

ANNUAL REPORT 2020-2021

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EXECUTIVE DIRECTOR'S LETTER



This Annual Report covers the first tumultuous and challenging year following the arrival of the COVID pandemic in the spring of 2020. The changes required of us as a healthcare entity were transformative, and like within many facets of our society, we have accepted that we now have to keep finding our way in this "new normal". While all of our offices remained open for walk-in and crisis needs, almost all of our clinical services pivoted to telephone (initially) and then video-based telehealth delivery. Some staff had roles that kept them in the office and others chose to do so, while many others were able to work remotely from their homes. Centennial was no stranger to video platforms, having used them for many of our psychiatry services for 15 or more years, as well as for regional and center-wide meetings. However, it was still a big lift to make that change, and I am proud of the manner in which we were able to keep essential services strong for our clients and communities through what for most of us was the most challenging year of our lifetimes. At some point, we became aware of a message that so resonated with us, we merged it with our Centennial logo on a button, and wore it proudly for months: "The only thing more contagious than a virus is hope." (Retired US Navy Admiral William McRaven). In the midst of a contagion, or for that matter any other time, Centennial is all about delivering HOPE!

Many folks in our communities hunkered down and did not seek out services unless they were really feeling a strong need. Our overall numbers of clients served in FY 20-21 dropped about 15% from the prior year and overall service encounters followed suit. Now, well into the following fiscal year, we are still slowly regaining more typical numbers of people walking in our literal or virtual doors. Interesting enough, another aspect of our continuum of care actually increased during this trying pandemic year; our prevention service encounters (largely youth and school-based programs) increased by 23%, which is quite a feat for a team that for a portion of time also had to pivot to virtual presentations to support our educators and youth! We also continued to grow our continuum of care, including bringing our two sober living residences for men, and for women with their dependent children on line in the summer of 2020. Our school-based telehealth counseling program that was in a pilot phase when the pandemic hit blossomed into a much needed option for youth in a growing number of our area schools. Supported initially through various state sources of CARES Act dollars, we also initiated a family navigator program to help people in need of various resources and supports get routed to what they need—whether food, clothing and supplies for their families, information on other benefits, and beyond. While not a "new" program, our housing services also grew tremendously in demand, and we were able to garner funds to help with emergency housing, as well as serve our region in distribution of state rental assistance funding.

Like many healthcare organizations and employers across all industries, we began to experience a higher than normal amount of turnover in our workforce in 2021, something we are seeing some glimmers of improvement on at this point, but we still have a ways to go to recover. Compensation levels need a significant upgrade to remain competitive and the Board is recognizing the importance of this investment in our staff and service capacity.

With growth and unexpected challenges like COVID, there are always things we can look back and imagine handling even better, but Centennial has stepped up to the moment and we remain committed to our clients and our communities of Northeast Colorado. Together, as always, we are Moving Lives Forward!

Respectfully,

Elizabeth Q. Hickman, Ph.D.

PRESIDENT'S REPORT



Someone once described the collective image of wellness in rural communities by the capacity of the community first, to identify those that are different, and secondly, to extract them from their midst. While this is obviously hyperbole, differing from the norm in rural communities, where anonymity is mostly illusion, is difficult. As human beings, we strive for cognitive resonance—that means we want the world to be the way we believe it to be, and "outliers" to this mental blueprint are often misunderstood, sometimes shunned, and largely ignored. Such is the plight of the mentally ill.

The stigma attached to mental illness is prevalent in all corners of society—we just don't like to talk about it. I suspect the stigma is even greater the smaller the community—where the mentally ill are often more easily "recognized." Depression is often viewed as a "deficiency of character" while schizophrenics are feared. When my first wife, the mother of my two wonderful children died of complications associated with bulimia and anorexia, several well-intentioned people mentioned to me that "for the sake of the children" I might want to consider saying that she died of cancer. "It's a lot more sympathetic," said one.

