



# FISCAL YEAR 2017 ANNUAL REPORT

**impact**

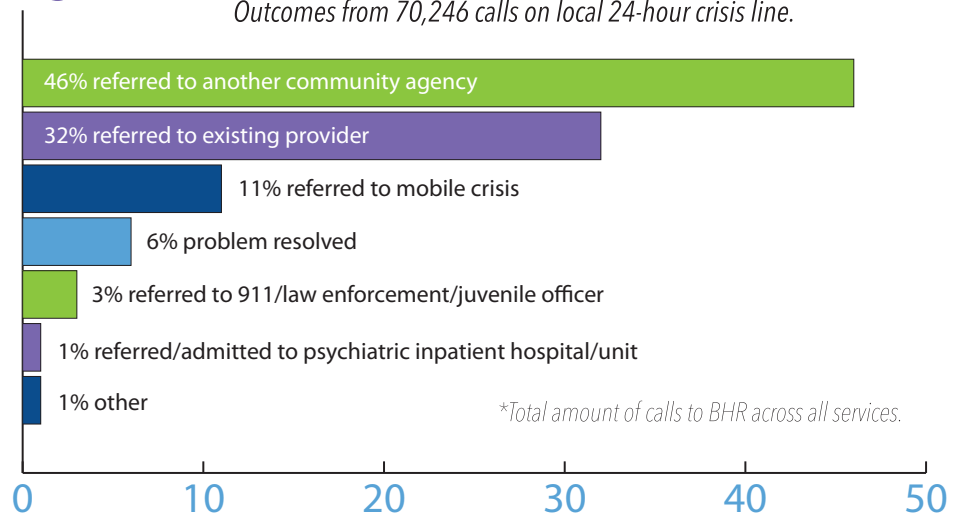


## BY THE NUMBERS

Each year, BHR impacts more lives. Over the last fiscal year our clinical contact center experienced a six percent increase in calls. Our trained clinicians strive to answer each call within 30 seconds and provide the best care and information possible. With the need for behavioral care on the rise, we will continue to expand our reach to ensure everyone has access quality care when and where they need it.

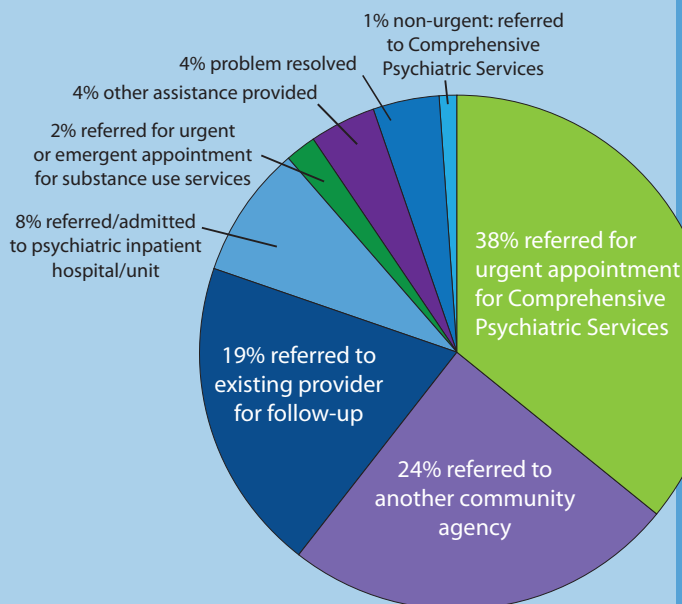
**BHR Received 308,501 calls in FY17\***

*Outcomes from 70,246 calls on local 24-hour crisis line.*



**BHR's services are available  
24 hours a day,  
seven days a week,  
365 days a year.**

**BHR responded to 1,473 clients through mobile outreach.**



## ABOUT US

### MISSION

BHR ensures compassionate and immediate barrier free access to behavioral healthcare.

### CORE VALUES

#### EXCELLENCE

We are committed to superior performance and strive to set the standards for quality.

#### RESPECT

We are committed to treating each other, our clients, our partners and our community with the utmost dignity, compassion and concern.

#### INTEGRITY

We are committed to conducting ourselves ethically and to being open and honest in all our interactions.

