

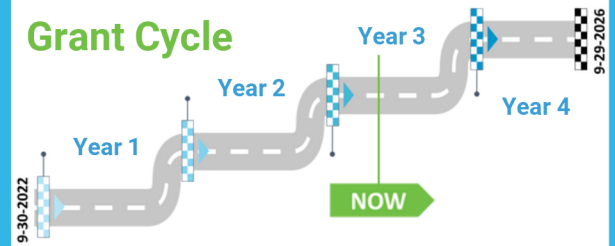
CCBHC Grant Update

In September 2022, Lapeer County Community Mental Health (LCCMH) was awarded a four-year Certified Community Behavioral Health Clinic (CCBHC) Planning, Development, and Implementation Grant through the Substance Abuse and Mental Health Services Administration (SAMHSA). The purpose of a CCBHC is to ensure access to coordinated, comprehensive behavioral health care by prioritizing evidence-based services, quick access to treatment, and care coordination of behavioral health care, physical health care, social services, and other community resources.

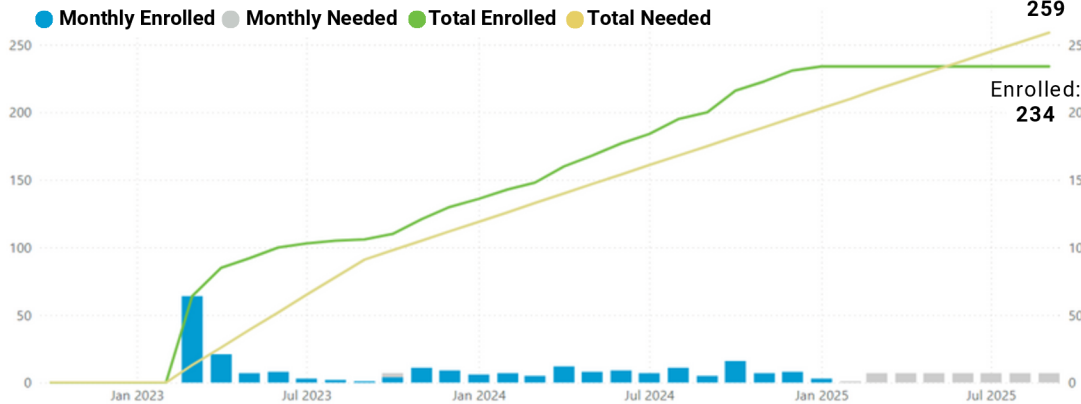
Grant Enrollment

LCCMH is on track to meet the year three grant enrollment goal.

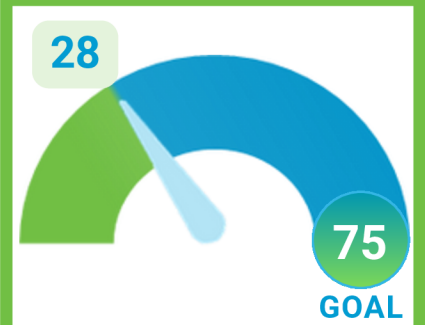
Grant Cycle



Enrollment by Month



Year 3 Enrollment



PROGRAM SPOTLIGHT

CCBHC MID-POINT UPDATE

KEY HIGHLIGHTS

- CCBHC Certification:** Achieved full State Demonstration Certification effective October 1, 2023
- Partnerships:** Strengthened collaborations with Veterans Services, CHAP, MiCAL, and Hamilton Community Health
- Staffing Growth:** Expanded from a minimal number of positions at grant inception to 20+ after certification, with continued growth
- Evidence-Based Practices (EBPs):** Now utilizing 18+ EBPs, including Dialectical Behavioral Therapy (DBT), Parenting Through Change (PTC), and Dialectical Behavioral Therapy - Adolescents (DBT-A)
- Programs & Services:** Enhanced services with SUD treatment, Aging adult services, 24/7 Children's Mobile Crisis, Zero Suicide, Mental Health First Aid, and LOSS
- Process Improvements:** Integrated screening into clinical pathways, closed-loop referrals, data tracking, and data-informed decision-making
- Population Expansion:** Serving mild/moderate populations and accepting underinsured/uninsured individuals

Sustainability & Future Planning

LCCMH continues to strengthen the CCBHC model, emphasizing whole-person care through:

- Integrated Health Committee, Veterans Care Pathway, and Zero Suicide Committee.
- Expansion of EBPs and focus on uninsured populations.
- Data-driven decision-making and strategic partnerships.
- Revenue diversification efforts for long-term sustainability.

Becoming a CCBHC Demonstration site marks a significant step toward long-term sustainability, reinforcing LCCMH's commitment to comprehensive, high-quality care.

Outcomes and Performance

As part of the CCBHC grant, LCCMH is tracking performance on several SAMHSA-required measures, including:

- Clinical Quality Measures
- Program Goals and Objectives
- National Outcome Measures (NOMs)

This quarter, we are highlighting performance on program goals and objectives in year two.

Goals and Objectives

GOAL 1

Increase Provision of Evidence-Based Practices

LEGEND



= Did Not Meet Year 2 Goal



= In Progress



= Met Year 2 Goal

Objectives:

100% of Children's Master Level Clinicians will be trained in IMH, TF-CBT, DBT-A, or PMTO by the end of year 4.



Increase the number of individuals receiving TF-CBT, DBT-A, PMTO, or IMH.



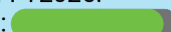
90% of all eligible youth consumers, birth to 17, will receive the MichiCANS upon intake and annually thereafter.



What's Next:

4 clinicians are in the process of a 14-month TF-CBT training, with an estimated completion of January 2026. Ongoing staff training will continue to increase utilization.
Current performance: On track

Reporting is being developed to track performance and monitor progress. The MichiCANS was fully implemented in Q1 of FY2025.

Current performance:  91%

GOAL 2

Increase Screening of Specific Health Risk Behaviors and Documentation of a Follow-up Plan in the EHR

Objectives:

48% of all CCBHC individuals who are 18 years and older will be screened for unhealthy alcohol use at least once within the previous 12 months.



10 LCCMH clinical staff and 5 AICC DCO staff will receive training on the EBP SBIRT. 100% of staff trained in year one will be provided subsequent trainings in upcoming grant years.



What's Next:

Use of the single question screener (MSASQ) is being explored to increase compliance while decreasing staff burden.

Current performance:  76%

Refresher training will be explored in year 3. Potential revision of goal will be discussed due to subsequent training every 3 years.

Current performance:  100%

GOAL 3

Develop Well-Defined Clinical Pathways

Objectives:

85% of all individuals 12 years and older will be screened for depression using the PHQ-A or PHQ-9.



The Columbia suicide risk assessment will be completed for 25% of individuals who have a total score of 15 or greater on the PHQ-9.



What's Next:

A gap analysis will be completed to identify if process changes are needed. Discussions to align with Zero Suicide efforts will continue.

Current performance:  70%

Staff will be educated on the importance of the screener, and workflows will be adjusted to streamline documentation. Discussions to align with Zero Suicide efforts will continue.

Current performance:  22%