I've served on the Centennial Mental Health Center Board for the past 26 years. During that time, we have grown in our provision of services, our understanding of how best to treat mental illness, and our community engagement.

CMHC provides a wide range of mental health services to an increasingly diverse population of people, in an area that is larger than some states in the eastern part of this country. It does so with professionalism, dedication, and determination. Consistently, those receiving services report that not only were they treated with respect and dignity, the services they received helped them resolve the mental health challenges they were facing.

As with any organization, there have been challenges. Funding and workforce issues are a constant challenge, and a number of clinicians within the CMHC family have moved on to greener (higher paying) pastures during my tenure on the board. I certainly don't blame them; I just wish we had funding that allowed us to be more competitive. One of our most recent challenges, subsequent to the development and delivery of telemedicine is that qualified clinicians can become part of a nation-wide network of providers whose services are all online, meaning the clinician can work permanently from their home office. An additional challenge is that of well-intentioned, under-educated people who want to radically change the way that mental health services are delivered. Most every new "fix-it" legislative initiative, however well-intentioned, has unintended consequences that negatively affect CMHC's ability to provide quality services.

If you think that mental illness isn't an issue that affects you, take another look. Do you have a relative or friend with an addiction? Many times, drug and/or alcohol addictions are signs of an underlying mental illness that is being "medicated" rather than treated. And then, take another look. Northeast Colorado has one of the highest suicide rates in the entire state. Out of home placement rates for children are among the highest in the state. Early intervention for low-income children with emerging mental illnesses is a growing priority. These are our people; our neighbors; our responsibilities.

The collective wellness of our communities should be predicated upon our capacity to ensure that we take care of our own. As the outgoing Board President for Centennial Mental Health Center, I am proud to say that this organization has made significant strides both in providing direct services to promote mental wellness, and in working with a wide variety of community partners in prevention efforts.

PRESIDENT'S REPORT

CONTINUED...



I believe it is time for frank discussions about this topic. I believe it is imperative that each one of us serve as a community resource for someone in need. I believe that rather than ignoring the problem, hoping it will magically disappear, the entire community must become educated and involved. This includes us all—public entities, businesses, schools, parents, the faith-based community...

We have excellent mental health services in this region, but mental health centers only serve those to whom they are referred. They don't see the young man whose girlfriend just dumped him, or the young woman who has been badly cyber-bullied by her classmates, and unless the community and its members become knowledgeable about suicide ideations and are open to reaching out, opportunities to "prevent" may be squandered.

Here are some suggestions on how each of us can be a part of the solution. Don't be afraid to reach out to someone that you think may be struggling. It is okay to ask them if they have thought about harming themselves. Talking about suicide DOES NOT put that idea in a child's head. The truth is that many people who have contemplated hurting themselves are relieved when someone gives them permission to really express their feelings without criticism, minimization or judgment.

Be a good listener. Telling someone they are "being a drama queen" or are being "overly dramatic" isn't helpful. Many of us have suffered the pangs of adolescence and survived, but everyone has their own journey, and it is important that we not judge someone's predicated upon how we may have navigated this time in our own lives.

Let the person you are talking with know that you are concerned about them. Don't be afraid to say, "I'm afraid you're going to hurt yourself and I'm really concerned for your welfare." Assure the person with whom you're speaking that they are not alone. Let them know that you are there for them and will help them anyway you can.

Suicidal feelings usually mean that someone is feeling empty and hopeless and that no one can help and that there is no way out. Many of us have experienced similar feelings in our lives and moved past them; sometimes because of a counselor; sometimes because of our personal faith; sometimes because a trusted friend helped us through the valley of the shadow...

I am proud of Centennial Mental Health Center's dedication to prevention, and in the days and months ahead, I hope that the resolve CMHC displays relative to this issue can be a precipitating factor in our communities coming together to work on this difficult issue.



