

# Mississippi Department of Mental Health

respect awareness integrity  
INTEGRITY collaboration  
excellence community innovation  
PEOPLE commitment AWARENESS  
people

## FY15 ANNUAL REPORT

Supporting a Better Tomorrow...Today





# Mississippi Department of Mental Health

## *Board of Mental Health Members*

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## *DMH Executive Director*

*Ms. Diana S. Mikula*

## *DMH Deputy Director*

*Mr. Matt Armstrong*

If you need additional copies of the DMH FY15 Annual Report,  
contact Wendy Bailey at 601-359-1288 or [wendy.bailey@dmh.state.ms.us](mailto:wendy.bailey@dmh.state.ms.us).



# Mission, Vision and Core Values

## DMH Mission

Supporting a better tomorrow by making a difference in the lives of Mississippians with mental illness, substance abuse problems and intellectual/developmental disabilities, one person at a time.

## Vision

We envision a better tomorrow where the lives of Mississippians are enriched through a public mental health system that promotes excellence in the provision of services and supports.

### *A better tomorrow exists when...*

- All Mississippians have equal access to quality mental health care, services and supports in their communities.
- People actively participate in designing services.
- The stigma surrounding mental illness, intellectual/developmental disabilities, substance abuse and dementia has disappeared.
- Research, outcomes measures, and technology are routinely utilized to enhance prevention, care, services, and supports.

## Core Values & Guiding Principles

**People** We believe people are the focus of the public mental health system. We respect the dignity of each person and value their participation in the design, choice and provision of services to meet their unique needs.

**Community** We believe that community-based service and support options should be available and easily accessible in the communities where people live. We believe that services and support options should be designed to meet the particular needs of the person.

**Commitment** We believe in the people we serve, our vision and mission, our workforce, and the community-at-large. We are committed to assisting people in improving their mental health, quality of life, and their acceptance and participation in the community.

**Excellence** We believe services and supports must be provided in an ethical manner, meet established outcome measures, and are based on clinical research and best practices. We also emphasize the continued education and development of our workforce to provide the best care possible.

**Accountability** We believe it is our responsibility to be good stewards in the efficient and effective use of all human, fiscal, and material resources. We are dedicated to the continuous evaluation and improvement of the public mental health system.

**Collaboration** We believe that services and supports are the shared responsibility of state and local governments, communities, family members, and service providers. Through open communication, we continuously build relationships and partnerships with the people and families we serve, communities, governmental/nongovernmental entities and other service providers to meet the needs of people and their families.

**Integrity** We believe the public mental health system should act in an ethical, trustworthy, and transparent manner on a daily basis. We are responsible for providing services based on principles in legislation, safeguards, and professional codes of conduct.

**Awareness** We believe awareness, education, and other prevention and early intervention strategies will minimize the behavioral health needs of Mississippians. We also encourage community education and awareness to promote an understanding and acceptance of people with behavioral health needs.

**Innovation** We believe it is important to embrace new ideas and change in order to improve the public mental health system. We seek dynamic and innovative ways to provide evidence-based services/supports and strive to find creative solutions to inspire hope and help people obtain their goals.

**Respect** We believe in respecting the culture and values of the people and families we serve. We emphasize and promote diversity in our ideas, our workforce, and the services/supports provided through the public mental health system.

# Overview of the Service System

## **Statutory Authority of the Department of Mental Health**

The Mississippi Department of Mental Health was created in 1974 by an Act of the Mississippi Legislature, Regular Session, as outlined in Sections 41-4-1 et seq. of the Mississippi Code of 1972, Annotated. The statute placed into one agency mental health, alcohol/drug abuse, and intellectual and developmental disabilities programs which had previously been under the direction of the State Board of Health, the Interagency Commission on Mental Illness and Intellectual and Developmental Disabilities, the Board of Trustees of Mental Institutions, and the Governor's Office. The statute also addresses the Department of Mental Health's responsibilities concerning services for persons with Alzheimer's disease and other dementia.

The **network of services** comprising the public system is delivered through **three major components**:

**State-operated programs** The four state comprehensive behavioral health programs, the five IDD regional programs, a mental health community living program, and two specialized programs for adolescents. These programs serve designated counties or service areas in the State and provide inpatient psychiatric, chemical dependence, forensic, limited medical/surgical hospital services, some community mental health services in areas near the state comprehensive psychiatric hospitals, intermediate care program services for persons with intellectual and developmental disabilities, and a range of community services for persons with developmental disabilities. Nursing services are also located on the grounds of two of the state comprehensive psychiatric programs.

**Regional community mental health/mental retardation centers** operate under the supervision of regional commissions appointed by county boards of supervisors comprising their respective service areas. The 14 regional centers make available a range of community-based mental health, substance abuse, and in some regions, intellectual and developmental disabilities services. The governing authorities are considered regional and not state-level entities. The Department of Mental Health is responsible for certifying, monitoring, and assisting the regional community mental health centers. These regional community mental health centers are the primary service providers with whom the Department of Mental Health contracts to provide community-based mental health and substance abuse services.

**Other nonprofit service agencies/organizations**, which make up a smaller part of the service system, are certified and may also receive funding through the Department of Mental Health to provide community-based services. Many of these nonprofit agencies may also receive additional funding from other sources. Programs currently provided through these nonprofit agencies include community-based alcohol/drug abuse services, community services for persons with developmental disabilities and community services for children with mental illness or emotional problems.

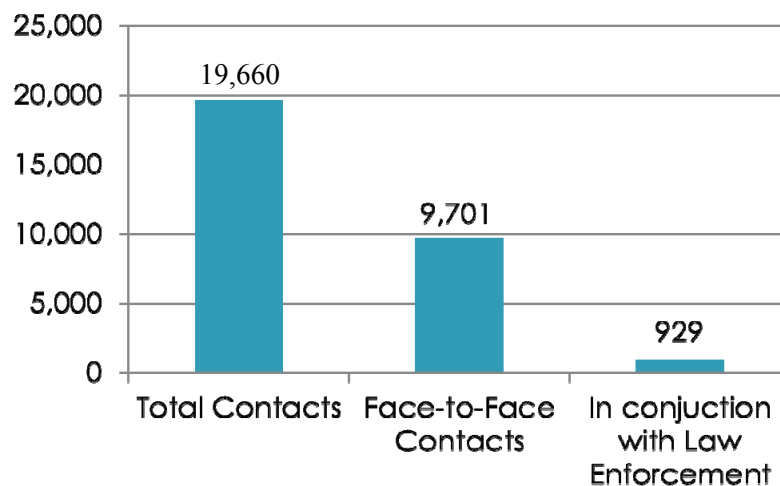
## Mobile Crisis Response Teams

In an effort to expand crisis services in the community, DMH provided grants to the 14 Community Mental Health Centers to establish Mobile Crisis Response Teams. Mobile Crisis Response Teams provide community-based crisis services that deliver solution-focused and recovery-oriented behavioral health assessments and stabilization of crisis in the location where the individual is experiencing the crisis.

