

# MIRCI

FOUNDED IN 1960

CELEBRATING 49 YEARS  
OF SERVICE

**2009  
ANNUAL  
MEETING  
&  
REPORT**



Gaining New Ground

**ANNUAL BOARD OF DIRECTORS  
MEETING AGENDA**

*June 10, 2009*

**WELCOME  
INVOCATION**

Mary Winter Teaster  
David Wells

**HORS D' OEUVRES**

**CALL TO ORDER  
INTRODUCTIONS  
DIRECTOR'S REPORT  
BOARD REPORT**

Mary Winter Teaster  
Mary Winter Teaster  
Julie Ann Avin  
Mary Winter Teaster

**GUEST SPEAKERS**

Feliciane (Liz) Green & Lawrence Haynes  
MIRCI, Homeless Recovery Center

**RECOGNITION OF AWARDS**

*Dedicated Service*

Mary Winter Teaster/ Julie Ann Avin

*Leadership*

David Wells

*Donald-Harding Service Award*

Mary Winter Teaster

*Bobby Monts Outstanding Employee Award*

Julie Ann Avin

*Frank Clark Scholarship Award*

Mary Winter Teaster

**PRESENTATION OF 2009-2010 OFFICERS & NEW BOARD  
MEMBERS**

Mary Winter Teaster

**ADJOURNMENT**



## *MIRCI's MISSION*

MIRCI is a nonprofit organization whose mission is to provide community based services to individuals recovering from mental illness or emotional disorders in the Midlands of South Carolina through counseling, housing and financial management initiatives.

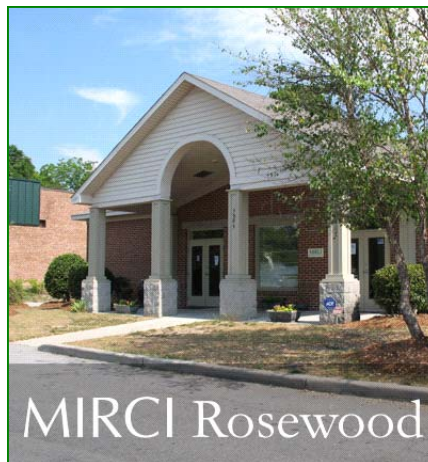
### *A few of MIRCI's credits...*

- \* HomeBase has been named a Local Best Practice Winner by the SC State Office of the US Department of Housing & Urban Development (HUD), as well as one of the 75 Best High Performing Projects by the US Department of HUD.
- \* HomeBase placed second in the National Eli Lilly Foundation Home Sweet Home Award Competition.
- \* Both the Peer Specialist program and the Assertive Community Treatment team in the Homeless Recovery Center are recognized Best Practices by the Substance Abuse and Mental Health Services Administration.
- \* MIRCI guarantees that over 92% of every dollar goes directly to services for folks in recovery of a mental illness.



*MIRCI's mission is accomplished through a variety of initiatives including:*

***Social Rehabilitative Services*** — Friendship Center – a counseling and peer support day program for individuals with mental illness. This program provides both structured and unstructured activities which aid in improving social interaction. Friendship Center is an important component to an individual's recovery process.



***Supportive Housing/ Assisted Housing*** — a permanent housing and counseling program for individuals with mental illness. Providing safe, affordable housing is a must for individuals in recovery. MIRCI provides for that need with four complexes in the Midlands. Managed and operated by a professional staff, these complexes provide a key step to stability for many Midlands residents.

***Representative Payee*** — a financial management program for individuals in need of assistance managing disability benefits. By assisting clients in making informed decisions about their lives and ensuring that benefit payments are used for basic needs (rent, food, medication and utilities), this program helps prevent homelessness and insures that basic needs are met.

***HomeBase*** — a housing program for homeless individuals and families who need intensive therapeutic services. The goal of HomeBase is to provide individuals and families with the stability and supportive services they need to make the transition from homelessness to permanent, safe housing.

***Homeless Recovery Center*** — Open 365 days a year from 7:30 am to 5:00 pm, the center is managed by an Assertive Community Treatment team. This pilot program combines intensive services with social rehabilitation therapy and peer support to enable individuals to recover and regain meaningful lives while making the transition from homelessness to supported independent living.

***Group Homes*** — Opened in 2007, this housing program is for individuals who would otherwise need hospitalization. Each home has 24 hour staffing where clients receive mental health support services, as well as opportunities to participate in educational and recreational activities.