REVENUE & EXPENSES



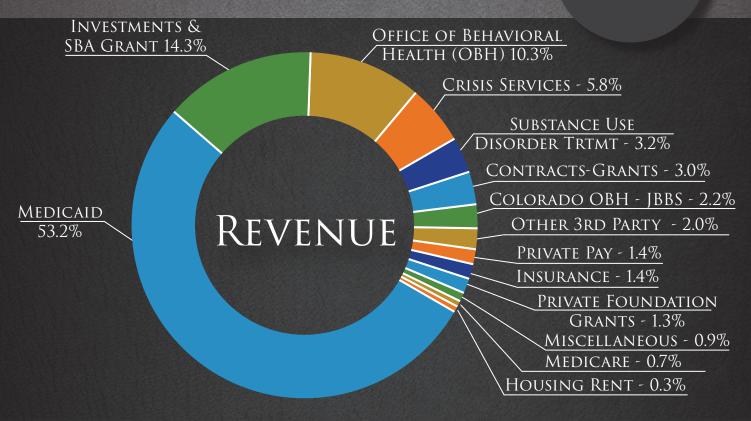
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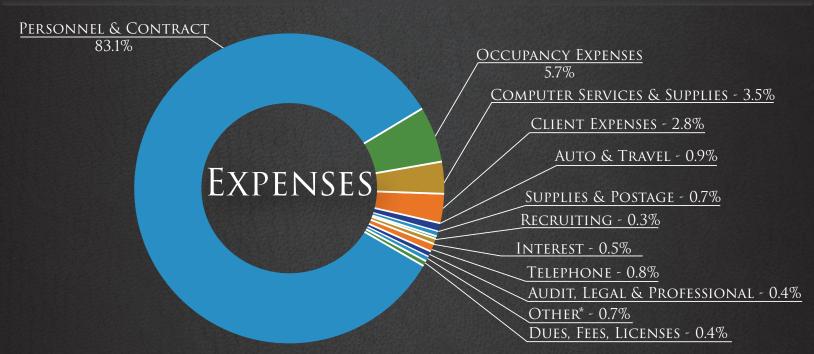
REVEROL SOURCE		
Medicaid	53.2%	11,008,243
Investments & SBA Grant	14.3%	2,962,575
Office of Behavioral Health (OBH)	10.3%	2,125,272
Crisis Services	5.8%	1,208,357
Substance Use Disorder Trtmt	3.2%	669,917
Contracts - Grants	3.0%	623,981
Colorado OBH - JBBS	2.2%	448,256
Other Third Party	2.0%	418,371
Private Pay	1.4%	296,106
Insurance	1.4%	289,072
Private Foundation Grants	1.3%	267,441
Miscellaneous	0.9%	177,333
Medicare	0.7%	148,872
Housing Rent	0.3%	57,953
	100.0%	20,701,751
EXPENSES		
Personnel & Contract	83.1%	13,663,500
Occupancy Expenses	5.7%	937,691
Computer Svcs & Spls	3.5%	579,760
Client Expenses	2.8%	462,025
Auto & Travel	0.9%	150,217
Supplies & Postage	0.7%	114,056
Recruiting	0.3%	56,223
Interest	0.5%	88,980
Telephone	0.8%	138,466
Audit, Legal & Professional	0.4%	70,380
Other *	0.7%	116,869
Dues, Fees, Licenses	0.4%	72,835
	100.0%	16,451,003

^{*} Other includes expenses that are less than 0.3% of the total

REVENUE & EXPENSES







^{*} Other includes expenses that are less than 0.3% of the total

BY THE NUMBERS



3,417 Admissions

Assertive Community Treatment

Respite

Crisis

154 Jail-Based Services

Meds Only

Outpatient Competency
Restoration

Outpatient MH + SUD

Outpatient MH

4 Outpatient SUD

Unenrolled

1,345 Emergency Services

Diversions to community based or crisis respite services

341

Inpatient or other treatment

Counties Served: Cheyenne, Elbert, Kit Carson, Lincoln, Logan, Morgan, Phillips, Sedgwick, Washington & Yuma