#### ACCESSIBILITY

We are committed to providing services 24/7 and being open and accessible to all.

### VISION

We envision a world where all people are empowered to receive essential help and support to promote healthy living.



## FY2017 BOARD OF DIRECTORS

**Teresa Brandon**, Chair, *Hopewell Center*

**Margo Pigg**, Vice Chair, *COMTREA*

**Joe Yancey**, Secretary & Treasurer  
*Places for People*

**Barbi Berrong**, *BJC Behavioral Health Services*

**Laura Heebner**, *Compass-Crider Health Center*

**Lara Pennington**, *Queen of Peace Center*

## EXECUTIVE TEAM

**Pat Coleman**, President and CEO

**Carisa Hill**, Chief Financial Officer

**Angela Tate**, Vice President of Operations

**Bart Andrews, Ph.D.**, Vice President of Clinical  
Practice and Evaluation

Dear Friends and Partners,

Do you know that one out of four American families has a relative with a mental illness? Mental illness can affect persons of any age, race, religion or income. Mental illness is not the result of personal weakness, lack of character or poor upbringing. Mental illness shows no boundaries.

At BHR, we understand the many challenges people face with mental illness. We also know that recovery and building a healthy, rewarding life is possible. Our skilled, specialized team is committed to our mission to ensure compassionate and immediate barrier-free access to behavioral health services.

As you read our Annual Report, you'll see the significant impact we've made – and are making – to ensure high-quality, affordable care is offered to all who need us. We're using advanced technology and partnering with law enforcement to help prevent any mental health crisis. We're working together with organizations to offer virtual behavioral health care support. We're advocating to our local legislators and in Washington, D.C. for better mental health care, and we're using our Safety First Suicide Follow-Up Program as a benchmark to enhance care. And those are just some of our successful initiatives.

Our work is not done. Mental illness touches all of us, and everyone deserves access to wellness. With our dedicated board, we're striving to make a bigger impact in the delivery of access / crisis intervention in Missouri's eastern region. I have no doubt our competent team and our core values of accessibility, respect, excellence and integrity will help us get there.

Sincerely,

A handwritten signature in black ink that reads "Pat Coleman".

Pat Coleman  
President & CEO

# IMPACT

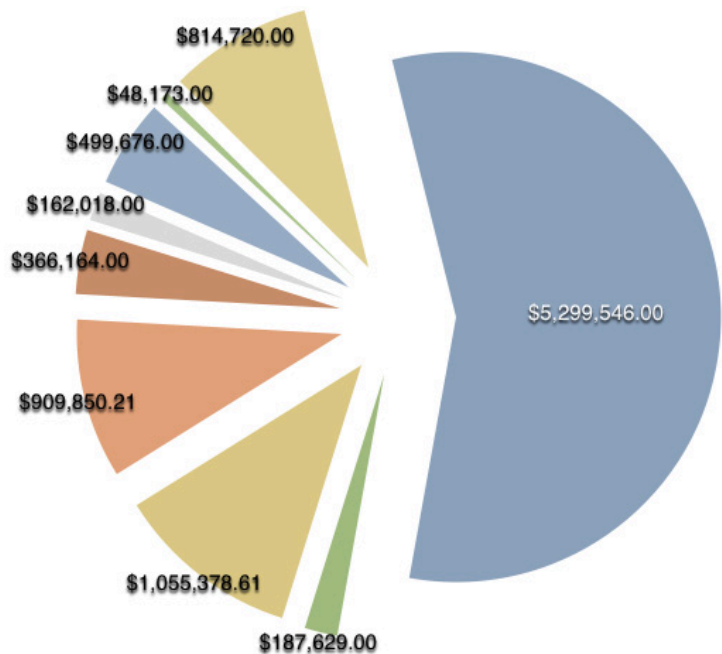
## Fiscal Year 2017 (July 2016 – June 2017)

BHR had a year of strong impact and growth. These significant accomplishments were the successful result of collaborative teamwork from its committed board, expert staff and the many partnerships in support of delivering high-quality behavioral health care.

