



**CENTRAL CITY  
INTEGRATED HEALTH**

**2017 ANNUAL REPORT**





## OUR MISSION

To achieve wellness in the community by providing an array of primary and behavioral health care, housing and substance abuse services with dignity and respect.

## OUR HISTORY

Central City Integrated Health (CCIH) has a long history of providing evidence-based medical and behavioral health treatment and services, in tandem with creating housing, employment and community re-entry opportunities for Wayne County residents. CCIH was founded in the late 1960s as part of the “Model City Neighborhood Program” and incorporated in 1971 as Detroit Central City, a 501(c)(3) private nonprofit agency.

CCIH remains steadfast in Midtown Detroit and now provides fully integrated services to the City’s most vulnerable populations: those recently released from crisis centers, jails, prisons and area hospitals; as well as those who suffer from mental illness, substance use disorders, chronic medical conditions and homelessness.

CCIH advances the City of Detroit’s goal to reduce homelessness by providing permanent, stable housing. CCIH is passionate about the rehabilitation of Detroit buildings into supportive housing, in order to increase the diversity of available housing options in areas with growing development activity and rising rent costs. It works diligently in assisting individuals with long-term homelessness or special needs by providing community-based support services to maintain stable housing.

As a Federally Qualified Health Center (FQHC), CCIH provides comprehensive, primary medical, behavioral health and dental care to residents of Detroit and Wayne County. People are never turned away based on their lack of insurance or inability to pay for services.

## OUR SERVICES

**INTEGRATED PRIMARY AND COMPREHENSIVE BEHAVIORAL HEALTH CARE SERVICES**

**PEDIATRIC CARE AND VACCINATIONS**

**COMPREHENSIVE DENTAL SERVICES**

**FULL BODY WELLNESS AND HEALTH COACHING**

**CHRONIC PAIN MANAGEMENT**

**EDUCATIONAL AND EMPLOYMENT SERVICES**

**PERMANENT SUPPORTIVE HOUSING AND HOMELESS SUPPORT SERVICES**

**SUBSTANCE USE DISORDER TREATMENT**

**PEER MENTORING**

**COMMUNITY RE-ENTRY SERVICES/ JAIL DIVERSION PROGRAM**

**CASE MANAGEMENT AND RESOURCE ASSISTANCE**



## A LETTER FROM OUR PRESIDENT & CEO



Ryan M. Lepper, President & CEO

At Central City Integrated Health (CCIH), our goal, mission and business is wellness. I think it’s important to define “wellness.” For our consumers – who are among the nation’s most vulnerable – wellness may encompass a host of serious and chronic issues that need attention: from homelessness and unemployment to chronic illness and mental health issues.

As our name indicates, we strive to fully integrate our services to treat our consumer wholly and completely. If a family visits our health clinic for medical treatment – and that family is also homeless – it is not just the medical issue that needs treatment, but housing as well. If someone comes to us seeking job training, and an ongoing substance abuse problem is discovered, it behooves us to treat the substance abuse along with our vocational services to better equip him or her to succeed in employment.

CCIH has facilitated some breathtaking transformations in our consumers, and it is due to our constant efforts to fully integrate services. Only with this tapestry of interlocking services are we able to fully serve our consumers. Our acknowledgment in 2017 from the National Committee for Quality Assurance as a “Patient-Centered Medical Home,” recognizes the steps we have taken towards our goal of full integrative care for our consumers.

While other nonprofits serving vulnerable populations are facing declining revenues, CCIH is growing. Our fiscal growth is thanks to our strong partnerships with governmental agencies, corporations, foundations, donors and supporters, as well as our innovative and strategic vision. It is also due to our ability to leverage our resources successfully, whether through the tireless dedication of our staff or issuing a revenue stream from a once dormant asset. It is important, in all we do, to keep top-of-mind that “nonprofit” is merely a tax status, not a business model. We do not shy away from growth opportunities. The more revenue we generate, the more consumers we can reach, service and empower.

We are proud of our progress and we are poised for even more growth. We are expanding our dental services with a new wing that will open this year on Woodward Avenue, which will allow us to serve even more consumers. The site will also house our new pediatric wing to better serve the children of Detroit. We will see the opening of more affordable housing upon the completion of Saint Rita Apartments.

While demographics reflect optimism in Detroit – the rate of homeless and unemployment has decreased – there are still thousands of residents in the city without homes, insurance and/or jobs. Many of our citizens live below the poverty line. They do not, however, live without hope. These are the people we need to reach and educate about our programs and services.

I want to thank everyone that makes this work possible. We look forward to further strengthening the city of Detroit and Detroit families and individuals through the achievement of total wellness.