School districts in Centennial's service area

Communities in Centennial's service area

Individuals Centennial served FY 2020-2021

Total Prevention Encounters FY 2020-2021

Square miles in Centennial's service area, or 16% of Colorado's total land mass

Individuals or 2% of CO total population

Combined mental health and substance abuse services provided in FY 2020-2021

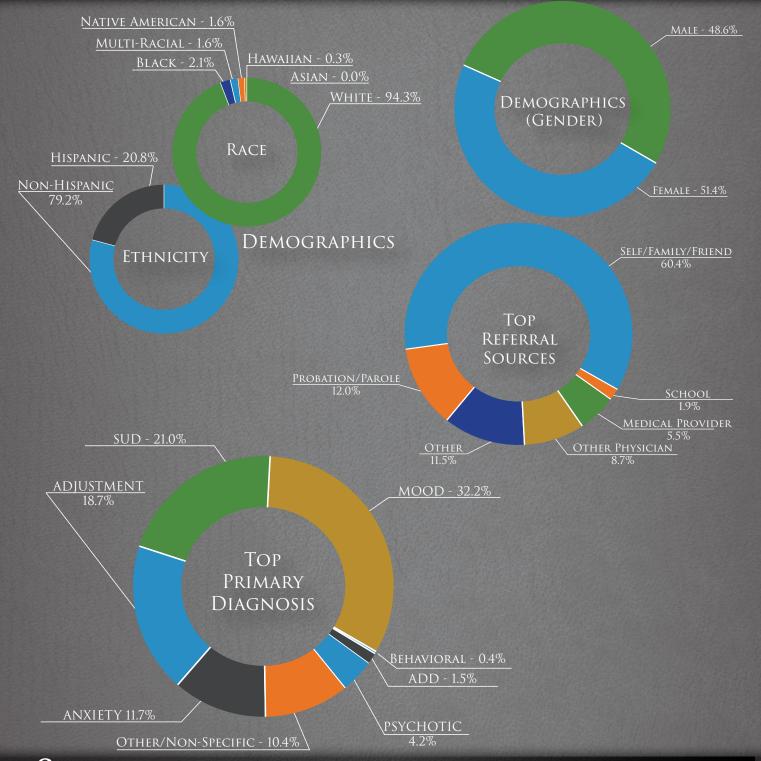
NUMBER OF CLIENTS & SERVICES



	NUMBER OF CLIENTS AND SERVICES							
		DUAL MENTAL HEALTH SUBSTANCE USE DISORDERS		GRAND TOTAL				
Э		CLIENTS	CLIENTS	SERVICES	CLIENTS	SERVICES	CLIENTS	SERVICES
CHEYENNE	Child	0	0	4	0	0	0 5	4
EYE	Adolescent Adult	1	4 19	29 194	0	0	5 23	29 196
CH	Senior	3	3	2	0	2	3	2
	Cheyenne Total	4	26 60	229 927	1	2	31	231
ь	Child Adolescent	0 10	73	927 985	0 4	0 140	60 87	927 1125
ELBERT	Adult	78 2	190 34	3913 396	57 2	2013 125	325 38	5926 521
=	Senior Elbert Total	90	357	6221	63	2278	510	8499
Z	Child	0	56	580	0	0	56	580
RSO	Adolescent	4	43	286	1	110	48	396
KIT CARSON	Adult Senior	48 1	155 22	2272 178	22 0	512 31	225 23	2784 209
KIT	Kit Carson Total	53	276	3316	23	653	352	3969
Z	Child	0	28	403	0	0	28	403
100	Adolescent Adult	2 46	25 113	283 1611	5 54	131 1967	32 213	414 3578
LINCOLN	Senior	0	12	84	6	240	18	324
	Lincoln Total	48	178	2381	65	2338	291	4719
	Child	0	118	1305 1501	1 4	24 93	119 156	1329 1594
LOGAN	Adolescent Adult	16 247	136 555	11532	138	4133	940	15665
100	Senior	11	94	1414	6	373	111	1787
	Logan Total	274	903	15752	149	4623	1326	20375
AN	Child Adolescent	1 16	163 144	3502 2020	4 20	25 284	168 180	3527 2304
MORGAN	Adult	247	537	13306	234	6329	1018	19635
MC	Senior	6	70 914	998 19826	3 261	197 6835	79 1445	1195 26661
S	Morgan Total Child	270 1	12	129	0	1	13	130
LIP	Adolescent	0	23	234	3	114	26	348
PHILLIPS	Adult Senior	17 0	55 21	1196 140	25 1	630 56	97 22	1826 196
Ь	Phillips Total	18	111	1699	29	801	158	2500
CK	Child	0	23	282	0	0	23	282
ZW.	Adolescent Adult	3 20	10 55	126 1084	0 2 19	9 703	15 94	135 1787
SEDGWICK	Senior	0	12	124	Ö	15	12	139
	Sedgwick Total	23	100	1616	21	727	144	2343