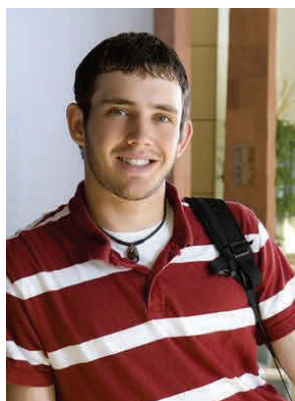
Mobile Crisis Response Teams work hand-in-hand with local law enforcement, Chancery Judges and Clerks, and the Crisis Stabilization Units to ensure a seamless process. Without mobile crisis intervention, an individual experiencing a crisis may be inappropriately and unnecessarily placed in a jail, holding facility, hospital, or inpatient treatment program. The goal is to respond in a timely manner to where the individual is experiencing the crisis or meet the individual at a designated location such as the local hospital.



### FY15 Contacts



## Wraparound Facilitation for Children and Youth



In partnership with the Division of Medicaid and the University of Southern Mississippi's School of Social Work, DMH created the Mississippi Wraparound Initiative (MWI) to train, support and sustain high-fidelity Wraparound in the State. Wraparound Facilitation is family and youth guided and provides intensive services to allow children and youth to remain in their homes and community.

In FY15, 360 Wraparound Facilitators were trained. Seven (7) DMH certified providers served 1,419 children/youth with Wraparound Facilitation.



## Programs of Assertive Community Treatment Teams

Mississippi now has eight PACT Teams operated by the following Community Mental Health Centers: Warren-Yazoo Mental Health Services, Life Help, Pine Belt Mental Health (operates two PACT - one on the Gulf Coast), Hinds Behavioral Health, Weems Community Mental Health Center, Region III Mental Health Center and Timber Hills Mental Health Services. PACT is a mental health service delivery model for facilitating community living, psychological rehabilitation and recovery for persons who have the most severe and persistent mental illnesses and have not benefited from traditional outpatient services.

As of June 30, 2015, a total of 173 people are receiving PACT services.

## Certified Peer Support Specialists

Mississippi's Certified Peer Support Specialist (CPSS) Trainers conducted five Certified Peer Support Specialist Trainings in FY15. The CPSS Training is an intensive 34 hour course followed by a written exam. Currently, there are 141 CPSS in Mississippi. CPSSs are individuals who self identify as a family member or an individual who received or is currently receiving mental health services. Upon completion of the training, successfully passing the CPSS examinations, and obtaining employment by a DMH certified provider, participants become Certified Peer Support Specialists. The CPSS Program provides acknowledgment that the peer has met a set of requirements necessary to provide support to individuals with mental health, substance use, intellectual and developmental disabilities, and/or family members. The training and certification process prepares CPSSs to promote hope, personal responsibility, empowerment, education, and self-determination in the communities in which they serve. Under the general supervision of a mental health professional, a CPSS may perform a wide range of peer support services. CPSSs are first degree family members and/or people living in recovery with mental illness, substance use, and intellectual and developmental disabilities who provide support to others who can benefit from their lived experiences.



## Supported Employment

DMH believes that work plays a critical role in improving quality of life and mental health outcomes of the people we serve as part of their recovery journey. In January 2015, DMH provided funding to develop four pilot sites to offer Supported Employment to 75 individuals with mental illness. The sites are located in Community Mental Health Center Regions 2, 7, 10 and 12. Supported employment, an evidenced-based way to help people diagnosed with mental illnesses secure and keep employment, begins with the idea that every person with a serious mental illness is capable of working competitively in the community.



At the end of June 30, 2015, after 4 months of implementation, the DMH Supported Employment Pilot Program had assisted 22 individuals on their road to recovery by helping them to become employed in the openly competitive job market.

## Certification of Providers

In addition to the provision of services through the public mental health system, DMH is responsible for the supervision, coordination and establishment of standards for the operations and activities of the public mental health system. Through the Bureau of Quality Management, Operations and Standards, DMH develops standards of care for all certified providers; approves community-based agencies to provide mental health, intellectual/developmental disabilities and substance use services throughout the state; and certifies the provision of mental health, intellectual/developmental disabilities and substance use services.

<b>DMH Certified Providers</b>	<b>94</b>
<b>New or Additional Service Certifications</b>	<b>37</b>
<b>On-site Monitoring Visits Conducted</b>	<b>145</b>

## Office of Consumer Support

The Office of Consumer Support (OCS) serves as the point of contact for DMH for information/referral and for expressing grievances and concerns. In FY15, OCS received just over 4,602 documented calls directly through the DMH Helpline and National Suicide Prevention Lifeline. OCS continues to contract with the National Suicide Prevention Lifeline as a network provider in Mississippi for crisis intervention, suicide prevention, and information/referral. Also in FY15, OCS responded to and assisted with the resolution of approximately 288 grievances related to the experiences of individuals receiving or seeking services.



## IDD Crisis Intervention

Boswell Regional Center is the first regional center to offer Crisis Intervention Services for individuals with IDD. The SUCCESS Program began in March 2014. The focus is to assist people in crisis situations to become more self-reliant. During FY15, the SUCCESS Program provided services to 28 people.

## Strategic Planning

In FY15, DMH focused on aligning its' agency strategic plan with the State of Mississippi's strategic plan, *Building a Better Mississippi*. DMH changed the structure of the Plan to follow the format developed by the Legislative Budget Office and PEER.

Using the mission, vision, and values, the Board of Mental Health, with feedback from numerous partners, developed three-year goals to clarify the transformation of the DMH service system. The goals will guide DMH's actions in moving toward a community-based service system. Each goal's objectives include outcomes and strategies. In addition, the software program used to track and document progress provides a much more workable and transparent mechanism for the process.



### GOAL 1

*To increase access to community-based care and supports for adults and children with mental illness and/or substance use disorders through a network of service providers that are committed to a person-centered and recovery-oriented system of care*

### GOAL 2

*To increase access to community-based care and supports for people with intellectual and/or developmental disabilities through a network of service providers that are committed to a person-centered system of care*

### GOAL 3

*To ensure people receive quality services in safe settings and utilize information/data management to enhance decision making and service delivery*

# Alcohol and Drug Services

The Bureau of Alcohol and Drug Services maintains a statewide comprehensive system of substance use services of prevention, treatment and rehabilitation and promotes quality care, cost-effective services and ensures the health and welfare of individuals through the reduction of substance use.

## FY 2015 Services

Services Provided	Number Served
Community-based adult primary residential services	2,108
Community-based adolescent primary residential services	263
Inmates at the MS Department of Corrections	305
Community-based adult transitional residential services	449
Community-based general outpatient services	4,419
Community-based adult intensive outpatient services	293
Community-based recovery supports	602
Adult co-occurring services	8,389
Vocational rehabilitation services for transitional treatment services	756
DUI offenders admitted to and completed treatment	193

## Funding for Substance Use Services in Mississippi

Funding Source	Funding Amount
Federal Substance Abuse Block Grant	\$13,705,865
State 3% Tax on Liquor and Wine	\$6,691,056
General Fund	\$412,939

# Behavioral Health Programs

The **state behavioral health programs** are administered by the Department of Mental Health. These programs offer residential and/or community services for mental health, substance use, and Alzheimer's disease and other dementia. The programs are administered by the Bureau of Mental Health.