- Launched telebehavioral health programs in emergency departments.
- Completed first formal evaluation report of Safety First Suicide Follow-Up Program.
- Increased annual revenue by 5 percent.
- Added three new staff positions.
- Awarded local three-year grant, totaling \$1,106,096.
- Implemented remote work option for employees.
- Redesigned website for efficiency and brand.

- Clinical Mental Health Counseling/Crisis, 56%
- Missouri Crisis Access Response System, 2%
- Employee Assistance Program, 11%
- Grants, 10%
- Chemical Dependency, 4%
- Corporate Compliance, 2%
- Hospital Consults, 5%
- Emergency Department Enhancement, 1%
- Other Revenue, 9%

## Revenue by Market Sector for Period Ending June 30, 2017

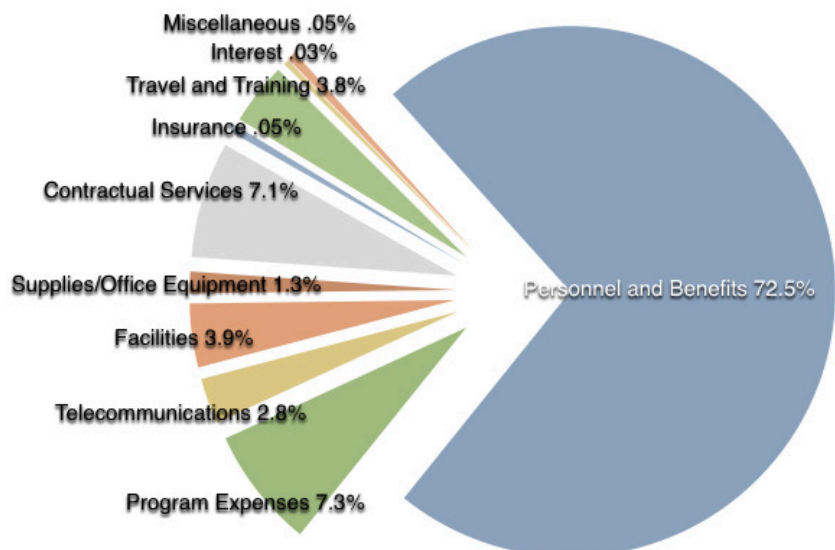


Total Revenue: \$9,343,155

# EXPENSES

## Expenses for Period Ending June 30, 2017

- Personnel and Benefits 72.5%
- Program Expenses 7.3%
- Telecommunications 2.8%
- Facilities 3.9%
- Supplies/Office Equipment 1.3%
- Contractual Services 7.1%
- Insurance .05%
- Travel and Training 3.8%
- Interest .03%
- Miscellaneous .05%



Change in Net Assets:  
\$360,215

Total Expenses: \$8,982,941

# PROGRAM HIGHLIGHT

## Safety First Suicide Follow-Up

BHR's Safety First Suicide Follow-Up Program, funded by the Missouri Foundation for Health, evaluated a number of important questions pertaining to lethality, elevated risk levels, psychological pain, outcomes and satisfaction of clients. The Follow-Up Program also determined whether there were significant decreases in specific variables as a result of one or more interventions by a crisis counselor.

Here's a representation of key findings from the 1,085 clients who participated in the Follow-Up Program:

- 4% (41) of these callers were in the middle of a suicide attempt, and BHR was able to ensure safety of 100% of these callers.
- 73% (792) of these callers were experiencing active suicide thoughts at time of call.
- BHR was successful in providing support, intervention and service connection, and 89% of callers were successfully diverted from emergency services.
- 89% percent of callers agreed to ongoing follow-up services.
- 94% of callers who were calling because they were concerned about someone being at risk of suicide accepted ongoing follow-up services.
- Psychological pain was a statistically significant predictor to level of suicide risk.