*Ryan M. Lepper*

President & CEO | Central City Integrated Health

# A LETTER FROM OUR BOARD CHAIR

As Board Chair, it is my pleasure to introduce the Central City Integrated Health (CCIH) 2017 Annual Report. Since I have served on the board of CCIH, I have seen positive progress in our programs, our funding, and the wellness of the people we serve.

This past year, CCIH experienced an especially important year of robust growth as we broke ground on a new dental and pediatric floor, which will greatly expand our services in those primary care areas. We are equally proud of our housing development program, and this past year we gutted, and started the complete rehabilitation of the Saint Rita's building on the City's north end, that will provide an additional 26 affordable housing units when completed.

Clearly, what makes CCIH unique as a nonprofit organization is our proven ability to provide truly comprehensive, integrated health and wellness services. We treat the whole person, not just his or her symptoms. Working with our highly capable and dedicated staff, we are able to transform people from homelessness, joblessness and despair. If our consumer needs housing, we are able to provide a home. If our consumer needs a job, we have employment services. If he or she is newly freed from incarceration, we are able to help them re-enter society and become a productive part of our community. And of course, we are able to provide them with the outstanding medical, dental and behavioral health care needed to thrive.

Today, Detroit is being touted as the nation's "Comeback City." While more people are moving back to our revitalized city, we must not forget that Detroit is still home to thousands of people who live below the poverty line. When we speak of revitalization, we must include these vulnerable populations and ensure they too are revitalized.

We are proud to be true supporters of Detroit and part of the solution that will make the City stronger and healthier for all. It's important that we get the word out to those who need us most that the talented and dedicated staff at Central City Integrated Health stands ready to make a positive difference in their lives.

*Janice McCrary*

Central City Integrated Health Board Chair

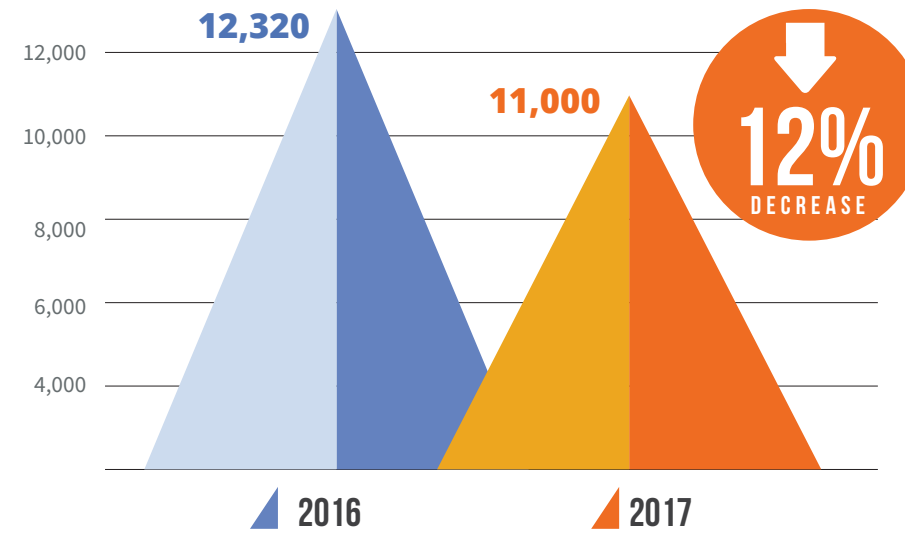
Our services are available:



## 6 DAYS/ WEEK

Primary and Pediatric Care, Dental Care, Housing and Community Re-Entry and Jail Diversion services are available Monday - Friday;  
Behavioral Health services are available Monday - Saturday

## HOMELESS INDIVIDUALS IN THE CITY OF DETROIT



While the number of homeless people in the City of Detroit decreased 12 percent between 2016 and 2017, there are still a staggering 11,000 homeless individuals in Detroit.

- 33% Approximately one-third of Detroit's homeless live with mental illness
- 25% Michigan's current mental health programs cover roughly 25% of people with mental illness
- 18% Detroit has the highest percentage of uninsured residents in the state at 18%
- 35% More than 35% of Detroit residents live below the poverty line

CCIH NEVER DENIES SERVICE TO ANY PATIENT DUE TO INABILITY TO PAY



CCIH created partnerships with the Michigan Department of Corrections and the Mental Health Court to assist recently released individuals with re-integration into the community



In addition, CCIH partnered with area employers to provide participants of CCIH's employment services programs with meaningful employment within the community

1 IN 10

DETROIT CHILDREN HAVE A PARENT WHO IS INCARCERATED

7 IN 10

OF THOSE RELEASED FROM INCARCERATION HAVE A HISTORY OF SUBSTANCE ABUSE

7 IN 10

OF FORMERLY INCARCERATED INDIVIDUALS WITH A SERIOUS MENTAL ILLNESS ALSO HAVE A SUBSTANCE USE DISORDER.

