# 2022 COMMUNITY NEEDS ASSESSMENT SURVEY REPORT

PREPARED BY:
MIKE BACH, ASSOCIATE DIRECTOR
COPPER COUNTRY MENTAL HEALTH SERVICES

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#### INTRODUCTION

#### **Survey Purpose**

Copper Country Mental Health Services (CCMHS) conducted a community needs assessment survey in early 2022. The purpose of the survey assessment was to:

- Identify stakeholder perceptions of community mental health needs (every two years)
- Prioritize the identified community mental health needs
- Determine Copper Country Mental Health's role in responding to the identified needs
- Fulfill a Michigan Department of Health and Human Services (MDHHS) certification standard that requires community mental health boards to annually assess community mental health needs

#### Methodology/Procedures

**Instrument:** An open-ended survey format developed by The Standards Group (TSG)<sup>1</sup> and recommended by the Michigan Department of Health and Human Services (MDHHS) and the Community Mental Health Association of Michigan (CMHAM), was utilized (see page 3).

**Procedure:** The survey was made available on Survey Monkey, and the link to the survey was emailed to stakeholders throughout the agency service area, which includes Baraga, Houghton, Keweenaw and Ontonagon counties. The stakeholders were chosen to represent the following areas: justice system; education; primary healthcare; the Michigan Department of Health and Human Services (MDHHS); private mental health and substance abuse provider organizations; public health; and consumers/advocates.

In addition to the survey mailing to stakeholders, the surveys were made available to CCMHS consumers in the waiting rooms of the clinics in all four counties. The link to the survey was also available on our webpage. Completion of the survey was voluntary.

The results of this report will be reviewed by the CCMHS Management Team and the Board of Directors. Program decisions and actions resulting from the issues addressed in this survey report will be determined by these groups. The report will be made available to the public on the CCMHS website and printed copies will be available in each CCMHS clinic. A letter containing a summary of the results will be emailed to the original mailing list of stakeholders.

**Response Rate:** A total of 97 stakeholders responded to the survey, including 32 consumers. This year, respondents could choose more than one answer to each survey question, so

<sup>&</sup>lt;sup>1</sup>A joint effort of the Community Mental Health System, the Michigan Department of Health and Human Services, and the Community Mental Health Association of Michigan to work with consumers and advocates to provide focused attention to the development of recommendations for uniform and consistent administrative, programmatic and business practice standards for state-wide use in serving persons with mental illness and/or developmental disabilities and/or substance use conditions.

percentages add up to more than 100%. In addition, some responses were added and others were deleted.

# STAKEHOLDER SURVEY

# COPPER COUNTRY MENTAL HEALTH SERVICES Community Needs Assessment

#### COMMUNITY STAKEHOLDER SURVEY

Please provide us with the following information:				
1. <u>) Name</u> (optional):				
2. <u>) County</u> circle all that apply	: Baraga	Houghton	Keweenaw	Ontonagon
3.) Stakeholder Category circ	le only one that best	applies to you:		
Justice System Educat	ion (private or public	e) Prima	ary Health Care	
Private Provider (mental healt	h & substance abuse	e services)	MI Departme	nt Human Services
Public Health Department	Consumers/Advoca	tes		

- 1.) What do you see as the most significant mental health needs currently <u>not</u> being addressed in our community?
- 2.) What trends have you identified that Community Mental Health should be aware of?
- 3.) Based on what you have shared, please identify the top <u>three</u> concerns/priorities.

#### **SUMMARY OF SURVEY RESPONSES**

1. What do you see as the most significant mental health needs currently not being addressed in our community?

Need	2022	2018	
Local inpatient/outpatient MH programs	64%	25%	
Mental health services for people who do not meet CCMHS	60%	13%	
eligibility criteria			
Mental health services for children and youth	59%	21%	
More access to psychiatry services	53%	12%	
Services to address the increase in substance/drug abuse	34%	10%	
Services needed for depression and anxiety disorders	43%	8%	
Additional mental health services for existing CCMHS clients	NA	2%	
Community education and prevention	37%	2%	
Transportation resources	NA	0%	
Interagency coordination of services	NA	0%	
Other (e.g., services for people with intellectual disabilities; services	NA	8%	
for youth involved in the legal system)			

2. What trends have you identified that Copper Country Mental Health Services should be aware of?

Trend	2022	2018	
Drug and alcohol use continues to be significant	53%	19%	
An increased need for mental health services for children	NA	21%	
The need for mental health services for those who do not meet	56%	12%	
CCMHS eligibility criteria			
Increase in children with depression and anxiety	58%	9%	
An increase in suicide concerns	33%	7%	
An increase in prescription drug abuse	25%	0%	
Need for improved communication	NA	2%	
Need for more inpatient/outpatient psychiatric services	NA	16%	
Education about mental health issues	NA	2%	
Staff shortage	57%	NA	
More youth using marijuana	24%	NA	