## *2008 Program Overview*



*MIRCI serves more than 1,600 people* a year through our counseling, housing and financial management programs. Individuals must reside in Richland, Lexington or Fairfield counties and are generally referred by a variety of sources including Columbia Area Mental Health and Lexington County Community Mental Health Centers.

These individuals are recovering from a variety of mental illnesses including: schizophrenia, severe depression, bipolar disorder and are often dually diagnosed (mental illness with co-occurring substance abuse). People with serious and persistent mental illness often require supportive services to develop skills to allow them to live independently. The source of income for the majority of MIRCI clients is social security disability and/or SSI and it is estimated that more than 90% of these individuals live below the poverty level.

### *Clients Served in 2008:*

- \* Friendship Center served 711 members.
- \* The Representative Payee program served 400 individuals.
- \* The HomeBase program served 88 adults and 18 children.
- \* The Supportive Housing program served 81 individuals.
- \* The Homeless Recovery Center served 319 individuals.
- \* The Group Homes served 15 individuals.

### *Percent of Organization Spending in 2008:*

- \* Administration costs totaled 4.5%
- \* Fundraising costs totaled 2.5%
- \* Program services totaled 93%



## RESULTS FROM PRE and POST STUDY OF INPATIENT HOSPITALIZATION AND ER USE BY MIRCI CLIENTS

The Mental Illness Recovery Center, Inc. specializes in the recovery process. When a mental illness disrupts someone's life, he or she will require medical, psychiatric and rehabilitative treatment. They will also need to recover from the disruptions and losses caused by the illness. MIRCI provides opportunities for many aspects of this recovery process to members of its programs.

One of the challenges facing managers of health and social programs is identifying outcome measures that provide meaningful analysis of the effectiveness of their programs. Often some of the most meaningful measures of success relate to aspects outside of the programs themselves and thus present problems in data collection and analysis. For example, with persons struggling with serious mental illness, success in helping them manage their illnesses will hopefully result in reduced use of inpatient hospitalization services and emergency room services. Not only will avoidance of having to use these services mean great cost savings, but also and more importantly, will mean an improved quality of life in living with a disease that is stable and well managed.

In 2008, MIRCI was the recipient of a Blue Cross Blue Shield Foundation grant. As a part of this grant, MIRCI entered into a contract with the South Carolina Budget and Control Board, Office of Research and Statistics (ORS). The purpose of this arrangement was for developing a data collection and analysis system that would provide outcome measurements of the type discussed above.

Two hundred twelve (212) MIRCI clients who entered MIRCI services at some point between January 1, 1997 and December 31, 2007 were linked via the unique tracking number to the ORS general inpatient hospitalization and emergency room visits databases. Each client's hospital/ ER experience for the 12 months preceding the entry date and for 12 months following the entry date were captured and placed into a statistical analysis file. A similar method was used with psychiatric specialty hospital data for MIRCI entrants (182 clients) between January 1, 2002 and December 31, 2007 to accommodate for the later beginning of specialty hospital data in the ORS system.

### Summary of Findings

For the 212 clients linked to the ORS general hospital data system:

- \* The rate of hospitalization for the year after beginning MIRCI services dropped by over 16% from the year preceding entry into MIRCI.
  - When mental illness was the reason for the hospitalization, the length of time the patient needed to be hospitalized dropped by almost 2 days
- \* The rate of emergency department visits dropped by over 26% once the clients enrolled in MIRCI
  - Emergency department visits where mental illness was the reason for the visit dropped even more, by 30%
  - Neurotic disorder was the most common reason for visiting the ER for a mental illness; these visits dropped by over 52%
  - Emergency department visits for clients in the **HomeBase** program dropped by over 45% and for the **Homeless Recovery Center** clients, the drop was over 23%.

For the 182 clients linked to the ORS psychiatric specialty hospital database:

- \* The rate of inpatient hospitalization dropped by 54% in the year following enrollment
- \* The time needing to be hospitalized in these specialty hospitals dropped by 8 days.

This analysis shows substantial decreases in hospital and emergency department use once clients are assisted by MIRCI programs.

