



Central Wyoming Counseling Center

Annual Report 2010

Mission Statement

“To provide for the general mental well-being of the community by providing outpatient mental health and substance abuse care and residential substance abuse care to those in need regardless of their ability to pay.”

A MESSAGE FROM THE PRESIDENT OF THE BOARD

ADJUSTMENT TO OUR FACILITY IN CONTEMPLATION OF A LOSS

This organization started in 1959 with a handful of people meeting in their homes, it had a spurt of growth and moved into their first real home. In the early 60s, Blue Envelope was a dream of a few individuals that wanted in some way to improve the well-being of their citizenry. They named it Blue Envelope, because they planned to mail such envelopes to each citizen in Natrona County for donations, and its final diagram was a fund-raising entity divided into three units: Heart, Cancer, and Mental Health, which was then titled as I said, Blue Envelope Fund Raising. At that time, Casper had a severe endemic Strep infestation, and through the Heart Division, individuals [mothers] were taught to swab throats on all of our youth, grades K-7 and any other individuals who felt a need for throat cultures; if positive, they had to see their physicians and be treated before being allowed to return to class. The Cancer Division developed to help those with needs such as travel, medications, and equipment. Mental Health was last, for no one wanted to speak about the possibility of one's mental health in that era. Donations were divided in two ways, a card which offered you a selection as to which division you wanted your funds given to and, if no preference, to be divided equally. Needless to say, Mental Health was always the recipient of the smallest amount. Strep was conquered in time, Cancer persisted, and Mental Health took a big step to go out on its own and provide help. From this least funded division, grew the largest entity of all, our present system. Blue Envelope still exists and helps all three categories with a budget of about \$90,000; they did, and still do, a great service for our community. The growth of Central Wyoming Counseling Center is in itself an unbelievable story, and Mike Huston was there from the early 70s until now and became its icon. Sometime in October of 2010, we received a formal notification from Mike Huston informing us that he would be retiring July 1, 2011. Now that I'm going to encapsulate the growth of Central Wyoming Counseling Center, I am actually honoring one extraordinary individual, a personal friend, a life-long advocate, our Don Quixote, for Mental Health and Substance Abuse, our own Mike Huston. While I was putting this president's message together, I found myself smiling, laughing, getting angry, frustrated at times, but more often than not, choking up a bit, getting a bit misty, but always feeling good at the end.

That small house at 5th and Durbin of 1500 sq. feet expanded to 10,000 sq. feet located on the third floor of the Public Health building on the Wyoming Medical Center campus. 5,000 sq. feet of the facility was finished, and 5000 sq. feet was empty space, more than adequate for this fledgling center. In the mid 80s, the need to finish the empty 5,000 sq. feet was undertaken, and again satisfaction. By the mid 90s, growing pains, a starting budget of \$150,000 in the late 50s, was now 3-1/2 million, and dreams of expansion were developing. By 2001, Central Wyoming Counseling Center moved into a new 30,000 sq. foot counseling center on 1430 Wilkins Drive, feeling content that the new facility would care for its clients for years to come. In two years, we were full, and new thoughts and discussions were starting to amalgamate about CSAC [Comprehensive Substance Abuse Center], our budget now was over 6.4 million dollars. In May of 2007, groundbreaking,

was undertaken for a 44,000 sq. foot, two-story facility, 86 bed residential facility, and 26 outpatient offices. Today we are embarking to reach an 11 million dollar budget with over 150 full and part-time employees.

Now how did this all occur, what influenced us to reach these specific goals? We started with mental health assistance and substance abuse. This then extended in volume and the state certified community mental health and substance abuse treatment center was developed. Funds were appropriated by the Wyoming Legislature, which were provided to the center through a contract process. As part of this contract, the Center was and is required to provide outpatient mental health and substance abuse treatment for adults and youths, residential substance abuse treatment for adults and adolescences, programs for seriously and persistently mentally ill adults, services for severely emotional distressed children and adolescences, community consultations and education in liaison with the State Hospital which had cut its in-house numbers from 600 to 100. We were asked to become involved and absorb some of the numbers, which we did, and still do for clients that need the specific help.

In addition, the Center provided Therapeutic Family Care Program, which provides therapeutic treatment homes for children and adolescences that are in state custody, as well as intensive community-based treatment for children and adolescences with severe emotional disturbances, this has become one of the largest programs of its type in Wyoming.