## **East Mississippi State Hospital**

Charles Carlisle, Director  
P.O. Box 4128 West Station  
Meridian, MS 39304-4128  
Phone: 601-482-6186  
[www.emsh.state.ms.us](http://www.emsh.state.ms.us)

## **Mississippi State Hospital**

James G. Chastain, Director  
P.O. Box 157-A  
Whitfield, MS 39193  
Phone: 601-351-8000  
[www.msh.state.ms.us](http://www.msh.state.ms.us)

## **North Mississippi State Hospital**

Paul A. Callens, Ph.D., Director  
1937 Briar Ridge Rd.  
Tupelo, MS 38804  
Phone: 662-690-4200  
[www.nmsh.state.ms.us](http://www.nmsh.state.ms.us)

## **South Mississippi State Hospital**

Clint Ashley, Director  
823 Highway 589  
Purvis, MS 39475  
Phone: 601-794-0100  
[www.smsh.state.ms.us](http://www.smsh.state.ms.us)

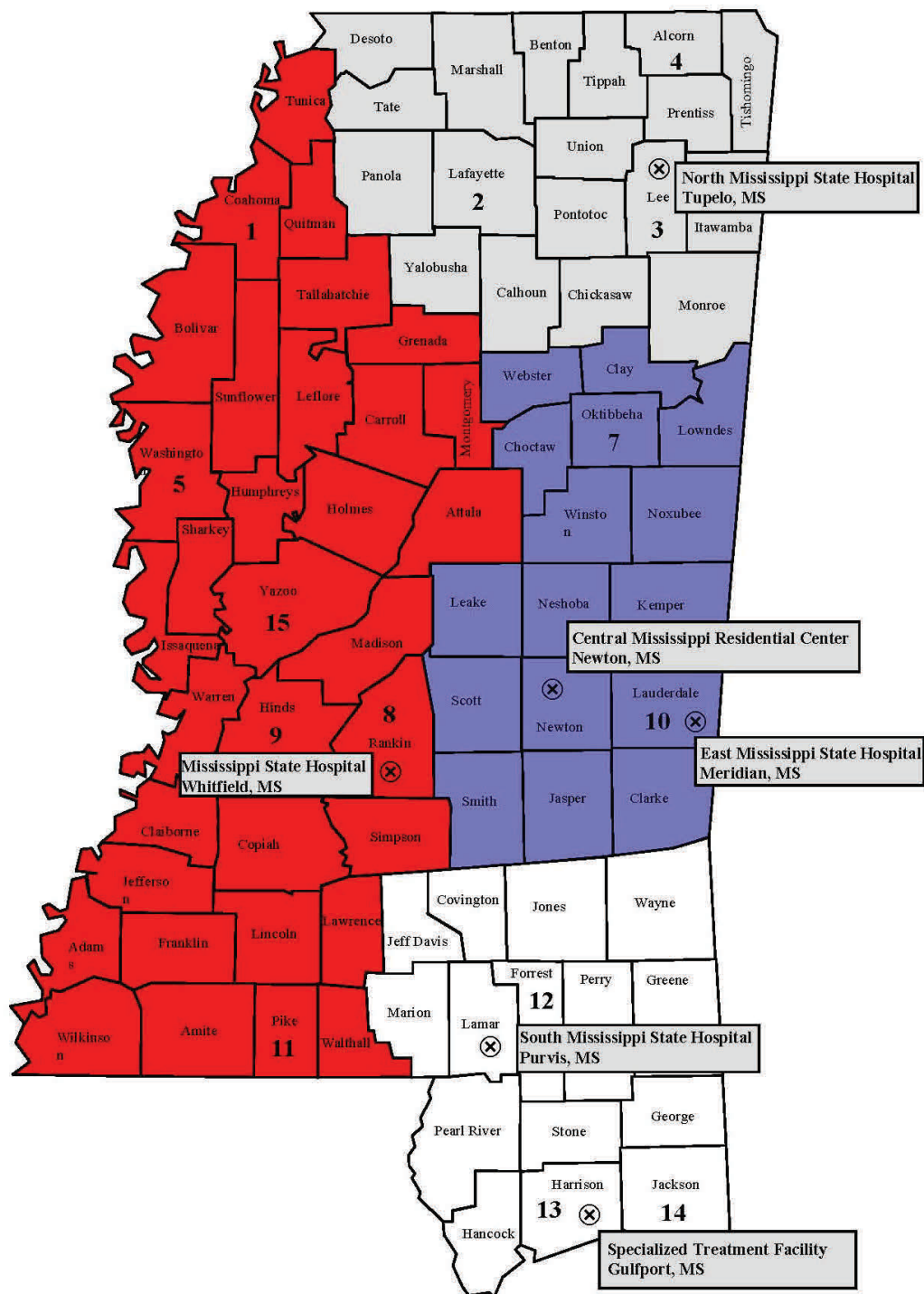
## **Central Mississippi Residential Center**

Debbie Ferguson, Dr.PH, Director  
P.O. Box 470  
Newton, MS 39345  
Phone: 601-683-4200  
[www.cmrc.state.ms.us](http://www.cmrc.state.ms.us)

## **Specialized Treatment Facility**

Stacy Miller, Director  
14426 James Bond Road  
Gulfport, MS 39503  
Phone: 228-328-6000  
[www.stf.state.ms.us](http://www.stf.state.ms.us)

# Behavioral Health Programs





Mississippi State Hospital is located in Whitfield and provides residential services for mental health, substance use, and Alzheimer's disease and other dementia. MSH is Joint Commission accredited.

## Individuals Served at Mississippi State Hospital in FY 2015

	Active Beds	Number Served
Acute Psychiatric	154	1,123
Continued Treatment Services	97	101
Acute Medical Geriatric	29	66
Medical Surgical Hospital	21	197
Oak Circle Center for Adolescents	60	331
Forensics	35	58
Chemical Dependency	80	842
Nursing Home Services		
Jaquith Nursing Home	379	418

East Mississippi State Hospital is located in Meridian and provides residential and/or community services for mental health, substance use, and Alzheimer's disease and other dementia.

## Individuals Served at East MS State Hospital in FY 2015

	Active Beds	Number Served
<b>Acute Psychiatric</b>	<b>100</b>	<b>569</b>
<b>Adolescent Psychiatric</b>	<b>25</b>	<b>85</b>
<b>Adolescent Chemical Dependency</b>	<b>25</b>	<b>107</b>
<b>Adult Chemical Dependency</b>	<b>25</b>	<b>330</b>
<b>Medical Unit</b>	<b>6</b>	<b>32</b>
<b>Nursing Home Services</b>		
<b>R.P. White Nursing Home</b>	<b>105</b>	<b>115</b>
<b>J.P. Champion Nursing Home</b>	<b>105</b>	<b>119</b>

North Mississippi State Hospital is located in Tupelo and provides acute inpatient services for adult men and women with serious mental illness.

## Individuals Served at North MS State Hospital in FY 2015

	Active Beds	Number Served
<b>Acute Psychiatric</b>	<b>50</b>	<b>574</b>

South Mississippi State Hospital in Purvis and provides acute inpatient services for adult men and women with serious mental illness.

## Individuals Served at South MS State Hospital in FY 2015

	Active Beds	Number Served
Acute Psychiatric	50	648

Central Mississippi Residential Center is located in Newton and provides behavioral health services in a community setting, minimizing the need for hospitalization.

## Individuals Served at Central MS Residential Center in FY 2015

	Active Beds	Number Served
Community Living	68	112

\*CMRC also operates the Newton Crisis Stabilization Unit (see page 18) and Footprints Day Program (see page 22).

The Specialized Treatment Facility is an adolescent behavioral health residential treatment program. Residents are between 13-18 years of age who have been civilly committed or transferred within the DMH. Priority placements are given to adolescents who have come into contact with the legal system.