2-4 TIMES HIGHER

THE INCIDENCE OF MENTAL ILLNESS IS TWO TO FOUR TIMES HIGHER AMONG THE INCARCERATED THAN THE GENERAL POPULATION

## CCIH IS PART OF THE SOLUTION:

- 600 CCIH MANAGES MORE THAN 600 AFFORDABLE HOUSING UNITS
- 4000 CCIH SERVED MORE THAN 4,000 INDIVIDUALS FOR HEALTH CARE SERVICES OVER THE PAST YEAR
- 26 HUD GRANTS WITH 26 LANDLORDS
- 213 CCIH PROVIDES 213 LEASES FOR AFFORDABLE APARTMENTS TO HOMELESS INDIVIDUALS WITH DISABILITIES

# CENTRAL CITY INTEGRATED HEALTH OVERVIEW



Central City Integrated Health (CCIH) was designated as a Patient Centered Medical Home (PCMH) through the National Committee for Quality Assurance in 2017. The PCMH accreditation recognizes practices successful in delivering team-based, integrated health care with the intent of obtaining maximal health outcomes for patients.

*In 2017, more than 4,000 consumers took advantage of CCIH's menu of available services.*

CCIH's ongoing initiatives to reach homeless and vulnerable populations in need of services include: providing continuous outreach throughout the community; care coordination at St. Leo's Soup Kitchen and the NOAH Project; and connecting CCIH housing project residents at Charlotte Apartments and St. Aubin Square to our services. CCIH staff was also present at a number of community awareness and advocacy events including: the NAMI Walk to support individuals affected by mental health conditions; the ALS Walk to support individuals living with Lou Gehrig's disease; and the Susan G. Komen 3 Day Walk to raise funds for breast cancer research. Additionally, staff participated in the Unsheltered Point In Time Count; wherein, sleeping bag coats and other warm weather items such as hats, gloves, scarves and hygiene kits were distributed to individuals experiencing homelessness.

CCIH's commitment to integrating health services starts with our proactivity in combating homelessness through our Housing Division. The basic provision of shelter is

bedrock to individuals and families and their ability to care for themselves. In many cases, it is difficult for those who are experiencing homelessness to receive therapy, treatment and services effectively, when obtaining shelter and/or food is their primary concern. Regardless of the past behaviors that contributed to a person's homelessness, CCIH staff work to provide new solutions, strategies and approaches to house our consumers. Our philosophy in regards to housing is threefold: first, we recognize our consumers as human beings, not numbers, and treat them respectfully; secondly, we understand that we exist solely due to our consumers; and lastly, we believe that all people are capable of change.

Likewise, CCIH brings hope to the chronically unemployed by bridging the gap with employers through its employment and vocational services program. Employment is an important means of independence and self-worth, but for many it is out of their reach. Candidates participating in CCIH's Supported Employment Program come from Wayne County and may be dealing with chronic health conditions, homelessness and/or mental health or substance use issues. During the past year, 244 individuals were referred to the employment program through various other CCIH programs, and 106 new cases were opened.



*Dr. Farrow-Calhoun / Chief Medical Officer & Vice President of Clinical Operations attends a patient in the Medical Clinic*

CCIH also has a division devoted to those individuals returning to the community from the criminal justice system, or who may benefit from mental health services instead of serving time in jail. Without assistance, too many individuals released from incarceration repeat the negative cycle. CCIH Community Re-Entry and Jail Diversion services are designed to give those with a history of incarceration a job and life skills needed to be successful in the community. Individuals being released from the jail and/or prison system have needs, not unlike those of the general public; namely, the need for comprehensive and considerate health care services and community supports. However, without appropriate resources this population often goes unserved. Candidates for CCIH Community Re-Entry and Jail Diversion services may be walk-ins with a history of incarceration, Mental Health Court-ordered specialty cases, currently on parole, or referred by staff members at the jail. In 2017, CCIH served approximately 553 individuals through the various Community Re-Entry and Jail Diversion programs.

CCIH continues to participate in Project Heart, an initiative that promotes integrated primary and behavioral health services to low income, high-risk Detroiters who suffer from mental illness and who have, or are at risk for, one or more primary care conditions or

chronic diseases. The project, funded by Substance Abuse and Mental Health Services Administration, has served as the pilot for the integration of all service lines at CCIH. Based on outcomes of the project, an Integrated Care Committee, consisting of dedicated staff members from all divisions, is working to make changes to the intake process for new patients and the integrated Electronic Medical Record (EMR). The goal of the committee is to support a fully integrated model of healthcare providing seamless, comprehensive services in accordance with evidence-based models in order to reduce barriers to care; decrease the utilization of high-cost medical services; and improve overall patient wellness.