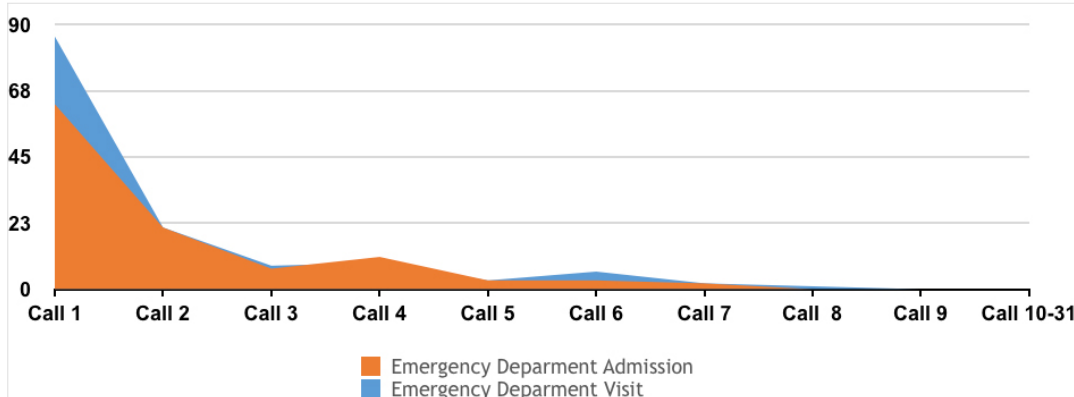
Clients who had made a suicide attempt, had current intent or engaged in preparatory behaviors reported significantly more "unbearable" pain at time of initial call compared to other callers. This group also showed 15% decrease in psychological pain at time of first follow-up call – a statistically significant reduction.

## MARKED REDUCTIONS IN SUICIDE THOUGHTS

*Of the 702 clients who completed the Follow-Up Program, only 5% (34) experienced suicide thoughts at last follow-up since last contact.*

## HIGH PROGRAM SATISFACTION

*On a ten-point scale, **90%** of callers rated satisfaction of program as nine or above, and no callers rated the program below five.*



**Decline in Use  
of Emergency  
Department Services  
during Follow-Up by  
Number of Clients and  
Follow-up Contact.**



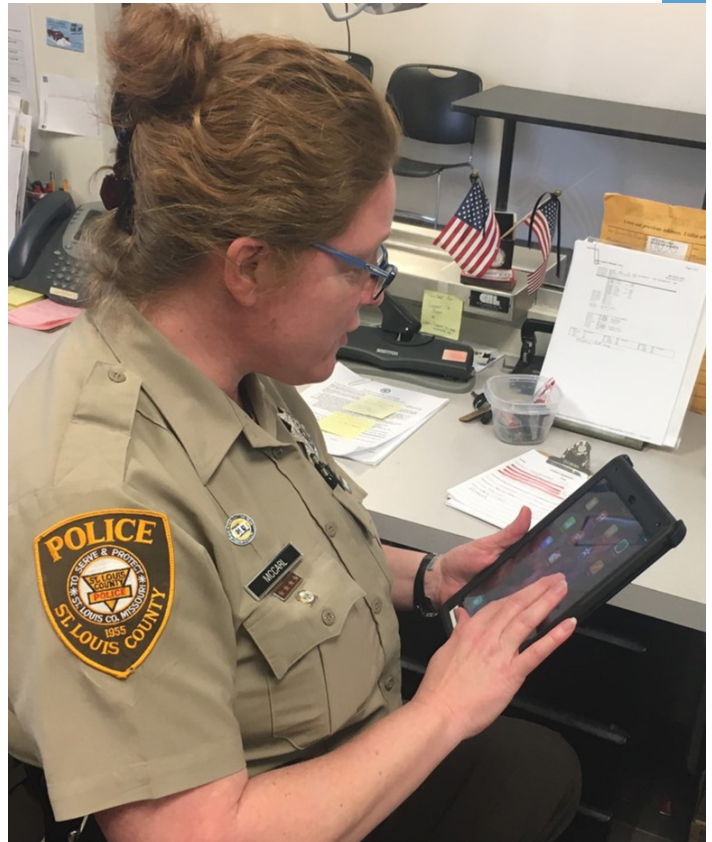
# PROGRAM HIGHLIGHT

## Virtual-Mobile Crisis Intervention

Through a grant from Missouri Foundation for Health and a partnership with St. Louis County Police Crisis Intervention Team (CIT), BHR implemented a Virtual-Mobile Crisis Intervention program (V-MCI), which helps police cope with difficult calls for service and increase community safety when faced with an individual in a mental crisis. The program seeks to reduce the reliance of emergency department visits to address emotional crises.