## Individuals Served at Specialized Treatment Facility in FY 2015

	Active Beds	Number Served
Psychiatric Residential	48	126

# Behavioral Health Programs

Breakdown of number of psychiatric admissions by county and DMH Behavioral Health Program.

COUNTIES	MSH	EMSH	NMSH	SMSH	STF	CMRC
Adams	66	0	0	7	7	0
Alcorn	0	0	29	0	1	0
Amite	39	0	0	1	0	0
Attala	7	0	0	0	0	0
Benton	0	0	3	0	0	0
Bolivar	26	0	0	0	0	0
Calhoun	0	0	20	0	0	0
Carrol	6	0	1	0	1	0
Chickasaw	2	1	32	0	0	0
Choctaw	0	6	1	0	0	1
Claiborne	11	0	0	0	0	0
Clarke	0	16	2	0	0	3
Clay	0	23	2	0	0	0
Coahoma	25	1	1	0	1	0
Copiah	23	1	0	0	0	0
Covington	2	0	0	21	0	0
DeSoto	21	0	70	0	10	0
Forrest	20	1	0	108	4	0
Franklin	6	0	0	0	0	0
George	1	1	0	24	0	0
Greene	0	0	0	7	1	1
Grenada	11	1	1	0	0	3
Hancock	6	0	0	16	6	0
Harrison	32	2	0	159	32	4
Hinds	305	2	0	0	2	12
Holmes	21	0	1	0	0	0
Humphreys	9	0	0	0	0	0
Issaquena	0	0	0	0	0	0
Itawamba	0	0	12	0	0	0
Jackson	11	2	0	82	4	1
Jasper	1	17	1	0	0	1
Jefferson	18	0	0	0	0	0
Jefferson Davis	2	0	0	17	1	0
Jones	3	3	0	39	5	2
Kemper	0	8	0	0	0	1
Lafayette	1	1	30	0	2	0
Lamar	2	1	0	53	3	6
Lauderdale	10	71	1	2	0	20
Lawrence	28	0	0	2	0	0
Leake	0	33	0	2	0	0
Lee	4	0	86	0	4	6
Leflore	53	0	1	0	0	1
Lincoln	15	0	0	2	2	0
Lowndes	3	32	2	2	0	0
Madison	24	0	0	0	0	4
Marion	1	0	1	31	2	0
Marshall	1	0	22	0	1	1
Monroe	1	2	21	0	0	0

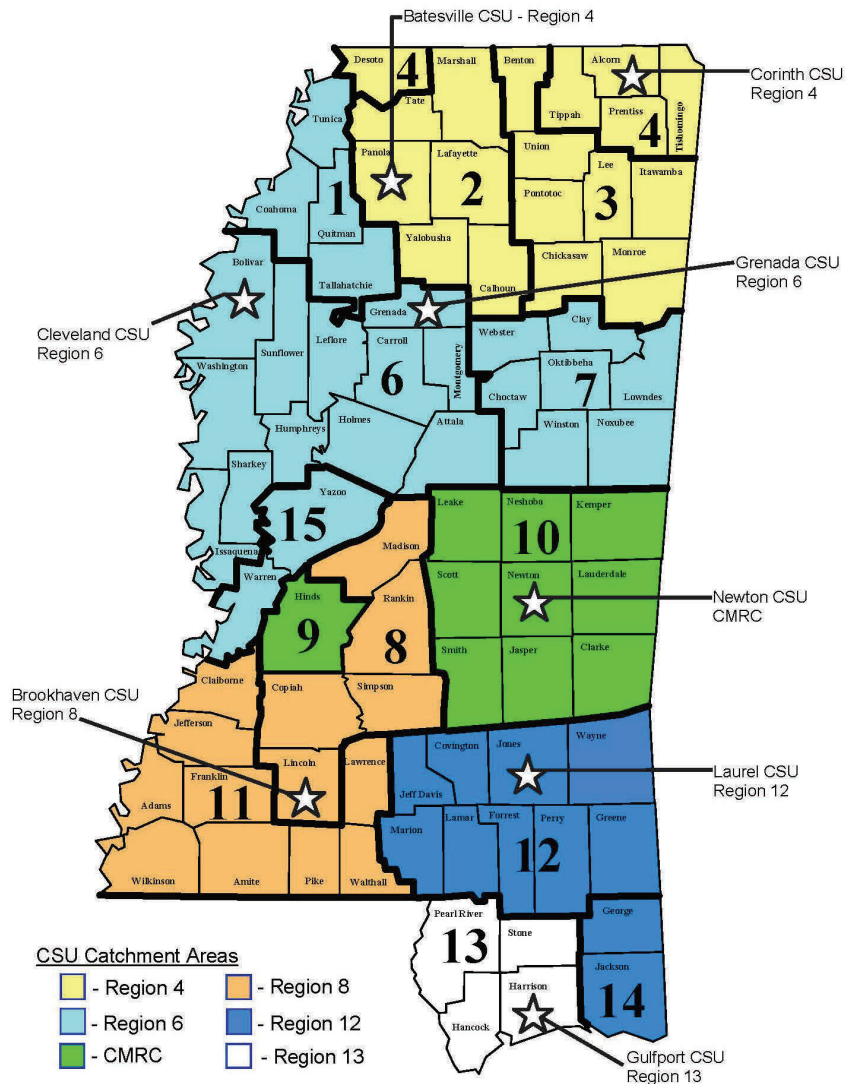


# Behavioral Health Programs

COUNTIES	MSH	EMSH	NMSH	SMSh	STF	CMRC
Montgomery	5	0	0	0	0	0
Neshoba	2	17	3	0	3	3
Newton	0	25	1	0	0	9
Noxubee	0	36	1	0	0	0
Oktibbeha	1	26	0	0	0	0
Panola	4	1	57	0	0	0
Pearl River	4	0	0	11	15	0
Perry	2	0	0	12	0	0
Pike	61	0	0	4	1	3
Pontotoc	1	0	16	0	0	0
Prentiss	1	0	26	0	0	0
Quitman	4	0	2	0	0	0
Rankin	205	1	0	0	9	16
Scott	5	71	0	0	0	3
Sharkey	4	0	0	0	0	0
Simpson	46	5	0	0	1	0
Smith	2	34	0	1	1	2
Stone	0	0	0	12	0	0
Sunflower	22	0	3	0	0	0
Tallahatchie	7	0	3	0	0	0
Tate	3	0	31	0	0	0
Tippah	0	0	9	0	1	0
Tishomingo	2	1	13	0	3	0
Tunica	8	1	1	0	0	0
Union	3	0	5	0	0	0
Walthall	15	0	0	1	3	2
Warren	31	1	0	0	0	5
Washington	33	1	2	0	0	1
Wayne	4	0	0	29	0	0
Webster	0	5	0	0	0	0
Wilkinson	12	0	0	3	0	0
Winston	1	18	0	0	0	0
Yalobusha	2	1	11	0	0	0
Yazoo	21	0	0	0	0	1

# Crisis Stabilization Units

**Crisis Stabilization Units (CSUs)** offer time-limited residential treatment services designed to serve adults with severe mental health episodes that if not addressed would likely result in the need for inpatient care. The community-based service setting provides intensive mental health assessment and treatment. Follow-up outreach and aftercare services are provided as an adjunct to this service.