Clinical and administrative staff trainings are underway to increase staff understanding of how various life experiences and/or circumstances might affect both physical and behavioral health conditions. Specifically, training regarding Adverse Childhood Experiences (ACE's) and Substance Use Disorders as they pertain to integrated health and wellness have been conducted. Consumer experiences with the latter have been linked to negative social and physical consequences including, risky health behaviors, interpersonal conflicts, legal problems, chronic health conditions, low life potential and early death.



# NEW DEVELOPMENTS



## DENTAL BUILDOUT

Dental care is often overlooked in our most vulnerable populations which can lead to serious health problems. According to recent studies of CCIH's surrounding zip code areas, there are more than 16,800 people not being served by a dental home.

The CCIH Dental Services program is an important part of our goal to provide comprehensive integrated health services. In 2017, CCIH opened a comprehensive dental clinic providing care to Michigan residents regardless of their ability to pay. Services are available at a sliding fee discounted rate based on an individual's household size and income. Since opening last September, CCIH's Dental Clinic is the dental home to approximately 500 individuals and the number is growing each day.

To educate individuals on the importance of dental health and the impacts of poor dental care on overall wellness, CCIH staff provided information on dental care and care coordination at several outreach events, including: The African World Festival, The Veterans Resource Fair, The Northwest Resource Fair and The Adult Education Health Awareness Fair, in addition to a number of other events. To reach vulnerable populations who would greatly benefit from healthcare services including dental care, CCIH staff provided free dental screenings at the three-day Motor City Medical Mission event. In addition, dental staff performed dental screenings and cleanings to individuals residing at the SHAR (Self-Help Addiction Rehabilitation) House who would otherwise be unable to leave the facility to obtain services.

The CCIH Dental Clinic is expanding and moving from our current location on Woodward Avenue to the second floor of the Integrated Health Center at 10 Peterboro Street. The newly renovated space, funded through a HRSA Capital and Oral Health Expansion Grant, includes six, state-of-the-art, full service dental chairs. The newly expanded clinic is expected to provide approximately 3,000 dental visits in 2018.



## PEDIATRIC BUILDOUT

Pediatrics has been a small, but important part of CCIH's medical services to the community. To better serve children in the community, CCIH is constructing a wing designated to pediatric care. Expected to be operational in 2018, services include preventative health maintenance for healthy children,

and medical care to children who have short-term or long-term illnesses. Additionally, the pediatric unit will expand CCIH's already active Vaccines for Children (VFC) program providing immunizations to uninsured and underinsured children in the community. Providers will focus on the physical, mental and emotional wellbeing of consumers ranging from infants to young adults.

To reach vulnerable populations who would greatly benefit from healthcare services including pediatric care, CCIH staff provides ongoing health education, care coordination and mentoring to families at Plymouth Educational Center, Matrix Head Start and Coalition on Temporary Shelter (COTS). Staff also provides continuous outreach regarding services and supports available to parents and children through CCIH.



## EXPANSION OF BEHAVIORAL HEALTH SERVICE LINE

True to our mission of providing health care to the whole person, the CCIH Clinical Services Department offers consumers with comprehensive, continuous and thoughtful person-centered behavioral health treatment. In addition to serving those experiencing serious and persistent mental illnesses, CCIH's integrated services are now available to those with mild and/or moderate mental health conditions and substance use disorders. The behavioral health care team, inclusive of psychiatry, counseling, case management and peer support services, is skilled in meeting consumers where they are, diagnosing their needs, values, style, and emotions, and connecting in a way that is effective. Behavioral Health staff have been trained to recognize the relationship between physical and mental health conditions and coordinate care as appropriate.



## SAINT RITA APARTMENTS

CCIH broke ground on the renovation of Saint Rita apartments, a historic, vacant building just north of Midtown Detroit. This development will add 26 state-of-the-art 750-square-foot one-bedroom apartments for veterans, homeless individuals and Detroit residents with special needs. Construction on the 31,467 square-foot, six-story building is underway and expected to be completed in Fall 2018.

# ACCOMPLISHMENTS IN 2017

## ACT:

CCIH's Assertive Community Treatment (ACT) program was rated number one in Wayne County.

## CLUBHOUSE INTERNATIONAL:

The Inner City Clubhouse successfully fulfilled all required International Standards for Clubhouse programs and was designated as an International Clubhouse site.