With the V-MCI, a St. Louis County law enforcement officer can contact a BHR mental health clinician via face time by iPad to provide real-time counseling to the individual in crisis. If additional assistance is needed, BHR mobile outreach staff are dispatched to provide on-site support and assessment.

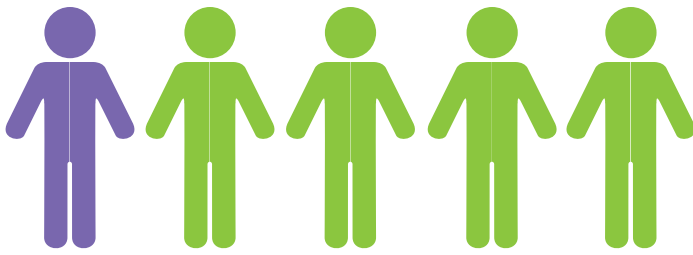
Currently, St. Louis County Police Department's CIT officers respond to approximately 5,000 calls per year. Approximately, 90 percent of these call result in transporting the individual to an emergency department for a mental health evaluation.



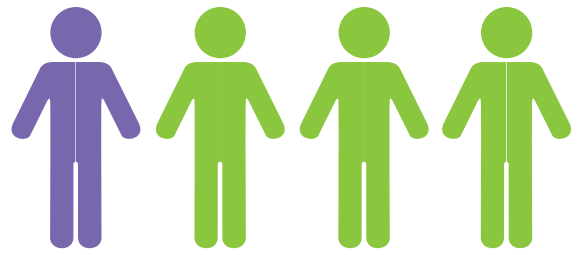
*"The Virtual-Mobile Crisis Intervention program embraces technology and affords officers the ability to connect a person suffering from a mental health crisis to appropriate resources in a timely manner. We are pleased to partner with Behavioral Health Response on such a worthy endeavor."*

**Police Chief Jon Belmar**  
St. Louis County Police Department

# PROGRAMS AND SERVICES



**1 in 5 youth under 18 has a mental illness**



**1 in 4 adults has a mental illness**

## **Crisis Hotline**

BHR's Crisis Hotline provides free, confidential counseling 24 hours a day, 365 days a year to anyone living in Missouri's eastern region.

## **Mobile Outreach Services**

BHR offers mobile outreach care when crisis callers would benefit from a higher level of assistance. Qualified, trained professionals visit a caller's residence or local agency to meet face to face and complete a crisis assessment, making recommendations for care. Follow-up services are available to help facilitate a caller's connection to care programs.

## **St. Louis County, St. Louis City, St. Charles County and Franklin County**

### **Youth Connection Helplines**

The Youth Helplines provides a one-stop access point to youth 19 years and younger to receive help if feeling unsafe, contemplating running away or facing a personal problem any time day or night. Youth can call the Helpline or go to the nearest Safe Place site for "Safe Place help." BHR's staff assesses the situation, offers counseling, transportation or other resources.

## **Follow-Up Program**

Eligible crisis callers receive a follow-up call within 48 hours by a Follow-up coordinator who continues to ensure support, safety and assistance with referrals and/or follow-up until the crisis is resolved or linked to other services.

## **Zero Suicide**

This initiative promotes the tenant that suicide is 100 percent preventable for individuals who are receiving health care services. It's a set of tools, structure and mindset of doing everything possible to prevent suicide. The program recognizes a need for a strong commitment from leadership and seeks input and investment from all agency employees in finding ways to systematically improve suicide prevention services.

## **Trauma Informed Care**

This care recognizes the widespread impact of trauma and implements potential paths of recovery.

## **Mental Health Care Trainings**

BHR offers a variety of free mental health care trainings to help community residents be equipped to handle adults or adolescents who are experiencing a mental health challenge or crisis.