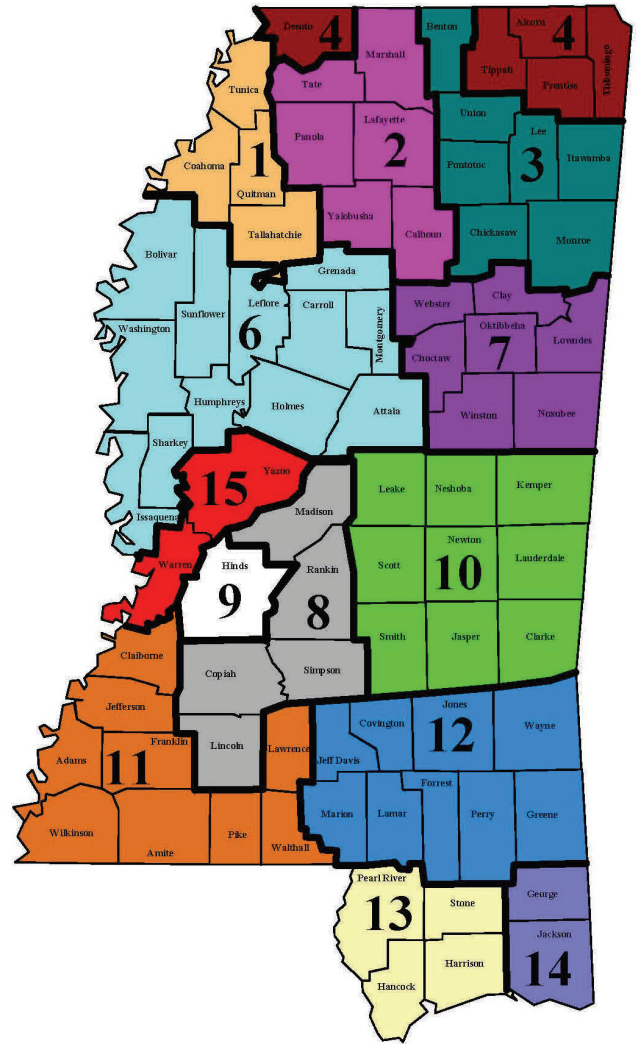
CSUs	Total Served
Batesville CSU	369
Brookhaven CSU	383
Cleveland CSU	385
Corinth CSU	574
Grenada CSU	386
Gulfport CSU	503
Laurel CSU	444
Newton CSU	565
<b>Total</b>	<b>3,609</b>

<b>Total Voluntary</b>	<b>1,988</b>
<b>Total Involuntary</b>	<b>1,621</b>
<b>Diversion Rate</b>	<b>89.27%</b>

# Community Mental Health Centers

Regional Community Mental Health Centers (CMHCs) operate under the authority of regional commissions appointed by county boards of supervisors comprising their respective service areas. The 14 CMHCs, as well as private DMH Certified Providers who are certified as CMHCs, make available a range of community-based mental health services, as well as substance use and intellectual and developmental disabilities services to all 82 counties.

DMH is responsible for certifying, monitoring and assisting the CMHCs. The CMHCs are the primary service providers with whom DMH contracts to provide community-based services.

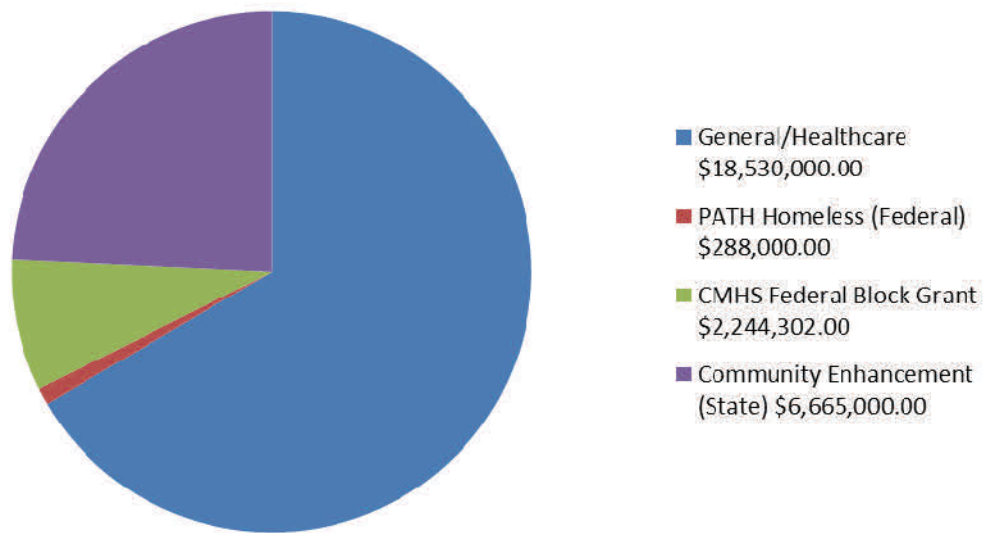


**In FY15, services were provided to 62,309 adults and 35,221 children/youth in Mississippi.**

**Total individuals served: 97,530 (unduplicated)**

- Psychiatric Diagnostic Evaluation
- Evaluation and Medication Management
- Psychotherapy
- Medication Administration
- Assessment
- Treatment Plan Review
- Individual Therapy
- Nursing Assessment
- Family Therapy
- Group Therapy
- Multi-Family Therapy
- Psychological Evaluation
- Targeted Case Management
- Assertive Community Treatment
- Psychosocial Rehabilitation
- Psychosocial Rehabilitation (Senior)
- Day Treatment
- Day Support
- Acute Partial Hospitalization
- Crisis Response
- Crisis Residential
- Community Support Services
- Peer Support
- Wraparound Facilitation
- Intensive Outpatient Psychiatric

## Adult Funding



**General/Healthcare** - appropriated by the Mississippi State Legislature.

**PATH Homeless** - Projects for Assistance in Transition from Homelessness federal grant program administered by the Center for Mental Health Services.

**CMHS Federal Block Grant** - Community Mental Health Services Block Grant mandated by the U.S. Congress.

**Community Enhancement** - appropriated by the Mississippi State Legislature for the purpose of expanding community-based services.

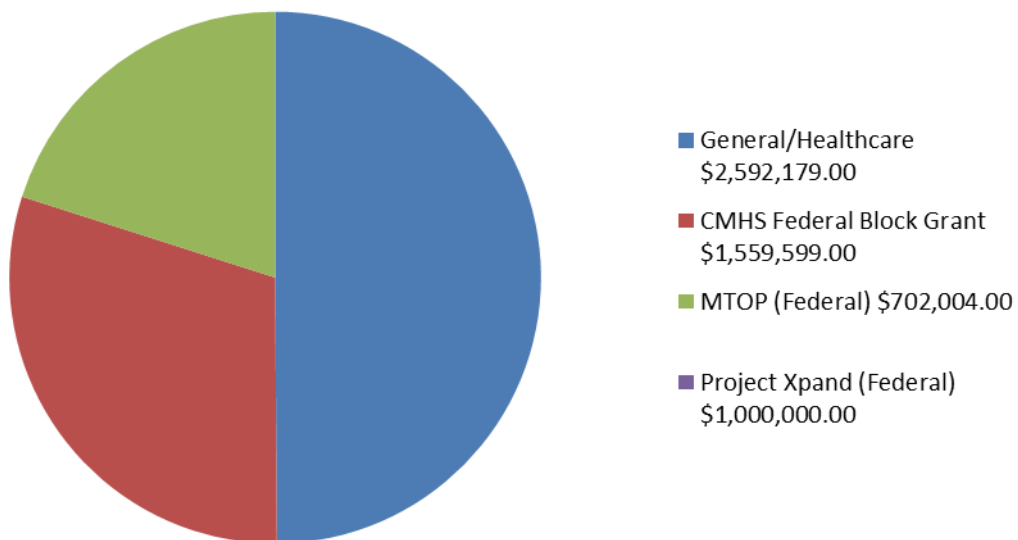
DMH's Division of Adult Services offers **grant funds** to community providers for some of the following services:

- Purchase of Services
- Personal Outcome Measures
- Intensive Case Management
- NAMI
- Drop In Centers
- Mobile Crisis Teams
- Supported Employment
- Crisis Stabilization Units
- Programs of Assertive Community Treatment
- Supervised/Supported Housing
- Community Support Services
- Physician Services
- AMAP Teams





## Children & Youth Funding



**General/Healthcare** - appropriated by the Mississippi State Legislature.

**CMHS Federal Block Grant** - Community Mental Health Services Block Grant mandated by the U.S. Congress.

**MTOP** - Mississippi Transitional Outreach Program federal grant funding.

**XPand** - Project XPand federal grant funding.

DMH's Division of Children & Youth Services offers **grant funds** to community providers to provide the following services:

- Crisis Intervention Services
- MAP Teams
- Juvenile Outreach Programs
- Training for Evidence-based Practices
- Prevention/Early Intervention
- Therapeutic Foster Care
- Therapeutic Group Homes
- Wraparound Facilitation
- Family Education/Support



- Project XPand
- Mississippi Transitional Outreach Program
- Crisis Stabilization Unit

# Alzheimer's Disease and Other Dementia

DMH is responsible for counseling, education and training for family members, caregivers and service providers. The Division of Alzheimer's Disease and Other Dementia has field offices located in Tupelo, Magee, Long Beach and the Central Office in Jackson. According to the Alzheimer's Association, an estimated 53,000 Mississippians are diagnosed with Alzheimer's disease.

The Mississippi State Strategic Plan for Alzheimer's Disease and Other Dementias 2015-2020 was released at the 15th Annual Conference on Alzheimer's Disease and Psychiatric Disorders in Older Adults. FY15 launched the development of implementation plans for goals reflected in the Plan. Plan components were reviewed at the Annual Alzheimer's Summit in December 2014. The Plan is a collaborative effort between DMH, the Alzheimer's Association Mississippi Chapter and the UMMC Mind Center with over 40 contributors from the public and private sectors including family caregivers.

## ***Law Enforcement Training Initiative***

Inclusion of the training course entitled, Older Adults, Dementia, Elder Abuse, and Silver Alert into the mandatory Basic Training Curriculum required at all Law Enforcement Training Academies. This is collaboration between DMH, Department of Public Safety, Itawamba Community College, Alzheimer's Association MS Chapter, DHS Division of Aging and Adult Services, AARP of Mississippi, and the Mississippi Gerontological Society. Inclusion of the course was piloted in December 2014 and approved for inclusion in January 2015. Training figures include pilot trainings.

Total Venues: 16

Total Participants: 461

## ***Additional LET trainings conducted outside of training academies:***

Total Venues: 2

Total Participants: 141

## ***Adult Day Services***

Footprints in Newton (operated by Central Mississippi Residential Center): 25 families

Garden Park: 21 families

Memory Makers: 29 families

First Friends: 14 families

## ***Virtual Dementia Tour***

Total Venues: 21

Total Participants: 595

## ***Health Fairs/Senior Fairs***

Total Venues: 28

Total Participants: 7,490

## ***Suicide Prevention in Older Adults:***

Total Presentations: 48

Total Attendance: 2,382

## ***Silver Alert Information:***

Total Presentations: 52

Total Attendance: 2,873



## ***Additional Trainings:***

Total Venues: 34

Total Participants: 1,764

## ***15th Annual Conference on Alzheimer's Disease and Psychiatric Disorders in Older Adults:***

Total Vendors: 44

Total Attendance: 430

# IDD Programs

DMH is responsible for the development and implementation of services to meet the needs of **individuals with intellectual and developmental disabilities**. This public service delivery system is comprised of five state-operated comprehensive programs, a state-operated program for youth who require specialized treatment, 14 regional community mental health/IDD centers and other non-profit community agencies/organizations that provide community services. Community and residential services are offered.

## **Boswell Regional Center**

Steven Allen, Director  
P.O. Box 128  
Magee, MS 39111  
Phone: 601-867-5000  
[www.brc.state.ms.us](http://www.brc.state.ms.us)

## **Ellisville State School**

Renee Brett, Director  
1101 Highway 11 South  
Ellisville, MS 39437-4444  
Phone: 601-477-9384  
[www.ess.state.ms.us](http://www.ess.state.ms.us)

## **Hudspeth Regional Center**

Mike Harris, Director  
P.O. Box 127-B  
Whitfield, MS 39193  
Phone: 601-664-6000  
[www.hrc.state.ms.us](http://www.hrc.state.ms.us)

## **North Mississippi Regional Center**

Edie Hayles, Director  
967 Regional Center Drive  
Oxford, MS 38655  
Phone: 662-234-1476  
[www.nmrc.state.ms.us](http://www.nmrc.state.ms.us)

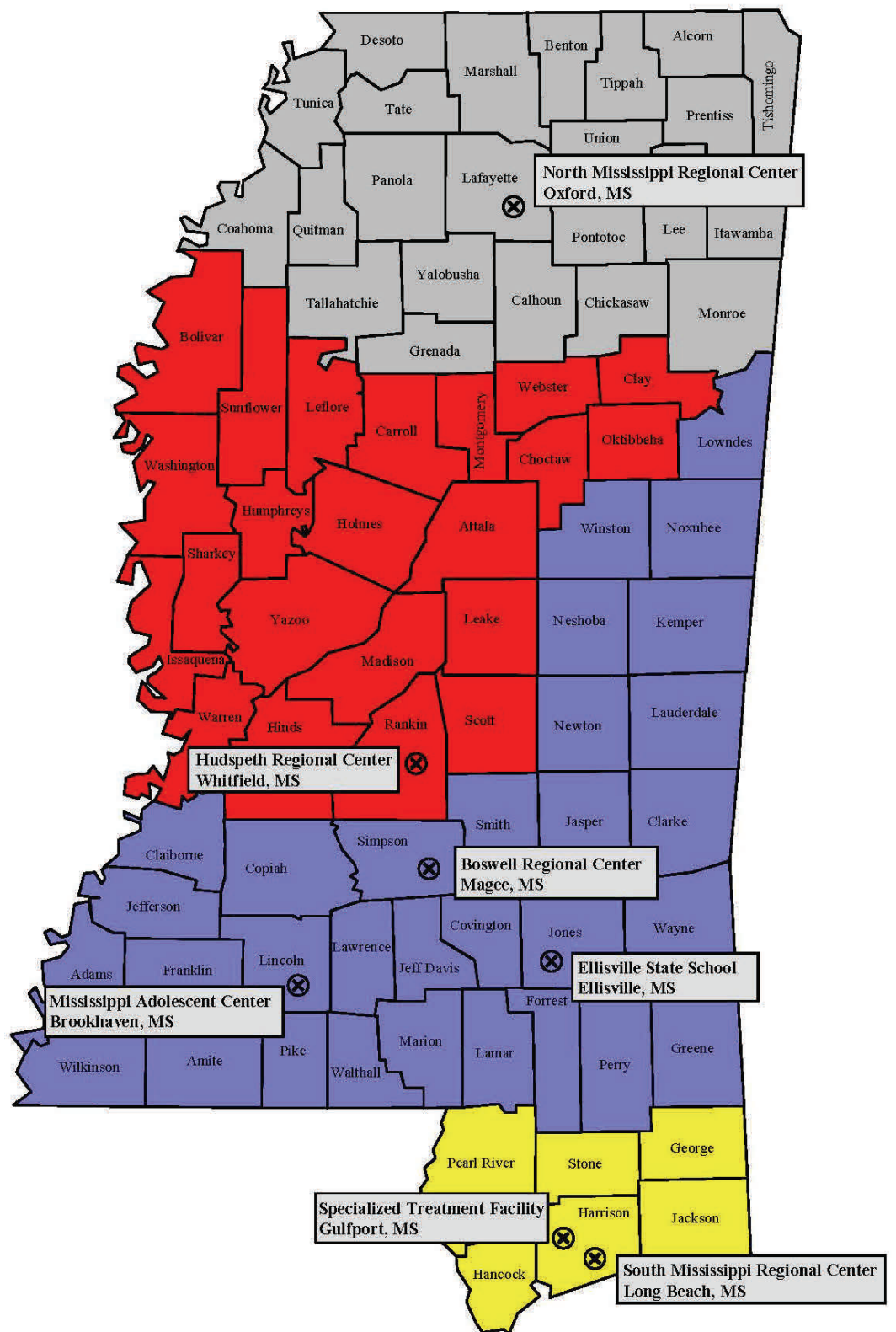
## **South Mississippi Regional Center**