## BPHI COLLABORATION:

Ongoing outreach efforts include engaging and re-establishing services to disconnected patients within the Behavioral Health Professionals Inc. (BPHI) system via telephone calls, mailings and community outreach; thus far, approximately 10 percent of patients have resumed services.

## PARTNERSHIP WITH WAYNE STATE UNIVERSITY'S DEPT. OF GRADUATE MEDICAL EDUCATION:

Chief Medical Officer, Dr. Kimberly Farrow, serves as an attending physician to a cohort of Internal Medicine residents and oversees medical students in partnership with Wayne State University School of Medicine's Continuity Clerkship for third-year medical students. CCIH provides an excellent learning experience for physicians in training, offering the opportunity to work with patients dealing with complex health conditions and a variety of socioeconomic barriers to care. Additionally, this collaboration offers CCIH patients access to the latest and most innovative medical practices and care coordination with specialists in the Wayne State and DMC Health Systems.

## MEDICAID HEALTH PLAN COLLABORATION:

CCIH formed a collaboration with Harbor Health, Healthy Michigan Plan to ensure enrollees complete necessary preventative care screenings in accordance with Health Care Effectiveness Data and Information Set (HEDIS) quality care measures.

## WOMEN'S HEALTH FAIR:

CCIH staff hosted an event promoting women's health and wellness including the provision of pap smears and mammograms, weight assessments and nutrition counseling and referrals for colorectal cancer screenings for female patients.

## CHILDREN'S VACCINE FAIR:

CCIH staff hosted an event promoting child health and wellness including the provision of recommended childhood vaccines and health and wellness advice to uninsured and underinsured children/families in the community.

## BACKYARD BBQ FOR THE HOMELESS AND HUNGRY:

For its participation in the event, CCIH was awarded the Spirit of Detroit Award in recognition of exceptional achievement, outstanding leadership and dedication to improving the quality of life of the homeless and hungry. Staff was present to provide health screenings and educational materials and resources regarding services available through CCIH and in the community.

## MENTAL HEALTH COURT COMMUNITY HEALTH FAIR:

The Mental Health Court Community Health Fair, coordinated by CCIH staff, included various local agencies that provide housing/health services, employment/education assistance, food assistance, benefits/claims assistance and various community resources. Staff representatives of all divisions, were present to provide health screenings, care coordination and educational materials regarding services and supports available through CCIH.

## PARTNERSHIP WITH MDOC:

CCIH continues to foster a partnership that provides integrated care coordination for newly released individuals of the Michigan Department of Corrections.

## EXPANSION OF COMMUNITY RE-ENTRY SERVICES:

Community Re-Entry added a new Boundary Spanner position to act as a liaison between the MDOC; Third Circuit Court; health providers and district courts in order to better coordinate care for individuals returning to the community.

## TEMPORARY EMPLOYMENT PLACEMENT PROGRAM:

Members of Inner City Clubhouse and/or the Community Re-Entry Program have been offered the opportunity to receive competitive salaries, comprehensive vocational job coaching, professional reference letters and referrals for permanent job placement through a partnership with Mayday Professional Cleaning.

## PERMANENT EMPLOYMENT:

CCIH assisted 49 consumers in gaining competitive, meaningful employment within the community.

## LOW INCOME HOUSING TAX CREDIT (LIHTC) PROGRAM:

CCIH Housing program developed and owns three apartment buildings consisting of 123 affordable housing units and partnered with private developers to create 513 affordable housing units for families through the LIHTC program. CCIH is the Lead Service Provider for 237 units of Special Needs housing for families through the LIHTC program. This is affordable housing with case management services for people who are experiencing one of the following characteristics: homelessness, mental illness, domestic violence survivor, and/or HIV/AIDS.

## PERMANENT SUPPORTIVE HOUSING (PSH):

CCIH provides, through the PSH Program, 213 leases for affordable, mostly one-bedroom apartments to individuals who are homeless with severe and persistent mental illnesses.