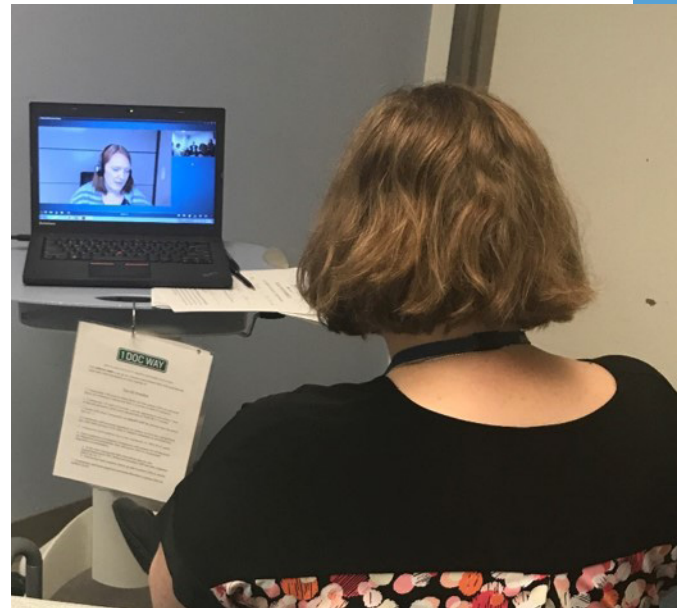
# BHR EXPANDS ITS REACH TO ENHANCE CARE

## Virtual Care

BHR expanded its telebehavioral health services to emergency departments in an effort to provide patients real-time access to a behavioral health provider. It actively provides virtual, on-demand behavioral health assessments and continuous bed placement services, follow-up care coordination and post-discharge for emergency departments (ED) and acute medical units through a telehealth platform. This innovative care delivery method can reduce patient wait and boarding times as well as inpatient admissions and return visits to the ED.

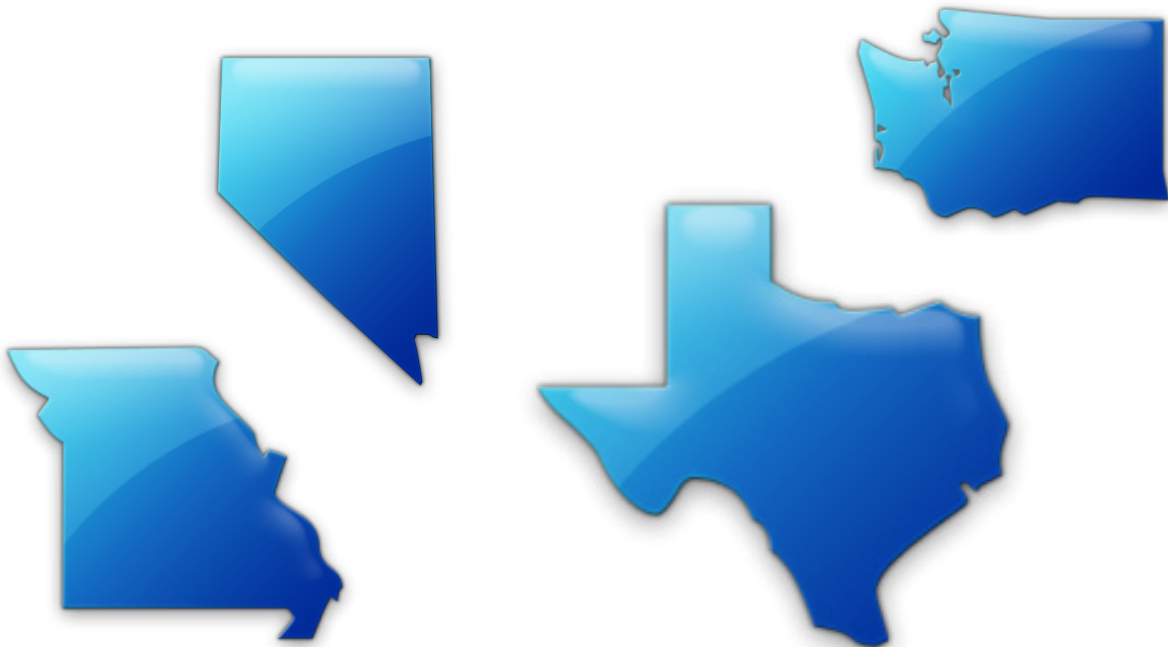
Currently, BHR maintains hospital telebehavioral health contracts in Missouri, New Mexico and New Hampshire.

