement
- d) Run and submit CAUW reports
- e) Working with Advent House and Child and Family Charities to design the workflow and the housing agreement
- f) Monitor the workflow
- g) Act as a liaison to the Eaton school district McKinney-Vento program managers to ensure couch homeless family referrals are working to the benefit of both entities

Budget/Staffing:

The key community stakeholders are the two McKinney-Vento grant recipients, Eaton RESA- which has the Federal grant to cover the Eaton County School Districts and the Lansing School District which has this same Federal grant to cover Ingham County School Districts. These community stakeholders will be the source of the referrals to the program.

Other partners will include DHHS, MYOI- youth aging out of foster care, utility assistance programs, churches for donations, banks and credit unions, Michigan Works, Peckham, CMH, MSHDA Housing Choice Vouchers and Legal Services of South Central Michigan. These

partners will be used to provide their specific programs, funding, or services for those enrolled in this program.

HSMM has been working on homeless prevention in a variety of ways since its inception (1995). The Executive Director has 20 years of experience working at HSMM in various roles that have included hands on management of most programs. HSMM has been sought out to be the lead for many initiatives, which speaks to its standing in the community. These various initiatives include: MSHDA's Emergency Solutions Grant- which requires HSMM to monitor other recipients, and where the agency is the Housing Assistance Resource Agency or HARA, for both Eaton and Clinton Counties; it manages the MSHDA Homeless HCV wait list in both Eaton and Clinton; it is the lead agency for the Eaton CoC-HUD Homeless application- a very competitive federal grant application. Additionally, the agency was awarded and maintains Tri-County Area Street Outreach grant. This program provided a venue to create greater collaboration in the Tri-County area concerning outreach efforts. When HSMM received this award, there were several smaller outreach efforts by several agencies. HSMM pulled all of these small groups together to create a Tri-County Outreach Team. This initiative then partnered with the shelter system for after-hours shelter entry and increased the capacity of the small, unorganized, groups for greater impact.

The overall Collaborative SHIP Program has experienced several cuts in funding over the past few years. Almost half of the budget for staffing was reduced in 2022. HSMM was able to keep staff in Eaton county but other counties involved has felt the hit by having to reduce staff. This makes this application for funding even more necessary for the longevity of the program. (see detailed budget)

Intended Outcomes & Measures:

This collaboration will achieve its outcomes using the following protocols, strategies and initiatives:

FSG1-B. Obtain and maintain financial health-

Case managers will work with the family units on financial literacy by developing a financial goals plan. Components of the financial literacy plan will include budgeting, reducing debt, banking resources, and entitlements. Materials such as “Smart Money” from FDIC, “Saving Our Futures,” a financial literacy curriculum for youth, and the Daniel Memorial Life Skills assessment tool, and Flagstar Bank materials will be utilized in both group and one-on-one sessions for financial literacy goals. Additionally, local resources to reduce debt, free credit reports, utility bills, medical bills, rent arrears from past subsidized housing, and student debt, which are barriers in securing affordable, permanent housing will be used to assist with financial literacy and self-advocacy skills.

FSG1-C Adequate and sustainable resources to support their needs-

Case managers will assist adults and youth (16 and above) in the project by first recognizing gaps in basic employment skills, then making referrals to specific employment assistance resources which can assist with resume' writing, basic interview skills, and job placement

assistance. Case managers will teach and role model valuable “soft skills” for employment stability. Case managers will follow up with the clients to ensure elimination of any barriers particularly through referrals and assist with connections to entitlements to increase household incomes with both cash and services.

FSG2-A Maintain safe and stable housing-

By building on our combined experiences (over 50 years) with the literally homeless population we will assist this couch-homeless (“couch surfing”) population by using many of the same strategies which have successfully assisted the homeless population. These strategies include:

- a) providing strength-based, trauma informed case management
- b) developing a housing plan with action steps
- c) using our established relationship with landlords
- d) using our long standing partnerships with helping agencies to provide a variety of services
- e) using our established relationship with the McKinney-Vento representatives from the local school districts for direct and immediate referrals
- f) exploring the use of the "housing agreement" with the host family so as to immediately stabilize the household where there are. This step eliminates the multiple moves this population experiences, ie: the burning bridges effect
- g) providing immediate housing search assistance and move in assistance when a household cannot stay with the host family
- h) providing follow- up to ensure stability
- i) teaching financial literacy, ie: realistic information which is usable and skills that can be used immediately
- j) referring to job search assistance, such as referrals for specialized job readiness and placement assistance
- k) accessing income supports assistance, ie: SSI application assistance, State Emergency Relief application assistance, MRS referrals, and specialized employment support assistance programs such as Peckham or Veterans