# INTEGRATED PRIMARY AND COMPREHENSIVE BEHAVIORAL HEALTH SERVICES

## PRIMARY CARE

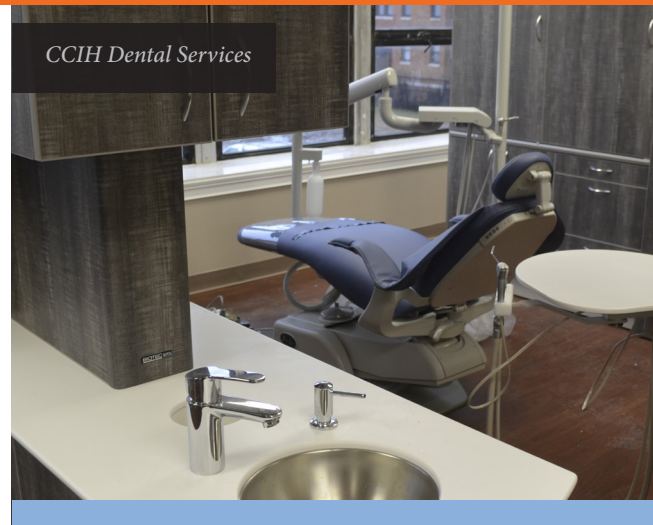
Primary care services include the management of patient wellness including health promotion and maintenance, disease prevention, counseling, patient education, and the diagnosis and treatment of acute and chronic illnesses.

## PEDIATRIC CARE

Pediatric care includes the provision of primary care services for children including well child visits, recommended vaccinations and medical care for children who have short-term or long-term illnesses. Provider staff performs evaluations and age appropriate screenings to aid in mental, physical and emotional growth and development. Staff advises patients, parents or guardians concerning, diet, activity, hygiene and disease prevention and recommends interventions to modify behaviors associated with health risks.

## DENTAL CARE

Dental services include the provision of high quality, comprehensive, patient-centered oral healthcare for adults and children. Dental staff perform preventative, basic and select major dental services. Additionally, staff provides education to patients/families and the community about oral health-related disease and prevention and self-management of acute and chronic dental conditions.



## OUTPATIENT CLINIC SERVICES

The outpatient clinic services staff provides behavioral health treatment consistent with patient needs. Available services include: medication management, psychiatry, counseling, case management, peer support and wellness services. The program integrates recovery-based principals in order to enhance patient understanding of their own abilities and encourage an active life, personal autonomy, social identity, meaning and purpose in life, and a positive sense of self, regardless of the level or degree of their mental illness.

## IDDT AND CO-OCCURRING

Symptoms of substance abuse or addiction can mask symptoms of mental illness, and symptoms of mental illness can be confused with symptoms of addiction. CCIH staff is specially trained to identify and treat individuals suffering from dual diagnoses. The Integrated Dual Disorder Treatment (IDDT) model is an evidence-based practice that improves quality of life for people with co-occurring severe mental illness and substance use disorders by combining substance abuse services with mental health services provided within the same service organization by the same treatment team. IDDT emphasizes that individuals achieve big changes like sobriety, symptom management, and an increase in independent living, through a series of small, overlapping, incremental changes that occur over time.



## ACT

Assertive Community Treatment (ACT) is a service-delivery model that provides comprehensive, locally based treatment to people with serious and persistent mental illnesses. Unlike other community-based programs, ACT provides highly individualized services directly to patients. ACT recipients receive the multidisciplinary, round-the-clock staffing of a psychiatric unit, but within the comfort of their own home and community. To have the competencies and skills to meet a consumer's multiple treatment, rehabilitation, and support needs, ACT team members are trained in the areas of psychiatry, social work, nursing, substance abuse and vocational rehabilitation.

## AFC

Adult Foster Care (AFC) homes are residential settings that provide 24-hour personal care, protection, and supervision. Individuals in adult foster care settings can have a developmental disability and/or a mental illness, and could be physically challenged, or are in some other way unable to live without direct supports. Residents receive an additional continuum of necessary services, supports, or treatment provided in an

adult foster care facility to meet the unique daily living challenges of individuals with a serious mental illness or a developmental disability.

## INNER CITY CLUBHOUSE

Clubhouses are a powerful demonstration of the fact that people with mental illness can, and do, lead normal, productive lives. Clubhouses are local community centers that provide members with opportunities to build long-term relationships that, in turn, support them in obtaining employment, education and housing, including: a work-ordered day in which the talents and abilities of members are recognized and utilized within the Clubhouse; participation in consensus-based decision-making regarding all important matters relating to the running of the Clubhouse; opportunities to obtain paid employment in the local labor market through a Clubhouse-created Transitional Employment Program; assistance in accessing community-based educational resources; access to crisis intervention services when needed; evening/weekend social and recreational events; and assistance in securing and sustaining safe, decent and affordable housing.

# PERMANENT SUPPORTIVE HOUSING SERVICES

The Supportive Housing Division is comprised of numerous programs servicing individuals with varying needs and/or circumstances, namely:

## PSH

The Housing Division is a collaborative effort among the Department of Housing and Urban Development (HUD), housing providers and developers. The program is designed to provide both permanent housing and intensive support services for chronically homeless people with disabilities. This includes people with severe mental illness, co-occurring disorders (severe mental illness and substance abuse) and people with physical or health disabilities who may also have a substance abuse problem. PSH is intended to assist people in the transition from homelessness to permanent housing and to enable persons to live as independently as possible. The core belief of the program is that support services provided to consumers are often instrumental to their long-term recovery, rehabilitation and housing stability, and that assisting individuals with housing will significantly enhance their recovery.