# **SUMMARY OF SURVEY RESPONSES**

3. Based on what you have shared, please identify the top three concerns/priorities.

Top Concerns	
More access to mental health services	73%
Need for local inpatient/outpatient programs	NA
More psychiatry access	44%
Mental health services for children 0-18 years old	56%
Depression and anxiety in children	NA
Interagency coordination	14%
Community education and prevention	26%
Increased substance/drug abuse	NA
Need for follow-up services	NA
Need for local inpatient psychiatric beds	49%

# TOTAL RESPONSES BY STAKEHOLDER

Category	Percent of responses
Justice system	9%
Education	25%
Primary health care	8%
Michigan Department of Health and Human Services	2%
Private provider of mental health and substance abuse services	12%
Consumers/Advocates	33%
Public Health Department	3%

# TOTAL RESPONSES BY COUNTY\*

County	Percent of responses
Baraga	23%
Houghton	75%
Keweenaw	11%
Ontonagon	7%

<sup>\*</sup>SOME RESPONDENTS WORK IN MORE THAN ONE COUNTY

#### **SUMMARY**

The results of the 2022 Community Needs Assessment Survey compiled in this report illustrate some of the mental health needs apparent in our catchment area. CCMHS understands and takes very seriously the responsibility to be a primary provider of mental health services in the area. We also understand that meeting the mental health needs of a community requires collaboration and cooperation among community partners.

This summary will address the top five concerns identified by stakeholders and discuss CCMHS's ability and capacity to respond to these concerns. Stakeholders responding to our survey identified the following:

- 1. More access to mental health services:
- 2. Mental health services for children 0-18 years old;
- 3. Need for local psychiatric beds;
- 4. More psychiatric services;
- 5. Community education and prevention.

*More access to mental health services* is the primary concern of stakeholders. Several years ago our funding to provide services to people without Medicaid was severely cut, and we had to institute a General Fund Waiting List (GFWL). Happily, this funding has increased in the last few years, and we currently have only five people on the GFWL. We are also able to provide services to people with MI Health Link who have mild to moderate mental illness.

An area of particular concern is providing Applied Behavior Analysis services to children with Autism. There are other providers we can refer to but, in order to build our capacity, we will be posting for another Board-Certified Behavior Analyst position. We are also looking into the possibility of hiring an additional therapist, so that we can increase the frequency of appointments to people who need it.

It is understandable that many stakeholders are very concerned about *mental health services for children 0-18 years old*. Fortunately, we have been able to serve many children who in previous years would have been put on the GFWL. Through our partnership with a local ISD Project AWARE), we have received many referrals from schools regarding children with mental health concerns. We are able to meet with parents of these children in the school and help them call NorthCare to get into services. We also continue to provide Home-Based services for both prevention and to children at risk of out of home placement.

Regarding the concern for *need for local psychiatric beds*, inpatient treatment capacity is a problem on the state and national levels. We are aware that a local legislator was interested in pursuing funding to create two adult inpatient beds in our area. Unfortunately the process of a hospital building a unit, staffing it, and receiving certification by MDHHS is staggeringly onerous.

Our crisis workers call over 20 hospitals trying to place a person in an inpatient unit. If no hospitals will accept that person, they need to start the entire process over the next day. We will do a better job communicating this work to emergency department staff, understanding that waiting to hear from us can lead to frustration.

The fourth concern was *need for more psychiatric services*. Difficulty recruiting medical students into psychiatry is one factor contributing to a national shortage of psychiatrists. As our staff psychiatrists retired, we were unable to hire new on-site doctors, so we looked to telehealth services. While telehealth is an adjustment for some people, others prefer it.

The current COVID state of emergency has enabled people to receive telepsychiatry services from home, rather than come into one of our offices. We recently did a survey asking people on their satisfaction with telehealth, and many preferred this arrangement because it is more convenient.

**Community education and prevention**. Our Training Institute provides education and prevention through several grants. One area of involvement is in elementary schools, where we provide information on coping skills and improving relationships.

Mental Health First Aid™ teaches participants how to help someone experiencing a mental health crisis. To date we have trained over 300 Mental Health First Aiders, including parents, providers, law enforcement, EMTs, members of the medical community, school counselors and human service providers. We also publish monthly articles in the Gazette about mental health-related topics. As mentioned above, we continue to provide prevention Home-Based services.

In conclusion, CCMHS would like to thank all those individuals who participated in this assessment process. Thank you to our stakeholders who took the time to complete and return the survey. We appreciate your feedback.