Lori Brown, Director  
1170 W. Railroad St.  
Long Beach, MS 39560-4199  
Phone: 228-868-2923  
[www.smrc.ms.gov](http://www.smrc.ms.gov)

## **Mississippi Adolescent Center**

William Gates, Director  
760 Brookman Dr. Extension  
Brookhaven, MS 39601  
Phone: 601-823-5700  
[www.mac.dmh.ms.gov](http://www.mac.dmh.ms.gov)

# IDD Programs



\* Boswell Regional Center provides specialized treatment statewide.



Ellisville State School, located in Ellisville, provides services through residential and community programs to children and adults with intellectual and developmental disabilities.

## Individuals Served Ellisville State School in FY 2015

Residential Services	
Campus Residential	342
ICF/IID Community Homes	154
Supervised Living	44
Supported Living	20
Day Programs	
Prevocational Services	95
Day Services Adult	22
Work Activity	16
Supported Employment	20
Campus Employment	118
Campus School	29
Other Support Services	
Behavior Support	14
Home/Community Support	27
In Home Nursing Respite	4
Case Management	70
Diagnostic Services	310
Early Intervention	207
ID/DD Waiver Services	
Total # Receiving Waiver Services	485

Transitions to the Community	
*ICF/IID (Regional Programs) to ICF/IID Community Homes	10
**ICF/IID to the community	35

\*Transitions from ICF/IID (Regional Programs) to ICF/IID Community Homes are individuals that transition from ICF/IID on campus to 10-Bed ICF/IID Community Homes.

\*\*Transition from ICF/IID (both campus and 10-bed ICF/IID) are individuals that transition to homes in the community (either home with family or supervised living programs). This also includes all DMH certified supervised living programs.

North MS Regional Center, located in Oxford, provides individuals with intellectual and developmental disabilities a comprehensive array of services.

## Individuals Served North MS Regional Center in FY 2015

Residential Services	
Campus Residential	279
ICF/IID Community Homes	207
Supervised Living	43
Supported Living	11
Day Programs	
Prevocational Services	129
Day Services Adult	16
Work Activity	277
Community Employment	49
Campus Employment	90
Campus School	11
Other Support Services	
Behavior Support	12
Home/Community Support	72
In Home Nursing Respite	10
Case Management	6
Diagnostic Services	223
Assistive Technology	81
Early Intervention	355
ID/DD Waiver Services	
Total # Receiving Waiver Services	471

Transitions to the Community	
*ICF/IID (Regional Programs) to ICF/IID Community Homes	7
**ICF/IID to the community	9

\*Transitions from ICF/IID (Regional Programs) to ICF/IID Community Homes are individuals that transition from ICF/IID on campus to 10-Bed ICF/IID Community Homes.

\*\*Transition from ICF/IID (both campus and 10-bed ICF/IID) are individuals that transition to homes in the community (either home with family or supervised living programs). This also includes all DMH certified supervised living programs.

South MS Regional Center, located in Long Beach, provides individuals with intellectual and developmental disabilities a comprehensive array of services.

## Individuals Served South MS Regional Center in FY 2015

Residential Services	
Campus Residential	155
ICF/IID Community Homes	88
Supervised Living	9
Supported Living	9
Day Programs	
Prevocational Services	3
Day Services Adult	1
Work Activity	3
Supported Employment	2
Campus Employment & ICF/IID Work Program	86
Other Support Services	
Behavior Support	18
Case Management	57
Diagnostic Services	360
Assistive Technology	25
ID/DD Waiver Services	
Total # Receiving Waiver Services	427

Transitions to the Community	
*ICF/IID (Regional Programs) to ICF/IID Community Homes	6
**ICF/IID to the community	14

\*Transitions from ICF/IID (Regional Programs) to ICF/IID Community Homes are individuals that transition from ICF/IID on campus to 10-Bed ICF/IID Community Homes.

\*\*Transition from ICF/IID (both campus and 10-bed ICF/IID) are individuals that transition to homes in the community (either home with family or supervised living programs). This also includes all DMH certified supervised living programs.

Hudspeth Regional Center, located in Whitfield, provides individuals with intellectual and developmental disabilities a comprehensive array of services.

## Individuals Served Hudspeth Regional Center in FY 2015

Residential Services	
Campus Residential	259
ICF/IID Community Homes	114
Supervised Living	42
Supported Living	34
Day Programs	
Prevocational Services	70
Work Activity and ICF/IID Work Program	250
Supported Employment	28
Campus Employment	64
Campus School	23
Other Support Services	
Behavior Support	13
Home/Community Support	60
In Home Nursing Respite	4
Case Management	23
Diagnostic Services	202
Assistive Technology	971
ID/DD Waiver Services	
Total # Receiving Waiver Services	683

Transitions to the Community	
*ICF/IID (Regional Programs) to ICF/IID Community Homes	5
**ICF/IID to the community	7

\*Transitions from ICF/IID (Regional Programs) to ICF/IID Community Homes are individuals that transition from ICF/IID on campus to 10-Bed ICF/IID Community Homes.

\*\*Transition from ICF/IID (both campus and 10-bed ICF/IID) are individuals that transition to homes in the community (either home with family or supervised living programs). This also includes all DMH certified supervised living programs.

Boswell Regional Center, located in Magee, provides individuals with intellectual and developmental disabilities a comprehensive array of services.

## Individuals Served Boswell Regional Center in FY 2015

ICF/IID Services	
Campus Residential	125
ICF/IID Community Homes	51
Work Activity (campus)	68
Community Services	
Supervised Living	131
Supported Living	42
Home/Community Services	27
Supported Employment	46
Case Management	9
Pre-Vocational	98
Crisis Support/Respite	67
Day Service Adult	182
HCBS Support Coordination/Waiver	330
Other Support Services	
Diagnostic and Evaluation Services	120
SUCCESS - Crisis Transition Program	28

Transitions to the Community	
ICF/IID (Regional Programs) to ICF/IID Community Homes	4
ICF/IID to the community	19

The Mississippi Adolescent Center is a residential program located in Brookhaven dedicated to providing adolescents with intellectual and/or developmental disabilities an individualized array of rehabilitation service options.