Within the PSH program, CCIH operates three programs:

### CoC Permanent Supportive Housing Bonus:

This program provides both permanent housing and support services for people experiencing chronic homelessness. The target population is adult homeless persons of Detroit who are currently residing in emergency shelters or transitional housing; are at immediate risk of homelessness; or who are living on the street. This program provides 45 units of scattered site affordable housing for consumers.

### CoC Permanent Supportive Housing – 96 units:

The target population for this program is single adult homeless persons in Detroit who are currently residing in emergency shelters or transitional housing; are at immediate risk of homelessness; or are living in the streets. This population includes those with severe mental illness or dual diagnoses (severe mental illness and substance abuse), and/or with physical or health disabilities, some of whom may also have a substance abuse problem. This program provides 96 units of scattered site affordable housing for consumers.

### CoC Permanent Supportive Housing – 37 units:

This program provides rental assistance and supportive services to 37 people who were homeless and have a disability.



## PATH

The Projects for Assistance in Transition from Homelessness (PATH) program emphasizes active outreach to individuals who are homeless, or at imminent risk of becoming homeless, who have a serious mental illness, or co-occurring serious mental health and substance abuse disorders. The PATH program provides security deposits, utility assistance and first and last month's rent. The PATH program administers the SSI/SSDI Outreach, Access and Recovery (SOAR) program to help individuals with zero income obtain Social Security benefits.

### CoC Support Services Only (SSO) New Beginnings

This program provides supportive services to 120 people with disabilities. It assists homeless people with mental illness and/or co-occurring disorders to obtain housing.

### Shelter Plus Care

This program provides rental assistance to create affordable housing for 32 individuals with disabilities.

## PBV

The Project Based Voucher Program (PBV) is designed to provide affordable housing in properties funded through the Low-Income Housing Tax Credit (LIHTC) Program, to individuals that fall under the special needs category, which can include individuals with the following conditions: homelessness; survivors of domestic violence; youth aging out of foster care; mental illness; physical disabilities; and HIV/AIDS. CCIH serves as the Lead Service Provider to nine PBV Detroit developments and as such, processes applications and provides voluntary, on-site supportive services to 172 households. The goals of the supportive services are to keep families and individuals housed, address family and tenancy issues and promote self-sufficiency. Last year CCIH processed more than 400 applications for PBV housing.



CCIH's current Detroit affordable housing developments are:

70  
UNITS

### PETERBORO PLACE

8 Peterboro  
58 of which are allocated for Special Needs residents

27  
UNITS

### CHARLOTTE APARTMENTS

644 Charlotte  
27 units with a veteran's preference for residency

24  
UNITS

### CLINTON HOUSE

99 Kenilworth  
24 accessible units for physically disabled residents

26  
UNITS

### GRAY STREET II

12801 Kercheval  
26 Special Needs units

100  
UNITS

### CITY VIEW

733 St. Antoine  
100 units, 20 of which are allocated for Special Needs residents

49  
UNITS

### CHALMERS SQUARE

14401 E. Jefferson  
49 units, five of which are allocated for Special Needs residents

41  
UNITS

### LAVOGUE SQUARE

225 Merton  
41 units, four of which are allocated for Special Needs residents

48  
UNITS

### ST. AUBIN SQUARE

4200 St. Aubin  
48 Special Needs units

49  
UNITS

### NEW CENTER SQUARE

112 Seward  
49 units, five of which are allocated for Special Needs residents

202  
UNITS

### PALMER PARK SQUARE

325 Merton  
202 units, 20 of which are allocated for Special Needs residents

# COMMUNITY RE-ENTRY AND JAIL DIVERSION SERVICES

## RETURNING CITIZENS SERVICES

This program allows parole board-determined individuals to participate in integrated health services with the goal of reducing recidivism to below 30 percent for all participants over four quarters. One hundred percent of consumers in this program over the past four quarters have achieved their "Individual Plan of Service" goals by graduation.

## MENTAL HEALTH COURT

This program allows participants deemed as "court-ordered specialty cases" to participate in integrated health services with the goal of reducing/preventing recidivism to a rate at or below 15 percent and to increase graduation rate to at least 75 percent for eligible participants. Both goals were achieved during 2017.

## INTENSIVE JAIL DIVERSION PILOT PROGRAM

This new program allows candidates referred directly from the jail administration to participate in integrated health services with the goal of reducing re-offense rates.