FSG2-B Access to essential life-sustaining needs-

Case managers will make all of the necessary referrals to the appropriate helping agencies, which may include:

- a) direct assistance with food, clothing, personal needs (items not covered with food stamps)
- b) access to transportation assistance- mostly in the form of bus tokens
- c) referrals to mental health services and medical services
- d) access to donated or other free furniture
- e) information about community activities that may provide assistance- such as the mobile food banks, community gardens, free clinic workshops, back to school events, activities teaching life-skills, Veterans Stand downs to enrich and provide necessities
- f) payments to landlords for those who find housing from the direct financial assistance funds in this application or with other funds from HSMM or Advent Housing Ministries

HSMM will provide leadership to ensure accountability in the following ways: the administration of this program will mirror that of the PATH Tri-County Outreach Team processes that have been very successful. It is important to note that the PATH Tri-County Outreach Team already includes the members of this collaborative grant application. The procedures already in place that will assist in the monitoring of this partnership include a strong team approach with regular meetings to ensure the flow of information. These regular meetings where case managers can meet will ensure all families' needs are met. Case managers can share resources with each other, work out the "bugs" in the program design, and share and review data across the program. Frequent and regular data analysis will ensure outcomes are on track or prompt program modifications are put into place. And, HSMM will monitor the partners stated benchmarks and compare quarterly. When issues arise in these comparisons, discussions will occur with that partner to determine the necessary changes to meet the benchmarks. Also, using best practices as a standard, HSMM will monitor staff training for both general and specific trainings to increase all staff's abilities and will hold case managers accountable for using best practices.

Children and their families require guidance from experienced case managers using evidenced-based practices and experiences we have gained in resolving issues of homelessness in our local community. Since this population has not "grown-up" with financial literacy as a skill in most cases, these skills must be taught through concrete experiences provided in a non-judgmental supportive environment which this program provides. The metrics selected for increasing financial literacy were based on these premises, that improving basic skills increases establishing financial goals and the abilities to improve family stability. The goal is to have 100% of those involved in the program improve their basic financial skills or knowledge. Other ways this program will meet its metrics selections regarding those receiving financial assistance and increasing community resources will include:

- consistent case management team that creates a wrap-around of services with each client
- direct financial assistance payment to the landlord for those who find affordable, safe, and appropriate housing
- robust referrals to meet the needs of the individual households following intake and assessment
- follow up services as needed to ensure needs are met

This project will impact the overall community and client by providing a venue for new, not currently offered services. As stated earlier, this population does not qualify for many of the HUD literally homeless services and is severely under-served. By providing these opportunities, this program will positively impact the entire community by increasing economic stability and safe housing for a significant number of families and children. Educational outcomes for the youth will positively impact the region's future as greater numbers of youth will graduate. More youth and their parents will gain long term financial literacy skills to solve and resolve their own financial situations. These skills can prevent financial hardships through proactive financial planning rather than being reactive.

Juvenile Justice Budget 2023-2024
2023 Grant Application - Budget

Project Title: Shared Housing Intervention Program
Applicant Organization: Housing Services Mid Michigan
Contact Name: Christie Harry

Phone: 517-541-1180

PROJECT BUDGET

Line Item	Description/formula used:	JJ funding request	Secured Other Funding	Project Total
Salary/wages	case management 1.5 FTE plus benefits	21,000.00	32,205.00	53,205.00
Travel/Mileage	.55 per mile 980 miles per year for unit inspections x1.5		809.00	809.00
Copying/Printing		300.00	175.00	475.00
Project Supplies (describe)	Paper, files,	300.00	500.00	800.00
Administrative/Overhead	Cost of administering the program: phone, internet, space, etc.	1,400.00	3,000.00	4,400.00
				-
OTHER COSTS (please list):				
direct financial assistance funds	funds paid directly to landlords and/or utility companies to prevent evictions	7,000.00	35,000.00	42,000.00
misc client supports	gas cards, bus tokens, ID's and birth certs			-
marketing & communications	printing, cell phone, website, social media			-
				-
TOTALS		30,000.00	71,689.00	101,689.00
	Percentage of Project Costs	29.50%	70.50%	100.00%