TO	Child	2	38 23	521 243	5 4	7 100	45 29	528 343
IN	Adolescent Adult	2 2 43 2	36	928	59	1577	138	2505
WASHINGTON	Senior		8	63	0	9	10	72
*	Washington Total	49	105	1755	68	1693	222	3448
	Child Adolescent	0	58 47	638 405	0 10	0 278	58 60	638 683
YUMA	Adult	43	145	2318	66	2799	254	5117
χ	Senior Yuma Total	2 48	26 276	393 3754	82	390 3467	34 406	783 7221
	GRAND TOTALS	877	3,246	56,549	762	23,417	4,885	79,966
	GIAND TOTALS		3,240	30,347	102	23,417	7,005	17,700

DEMOGRAPHICS, TOP PRIMARY DIAGNOSIS & TOP REFERRAL SOURCES





LICENSURE/NEW LICENSES OBTAINED



CLINICAL CURRENT STAFF LICENSURES	#
Bachelors/Certified Addictions Counselor II	1
Bachelors/Certified Addictions Counselor Specialist	1
Certified Addictions Counselor III	1
Child Psychiatrist	1
Licensed Psychologist	1
Masters/Certified Addictions Counselor III	1
Masters/Licensed Marriage and Family Therapist	1
Masters/Licensed Addictions Counselor/ Licensed Marriage and Family Therapist	1
Masters/Licensed Addictions Counselor/ Licensed Clinical Social Worker	1
Masters/Licensed Addictions Counselor/ Licensed Professional Counselor	1
Doctor of Osteopathic Medicine	1
Licensed Practical Nurse	2
Certified Addictions Specialist	2
Masters/Licensed Clinical Social Worker	2
Masters/Nurse Practitioner	2
Medical Doctor	2
Masters/Licensed Professional Counselor	8
Bachelors	28
Masters	34

Centennial takes an active role in encouraging staff to obtain licensure and is proud to celebrate with the following for their accomplishments last year!

Congratulations to all!

COMMUNITY RESOURCES STAFF Degrees/Licensures	#
Bachelors/Certified Addictions Counselor III	1
Bachelors/Individual Placement and Support Certification	1
Masters/Licensed Professional Counselor	1
Masters/I-MHE (Infant Mental Health Endorsement)	S
Bachelors/Certified Prevention Specialist II	3
Masters	3
Bachelors	7
ADMIN CURRENT STAFF Degrees/Licensures	#
Masters	1
Masters/Certified Addictions Counselor III	1
Masters/Licensed Marriage and Family Therapist	1
Medical Doctor	1
Psychologist	1