The development of the Supported Employment Program became a reality. We have had more clients placed in competitive employment than any other program in the state, if not in the country proportionately, and its retention rate in employment has surpassed all national averages. We have been awarded Presidential Awards for these significant levels of continuous employment.

School-based staff became a program of providing experienced, licensed mental health and substance abuse professionals [on site] in all of our high schools, junior high schools, and elementary schools. This is a most unique program throughout the Rocky Mountain Region. It is a showcase program that is a product of the joint collaboration and cooperation between Natrona County School District #1 and the Counseling Center. This has been emulated in other cities in Wyoming with Central Wyoming Counseling Center's help. I personally feel Mike should produce a transcript to have published in various National Mental Health and Substance Abuse Journals for this is an extraordinary project of his, it is his baby, his success story, and it needs to be told.

This Center was notified from the State Substance Abuse Division that it had been selected as one of the community mental health and substance abuse centers to develop a Comprehensive Substance Abuse Center [CSAC], which was in turn absorbed with the development of the new Residential Facility at Central Wyoming Counseling Center. With the support of the Legislature Selective Committee on mental health and substance abuse and the Wyoming Legislature, additional funding was authorized to assist the community mental health and substance abuse program in developing more specialized

programs, both locally and regionally, to better meet the needs of the Wyoming citizenry. The Center accepted all these challenges and made them functional and productive. The Center became CARF [Commission and Accreditation Rehabilitation Facility] certified a three-year accreditation, and recently re-certified for three years. In 2009 by state law, WDH [Wyoming Department of Health] is required to certify that the provider [Central Wyoming Counseling Center] of substance abuse services meets state's standards. In order to meet these requirements, the department contracted with the Center for the Application of Substance Abuse Technology [CASAT] of the University of Nevada-Reno. You will note they do not mention mental health in their certification. Anyway we had a defualty with the state, but we received our certification.

The persistent growth to the Center is also compounded by a new threat, a national issue, that of mounting stress related to job loss, to income reductions, home repossessions, and fears of ten trillion dollars plus debts to be handed down to our young ones.

The capsule of Central Wyoming Counseling Center's development is a true picture of our executive director, Mike Huston. How do any of us thank a person who has given 45 plus years of his life to see a fledgling mental health and drug abuse office develop into the most comprehensive and largest substance abuse and mental health center in Wyoming. As an after thought, he helped put together WAMHSAC, [Wyoming Association of Mental Health & Substance Abuse Centers], the organization that represents all the centers in Wyoming at the State Legislative sessions]. The last meeting in Jackson saw one of the largest audiences, over 60 respective representatives, executive directors and board members—thanks again, Mike. We thank you for your devotion, your love and tirelessness to Central Wyoming Counseling Center. Congratulations again, Mike.

The Counseling Center's board has been a magnanimous amalgamation of 12 individuals from various walks of life, who have been quite cohesive in their philosophies and management made possible by the helping arm of our executive director, Mike Huston. Such as when insurance rates had gone up from 10 to 70% universally, to be able to work out a no increase in rate—thanks must be given to Mike and his appeal to the Board, which worked out such a possibility. The Board's responsibilities have always been to establish policies of Central Wyoming Counseling Center. These policies have included FIRST, to see that our staffs needs are met, which include salary, retirement, insurance be it medical, dental or life, adequate staffing and of course, a safe, well-kept modern environment. Our staff is the life-blood of so many clients—men—women—adolescence and children. Your Board thanks you many times over for your devotion, your dedication, your ethical determinations, and continuous ambition to help all clients to the best of your talents. SECOND, to remain goal oriented and driven towards fulfillment. THIRD, to always respond to the needs of the community from our youth to the elderly, from the simple to the complex. FOURTH, to always understand there are no single answers to the needs of mental health or substance abuse, for what can be more complex than the human brain. FIFTH, to realize the needs and problems of the senior population as an entity.

DREAMS AND NEW GOALS

New goals, that need to be evaluated with the new health bill, which may or may not come into fruition, yet we need to be proactive and not reactionary to any mandates. We need to remain visionary in our goals. We need to become a known entity in our community, not known by need, but known by all for a sense of security, mental health and substance abuse issues—a site that will and does treat anyone of any age, color or creed, with or without funds and for any aspect of mental health and substance abuse. We need to investigate a complete new concept, a for-profit arm of the center to cover any short falls secondary to the health bill, or short falls in state funding. We need to step up our philosophy and look forward into developing a center or centers of excellency. This is the trend of the future for it encompasses a new progressive mindset, which in turn elevates the pure quality of the Center and puts true meaning to fulfilling all the needs of our clients.