**Mental Illness Recovery Center, Inc.**  
**Statement of Functional Expenses**  
**For the year ended December 31, 2008**

	Friendship Center	Representative Payee	Housing Support	Shelter Plus Care	AHP Richland County	AHP Lexington County	Homeless Recovery Ctr (HRC)	HRC Housing Support	MIRCI Group Homes	Total Program Services	General and Administrative	Fundraising	Total Support Services	Total Expenses
Salaries	\$ 151,058	92,859	\$ 90,799	\$ 244,942	\$ 148,239	\$ 27,126	\$ 327,741	\$ 145,464	\$ 421,905	\$ 1,650,133	\$ 31,815	\$ 16,360	\$ 48,175	\$ 1,698,308
Payroll taxes	12,564	7,635	7,033	19,278	11,881	2,262	25,650	9,906	33,924	130,133	2,126	1,453	3,579	133,712
Fringe benefits	14,381	10,884	13,197	33,197	25,671	3,543	40,209	14,448	35,910	191,440	2,681	1,375	4,056	195,496
<b>Total personnel</b>	<b>178,003</b>	<b>111,378</b>	<b>111,029</b>	<b>297,417</b>	<b>185,791</b>	<b>32,931</b>	<b>393,600</b>	<b>169,818</b>	<b>491,739</b>	<b>1,971,706</b>	<b>36,622</b>	<b>19,188</b>	<b>55,810</b>	<b>2,027,516</b>
Professional fees	2,674	2,498	921	2,555	1,597	249	3,152	-	22,118	35,764	7,102	9	7,111	42,875
Insurance	10,675	5,858	26,896	14,649	12,277	3,314	11,199	1,432	12,218	98,518	13,096	-	13,096	111,614
Building expense	7,659	702	-	6,662	3,887	742	19,287	-	-	38,939	12,923	-	12,923	51,862
Utilities	14,929	673	-	4,415	101	-	17,272	487	819	38,696	11,744	-	11,744	50,440
Telephone	1,759	2,201	1,689	2,506	1,927	722	4,619	399	664	16,486	2,106	-	2,106	18,592
Office supplies	2,092	6,407	774	1,267	2,664	11	4,363	102	1,161	18,841	4,843	-	4,843	23,684
Postage	1,622	3,117	387	930	323	3	295	-	36	6,713	5,282	50	5,332	12,045
Advertising	820	1,135	52	139	78	16	-	-	741	2,981	72	4	76	3,057
Vehicle expenses	13,215	475	2,550	8,713	5,813	2,961	9,849	922	6,686	51,184	2,794	-	2,794	53,978
Minor equipment and maintenance	8,755	1,441	448	4,688	1,898	36	5,074	-	4,696	27,036	15,070	-	15,070	42,106
Program service supplies	14,476	-	19,924	381,547	699	31	68,396	91,955	23,579	600,607	55	-	55	600,662
Special events expense	-	-	-	-	-	-	-	-	-	-	-	5,503	5,503	5,503
Bad debt expense	-	-	-	-	-	-	-	-	-	-	6,406	-	6,406	6,406
Miscellaneous	1,153	520	1,715	2,700	1,458	95	13,419	1,004	5,031	27,095	17,322	-	17,322	44,417
<b>Total expenses before depreciation</b>	<b>257,832</b>	<b>136,405</b>	<b>166,385</b>	<b>728,188</b>	<b>218,513</b>	<b>41,111</b>	<b>550,525</b>	<b>266,119</b>	<b>569,488</b>	<b>2,934,566</b>	<b>135,437</b>	<b>24,754</b>	<b>160,191</b>	<b>3,094,757</b>
Depreciation	31,127	10,571	10,298	21,365	16,199	-	19,045	7,122	-	115,727	9,202	-	9,202	124,929
<b>Total expenses</b>	<b>\$ 288,959</b>	<b>\$ 146,976</b>	<b>\$ 176,683</b>	<b>\$ 749,553</b>	<b>\$ 234,712</b>	<b>\$ 41,111</b>	<b>\$ 569,570</b>	<b>\$ 273,241</b>	<b>\$ 569,488</b>	<b>\$ 3,050,293</b>	<b>\$ 144,639</b>	<b>\$ 24,754</b>	<b>\$ 169,393</b>	<b>\$ 3,219,686</b>

***MIRCI***  
***BOARD OF DIRECTORS***  
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***MIRCI OFFICERS***  
***2009-2010***

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David Wells, Vice President  
Zealy Bradshaw, Treasurer  
Gerry Herron, Secretary  
Tim Langfitt, Immediate Past President

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Julie Ann Avin, Executive Director  
Stephanie Williams, Director of Finance and Administration  
John Lopez, Clinical Director  
Liz Norris, Director of Operations & Evaluations  
Liz Green, Nurse Manager, Homeless Recovery Center  
Sharon Gary, Group Home Administrator  
Dianne Miller Williams, HomeBase Director  
Rhonda Clark, Housing Director  
Marion Muscillo, FC Director  
Bettina Evans, Assisted Housing Director  
Dixie Winslow, Executive Assistant

*Mental Illness Recovery Center, Inc.*

*MIRCI*

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