EMPLOYEES	DATE OBTAINED	LICENSE
Cynthia Audia	2/13/2020	LPC
Mike Schoenecker	12/7/2020	CAS
Jackie Barton	1/19/2021	LCSW
Rebecca Hooper-Esquibel	1/21/2021	LMFT
Arcelie Lopes	3/15/2021	LSW
Andrew Denecke	4/29/2021	LPC
Cheryl Beauprez	7/19/2021	MFT
Jackie Vasquez	9/1/2021	CAS
Diana Rios	9/01/2021	CAS

Masters/Licensed Professional Counselor

Bachelors

11

BOARD OF DIRECTORS



Tom Westfall President Community



TERRY HOFMEISTER
Vice President
Commissioner



ROBIN WILEY
Commissioner



CLARK BERNHARDT
Community



SILVIA CASTILLO Secretary/Treasurer Community At Large



RON SMITH Commissioner



STEVE BURGESS Commissioner



DAVE LONG Commissioner Delegate



DAVE MARTIN
Community



TAMARA
DURBIN
Community



DON SCHNEIDER Commissioner



TONY WELLS
Commissioner

STRATEGIC FOCUS



Centennial's Board of Directors and Leaders Team continue to use Strategic Focus Goals originally framed in 2016 to help drive priorities and changes at Centennial: Quality Clinical Services, Fiscally Sound, Community Responsiveness, and Staff Recruitment and Retention. In 2019, the Board and Leaders developed our Centennial "Brand Matrix", which further fleshes out our intentions for service, values, culture, and communications, both externally in our communities and internally within our organization. Keeping our identified "Brand" and Strategic Focus goals in mind assists us in moving forward our Center's mission to achieve excellence in the provision of behavioral health services that lead to optimal health and well-being.

OPTIMAL HEALTH & WELL BEING



ADMINISTRATION



ELIZABETH L. HICKMAN, PH.D.

Executive Director



JENNIFER SPAULDING, AA
Executive Assistant



SPENCER GREEN, M. DIV., CACIII
Deputy Director of Operations



SHERRI K. DAVIDSON, MSM Finance Director



SHARON GREENMAN, BS Human Resource Director



PAUL FREDA, M.D.



PAM CRAIG, MA, LPC
Deputy Director of Clinical Services



KARLA ROSAS, MA, LPC Community Resource Director



TROY PENNER, BA

MEDICAL AND STRUCTALTY SERVICES

ARLENE WEIMER, PSY. D., Psychologist BOB VADNAL, M.D., Psychiatrist ANDREW HALPERN - DO, Psychiatrist KEYNA SCHLUP - M.D., Medical Provider PATRICIA PAYNE, M.D., Contracted Pediatric Psychiatrist LEAH BROWN, - MS, MPH, ARNP, Nurse Practitioner ASHLEY WEYCER - MS, PMHNP, Nurse Practitioner

REGIONAL OPERATIONS

DIRECTORS





KRISTI GROTHE M.ED., LMFT South Region



PHIL MOSS MA, LPC Central Region



JAMI BRECHT BA Northeast Region

CLINICAL DIRECTORS



AARON SHEA, MSW, LCSW



AMELIA BUMGARNER-YOUNG
MS, LPC



JIM KUEMMERLE, MSW, LCSW Northeast Region



CINDY AUDIA MS, LPC Crisis Services Director Centerwide



ANNE HELLSTROM
MS.ED., LPC
Clinical Innovation Director
Centerwide



BRANDY CUTSHAW
MA, LPC, LAC
Substance Use Disorder Director
Centerwide

CENTENNIAL AWARDS SCHOLARSHIPS



In an effort to raise awareness of career opportunities in the behavioral health field to members of our communities, Centennial Mental Health Center developed an annual scholarship program to assist these students in achieving their goals. As such, Centennial is pleased to announce the recipients in the tenth annual Future Mental Health Professional Scholarship Program.