## DIVERSION RECOVERY AND RE-ENTRY

This program is for walk-in patients with a history of incarceration or individuals who have successfully completed either CCIH's Mental Health Court or Returning Citizens program. The goal of the program is to increase by 50 percent the number of individuals who remain connected to services for at least six months post-completion of parole or probation. The DRR program was successful in meeting the above goal in 2017.

## SUPPORTED EMPLOYMENT

Evidence-Based Supported Employment (EBSE), also known as Individual Placement Support (IPS), is a core component of recovery for adults with a severe mental illness. Services and supports are provided to assist individuals with obtaining and maintaining meaningful work in the community based on individual preferences, choice and need (based on medical necessity). The intent of the program is to ensure that adults with a severe mental illness achieve and maintain desired community-based employment that pays at least minimum wage, while performing the same work alongside others without psychiatric disabilities, in order to increase recovery and self-sufficiency and decrease dependence on public systems of care.



# FINANCIAL STATEMENT



**FISCAL YEAR ENDED SEPTEMBER 30, 2017 (UNAUDITED)**

**REVENUE: \$14,525,307**

Billed Revenue		
Carelink	\$5,589,651	38.48%
Medicare & Private Pay	\$1,700,700	11.71%
Grant Revenue		
Grant Funding	\$2,917,672	20.09%
HUD	\$1,562,713	10.76%
HRSA	\$2,099,265	14.45%
Other Revenue		
Fundraising	\$30,814	.21%
Property Development	\$370,000	2.54%
Other	\$254,492	1.75%

**EXPENSES: \$13,242,272**

Integrated Primary and Comprehensive Behavioral Health Services	\$6,944,305	52.45%
Community Re-Entry Programs	\$2,225,287	16.80%
Supportive Housing Services	\$3,221,249	24.33%
Psychosocial Rehabilitation	\$569,975	4.30%
Other	\$281,366	2.12%



At the Veteran's Gala

## SENIOR LEADERSHIP TEAM

**RYAN M. LEPPER**  
President & CEO

**DR. KIMBERLY FARROW**  
Chief Medical Officer & Vice President of Clinical Operations

**SANDRA WARE**  
Chief of Staff & Vice President Growth and Development

**LATRICE JONES-BERRY**  
Chief Financial Officer

**DR. GREGORY WASHINGTON**  
Chief Psychiatrist

**TESSIE CONTE**  
Director of Human Resources

**CURTIS SMITH**  
Director of Housing

**DR. GLORIA SMITH**  
Director of Dental Services

**DOROTHY AUSTIN**  
Manager of Clinical Care

**GAIL JOHNSON**  
Director of Integrated Clinical Services

**ASHLEY SHADLE**  
Division Manager of Primary Care Services

**NORRIS HOWARD**  
Division Manager of Community Re-Entry/Jail Diversion Services

**MATTHEW BROWN**  
Coordinator of Integrated Clinical Services

**ELAINE SCOTT**  
Coordinator of Health Services

**KRYSTAL DAVIS**  
Coordinator of Housing Services

**CARL COLEMAN**  
Coordinator of Housing Services

## BOARD OF DIRECTORS

**JANICE McCRARY**  
Chair, Co-Chair of Quality Assurance Committee

**KIEL OPPERMAN**  
Vice Chair, Co-Chair of Development Committee

**DONALD BUSTA**  
Secretary

**CRYSTAL MILLER**  
Treasurer, Co-Chair of Quality Assurance Committee, Chair of Finance Committee

**ALSONSO BERMEA**  
Member

**RAYMOND BYERS**  
Member

**SHEREEDA CARR**  
Member

**PATRICK DEVEREAUX**  
Member

**CARLA GROH**  
Member

**BARBARA A. HUBBARD-FRAZIER**  
Member

**GHANA JONES**  
Member

**WHILHEMENA H. JONES**  
Member

**BELA KOGLER**  
Member

**JESSICA PAPPAS**  
Member, Co-Chair of Development Committee

**CORNELIUS PITTS**  
Member

**KARIN A. PLUMMER**  
Member, Chair of Membership Committee

**DANIEL SPYKER**  
Member

**JOHN WHITE**  
Member


**TEVIS WILLIAMS**  
Member




**CENTRAL CITY  
INTEGRATED HEALTH**


## CONTACT US

 10 PETERBORO ST.  
DETROIT, MI 48201

 PHONE: (313) 831.3160

 [WWW.CENTRALCITYHEALTH.COM](http://WWW.CENTRALCITYHEALTH.COM)

 /CentralCityHealth

 @CentralCityDET