## Individuals Served MS Adolescent Center in FY 2015

Total Served
51
Transitions to the Community
15



## Early Intervention

Services are provided to children birth to age three who have an intellectual and/or developmental disability (IDD) or who are at risk for such. Services include comprehensive and multidisciplinary evaluations, speech/language therapy, occupational therapy, physical therapy, and educational interventions. The program is in collaboration with the Mississippi Department of Health's First Steps Early Intervention Program. **In FY 2015, 562 individuals were served.**

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## Work Activity Centers

Work Activity Centers are provided for individuals 16 years and older who have IDD. The service assists individuals in increasing their productivity and self-sufficiency and provides opportunities for community integration. **In FY 2015, 887 individuals were served.**

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## Case Management

Services assist individuals with IDD in gaining access to any needed social, medical, and/or educational services in order to live successfully in the community. **In FY 2015, 365 individuals were served.**

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## Community Living

Services are provided to offer needed supervision, monitor health and physical conditions, and assist with activities of daily living. Community Living provides different levels of assistance ranging from 24 hours a day, seven days a week to weekly contact. This service includes supported living and supervised living. This number does not include ICF/IID Community Homes which are listed under each Regional Center. **In FY 2015, 759 individuals were served.**

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## Supported Employment

Supported Employment services are designed to increase the independence, community integration, and productivity of people by assisting them in finding and keeping community employment. The service consists of such elements as recruitment of individuals from other services to competitive employment, job finding, matching the individual to appropriate jobs, and employment maintenance. **In FY 2015, 327 individuals were served.**

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## **Home and Community Supports**

Services are provided to meet the daily living requirements of individuals and to help ensure adequate support so the individuals can be maintained at home or in the community. **In FY 2015, 1,210 individuals were served.**

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## **Day Services - Adult**

Day Habilitation is a community program for people who typically are more severely involved and require a greater degree of assistance with activities of daily living. **In FY 2015, 692 individuals were served.**

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## **In-Home Nursing Respite**

In-home Nursing Respite services are provided to individuals on a short-term basis for the purpose of giving the family a break. **In FY 2015, 198 individuals were served.**

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## **Occupational Therapy, Physical Therapy and Speech/Language Therapy**

These therapies are provided by therapists licensed according to state law for their respective duties and regulations and are approved Medicaid providers. **In FY 2015, 19 individuals were served.**

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## **Prevocational Services**

Services are designed to lead to vocational skill development in order to obtain community employment. **In FY 2015, 1,071 individuals were served.**

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## **Support Coordination**

Services are designed to assist individuals in accessing services in the community which meet their individual needs and prevent or delay placement away from their home and community. **In FY 2015, 2,296 individuals were served.**

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## **Supervised Residential Habilitation**

Services provide 24 hours a day, seven days a week on-site support and supervision for individuals living in the community. **In FY 2015, 544 individuals were served.**

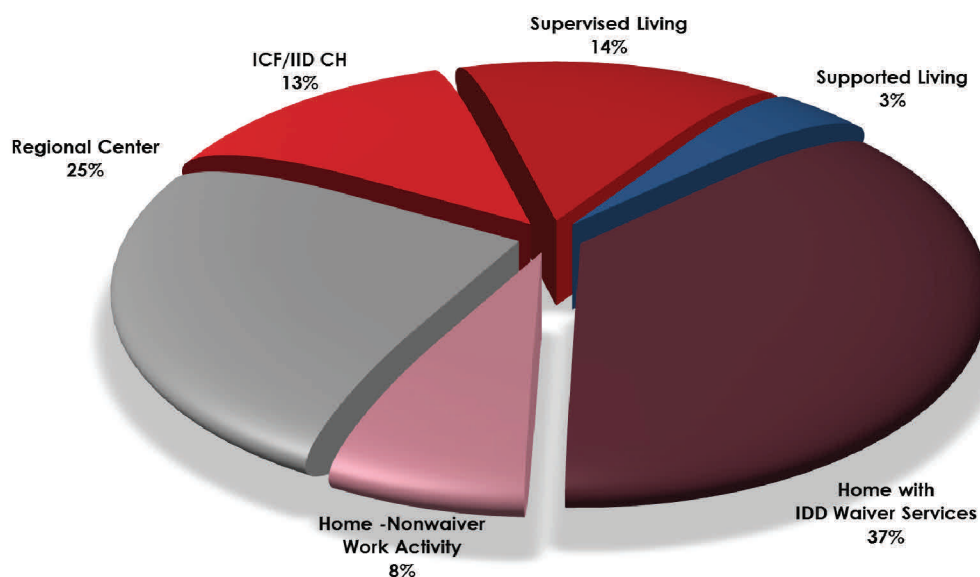
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## **Supported Employment**

Services are designed to increase independence, community integration and productivity of individuals with intellectual/ developmental disabilities by assisting them with finding and maintaining community employment. **In FY 2015, 237 individuals were served.**

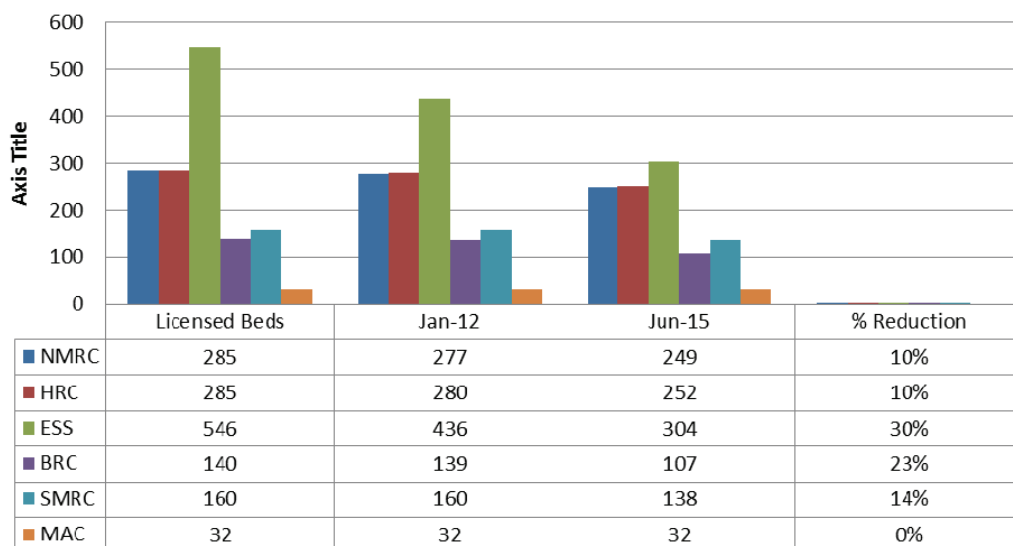
## Serving Individuals With Intellectual and Developmental Disabilities

### Where Do They Live?



As of 6/30/15 per Bureau of Intellectual and Developmental Disabilities Monthly Data Report - Includes state and other DMH Certified Providers.

### ICF/IID Census







[www.dmh.ms.gov](http://www.dmh.ms.gov)  
December 2015