COUNTY	RECIPIENT	AMOUNT
Morgan County	Whitney Frasco	\$1,000
Yuma County	Abbie Reed	\$500
Lincoln County	Aubrianna Bandy	\$500
Logan County	Cristen Houghton	\$500
Lincoln County	Dixi Lockhart	\$500
Logan County	Faith Trenkle	\$500
Lincoln County	Jaley Schubarth	\$500
Logan County	Kaitlyn Houghton	\$500
Yuma County	Kimberly Guerrero	\$500
Yuma County	Madison Godsey	\$500
Kit Carson County	Mattie Crouse	\$500
Yuma County	Raquel Eduardo-Nunez	\$500
Sedgwick County	Sadie Ingram	\$500

Individuals eligible to apply are: traditional or non-traditional students who are graduates from high school or GED program by Summer 2021; United States citizens or legal immigrants; residents of Cheyenne, Elbert, Kit Carson, Lincoln, Logan, Morgan, Phillips, Sedgwick, Washington or Yuma County; and are intending to complete a minimum of a bachelor degree in a behavioral health related field (e.g. psychology, sociology, counseling etc). The winners were selected based on academic achievement, aptitude, and community service from the submitted application, transcript(s), letters of recommendation and essay.

Centennial, with administrative offices in Sterling, is an equal opportunity provider and employer that provides behavioral health services to individuals across the lifespan in Cheyenne, Elbert, Kit Carson, Lincoln, Logan, Morgan, Phillips, Sedgwick, Washington and Yuma Counties. Services include a variety of behavioral health service programs: trauma informed care, outpatient therapy, community support programs, crisis intervention, emergency response, substance abuse treatment, and child, adult and family counseling. Services are offered at Centennial offices in each county, as well as other community locations such as private homes, schools, jails, nursing homes and hospitals.

OFFICE LOCATIONS



ADMINISTRATION

211 W Main St Sterling, CO 80751 Phone: 970.522.4549 Fax: 970.522.9544

AKRON

871 E 1st St Akron, CO 80720 Phone: 970.345.2254 Fax: 970.345.2744

BURLINGTON

1291 Circle Dr Burlington, CO 80807 Phone: 719.346.8183 Fax: 719.346.0292

CHEYENNE WELLS

80 E 1st St N Cheyenne Wells, CO 80810 Phone: 719.346.8183 Fax: 719.346.0292

ELIZABETH

650 E Walnut St Elizabeth, CO 80107 Phone: 303-646-4519 Fax: 303-646-4451

FORT MORGAN

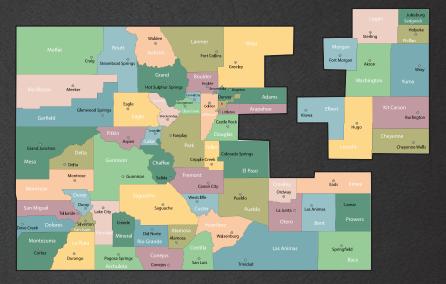
821 E Railroad Ave Fort Morgan, CO 80701 Phone: 970.867.4924 Fax: 970.867.2695

HOLYOKE

115 N Campbell St Holyoke, CO 80734 Phone: 970.854.2114 Fax: 970.854.4584

JOURNEY POINT

1112 N 4th Street Sterling, CO 80751 Phone: 970.425.7201 Fax: 970.425.7204



IULESBURG

118 W 3rd St Julesburg, CO 80737 Phone: 970.474.3769 Fax: 970.474.2099

LIMON

606 Main St Limon, CO 80828 Phone: 719.775.2313 Fax: 719.775.2315

STERLING

211 W Main St Sterling, CO 80751 Phone: 970.522.4392 Fax: 970.522.2217

WRAY

365 W 2nd St Wray, CO 80758 Phone: 970.332.3133 Fax: 970.332.3134

YUMA

215 S Ash St Yuma, CO 80759 Phone: 970.848.5412 Fax: 970.848.2414 "Our mission is to achieve excellence in the provision of behavioral health services that lead to optimal health and well being"

Centennial Mental Health Center is an equal opportunity provider and employer