This new, specialized service is a significant milestone for BHR as it's estimated one in five people in the United States has a mental illness and current wait times to see a behavioral health expert average 30 days. BHR is changing how behavioral health services are delivered in today's hospital ED.



## Managed Care

BHR expanded its behavioral health care with managed care organizations into four states, Missouri, Texas, Washington and Nevada, providing clinical contact center services including 24/7 crisis texting with clinicians and utilization review, a critical evaluation to maintain high-quality care and cost efficiency.





# BHR is Proud of Successfully Completing Its Fiscal Year 2015 - 2017 Strategic Plan

## Enhanced and Developed Information Technology

- Enhanced IT through integration of phone system, data base and reporting systems.
- Developed IT innovations and management structures to increase operational efficiencies and effectiveness.

## Position for Strategic Growth

- Developed an operational plan for funding and implementing a statewide Missouri call center.
- Researched and developed a service outcome (rather than output) business model.
- Increased BHR Worldwide marketing and outreach to regional and national corporations, managed care organizations, Affordable Care Organizations and other potential new customers.

*Expanding BHR's market share will have an impact on company growth. To sustain company growth BHR's current structure must be reorganized to function more efficiently. To improve functionality and efficiency the company must develop its infrastructure to successfully sustain team performance and company growth.*

## BHR'S 2018 - 2020 STRATEGIC PLAN

Over the next three fiscal years BHR identified three key strategic initiatives to enhance its vision of TEAM and GROWTH:

### Service Expansion/Growth Strategy

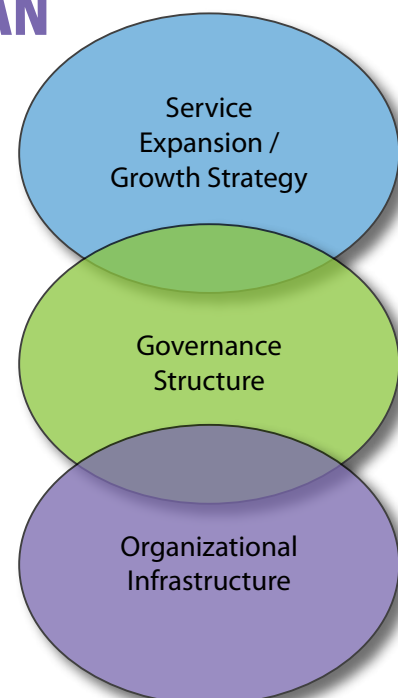
- Advance a more efficient and integrated behavioral health system that increases access to care.

### Governance Structure

- Develop a governance structure that supports BHR's growth strategy.

### Organizational Infrastructure

- Improve BHR's operational efficiency.



# RECOGNITIONS

## Shout Outs

BHR takes pride in its collaborative team efforts. Its growth and achievements are a reflection of the talent and commitment of the entire organization. BHR is also proud when team members receive recognition from the outside for their skill and expertise.

### St. Louis Business Journal Names BHR's Carisa Hill as CFO of the Year – Nonprofit Category

Carisa Hill was among only 12 recipients to receive this esteemed award from *St. Louis Business Journal*. As BHR's CFO, her skill and expertise has helped BHR grow beyond projections and strengthen the organization for the better.



### American Association of Suicidology (AAS) Appoints Bart Andrews, Ph.D. to Its Board

As a licensed psychologist and BHR's vice president of clinical practice, Dr. Andrews joins AAS's board, which was founded in 1968 to promote the understanding and prevention of suicide and support those who have been affected by it. Dr. Andrew's vast knowledge in crisis and suicide intervention will help foster the highest possible quality of suicide prevention and intervention to the public.

### Dr. Bart Andrews Joins Suicide Prevention Taskforce

Dr. Bart Andrews, participated in the National Action Alliance National Standards of Care in Suicide Prevention Taskforce. The new Taskforce made recommendations for minimum care standards for healthcare providers, which are ready for dissemination, pending approval by the National Action Alliance.





We Care, We Listen, We Respond... 24 Hours a Day  
[bhrstl.org](http://bhrstl.org)