Dear Board, I sincerely thank each and every one of you, I also extend my thanks to each member of the Central Wyoming Counseling Center faculty. I wish you all a very warm and Merry Christmas and a most joyous and fruitful New Year. My closing thoughts are as they were last year:

“Whatever you do for yourself, dies with you.”

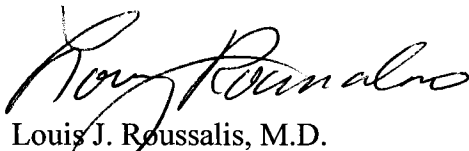
“Whatever you do for others, lives on forever.”

God Bless All of You.

It is my pleasure to now introduce Central Wyoming Counseling Center’s Board of Directors:

Wayne Beatty, Vice President
Dennis Howard, Treasurer
Susan Griffith, Secretary
Mike Huston, Executive Director

Reverend Bryant Badger
Marjorie Haass
Ron Karkela
Pat Henry
Ed Opella
Samantha Benton
Bob Price
Carol Chapman



Louis J. Roussalis, M.D.
President

Central Wyoming Counseling Center Board of Directors

A MESSAGE FROM THE EXECUTIVE DIRECTOR

In reviewing this past year's data and services provided, I am impressed by the increases we saw in admissions and the amount of services we provided.

We had 2,802 first time admissions and 2,892 total admissions. While a significant number of the increased admissions are directly related to increased referrals to the Residential Substance Abuse Facility, we also experienced increases in Outpatient, Mental Health, Outpatient Substance Abuse, School Based Services, and our Psychiatric Rehabilitation Program.

In FY '10 the Center provided over 63,000 hours of direct clinical treatment at an average cost of \$94.71 per hour compared to 55,579 hours of clinical services at a cost of \$103.80 per hour in FY '09. We served 4,534 clients in FY '10 compared to 3,903 in FY '09.

Of particular note was the expansion of our school based services from 14 therapists to 16 therapists as a result of the school district receiving additional grant funds with the safe school initiative. In addition, staff time in the schools was increased one half day per week in order to see more students and their families.

Our Therapeutic Family Care Program and Early Child Intervention project continue to have many requests for services to severely emotionally disturbed children. At times all our therapeutic family homes are full. The Early Child Intervention program is very busy working with the various agencies and programs in the community that are primarily working with children age 5 and under and their families. This program could certainly expand if there was a secure funding source to maintain the service.

Our Psychiatric Rehabilitation Program continues to be the primary source of treatment including psychiatric services for adults experiencing the effects of major mental illness. Treatment, includes regular psychiatric and nursing support coupled with case management services. Supported employment, enables a high percentage of these clients to live independently and maintain employment.

Our Elderly Outreach Program which was rapidly developing into a model program for providing comprehensive services to the elderly in their homes had to be discontinued because of lack of long term funding.

This program, as well as others in the Center, was adversely affected by the reduction in state funds as a result of funding cuts imposed by the Governor because of the reductions in state tax revenues. Hopefully, we will be able to re-establish the program at some time in the future as there is a definite need for elderly mental health and substance abuse services. The elderly population is the largest growing population group in the state.

The new Residential Substance Abuse Treatment facility saw significant increases in referrals and admissions for treatment. These admissions are coming from throughout Wyoming with virtually every county having referred clients to the program.

Of 514 admissions to the facility we had 338 clients or 65.7 % successfully complete their treatment. The average length of treatment was 45.6 days.

Once again, the results of our waiting room surveys are highly positive. This survey is conducted twice a year for a one week period of time. We use the results of this survey to assess our services and to address any areas of concern that are mentioned. In addition we send out a survey, based on a 20% sample, to people who have completed treatment in the Center, soliciting their comments and suggestions regarding the services they received at the Center.

As many of you already know, I submitted my letter of intent to retire on June 30, 2011 to the Board of Directors, so this will be my last Annual Report Message.

In looking back over what will be 39 years of work in the Center I have many fond memories. I have had the privilege of working for so many great volunteer community board members who truly believe in what we do and so unselfishly gave of their time and expertise to the Center. Without their support and commitment to our Center and community, the Center would not have achieved all that it has.

I would like to express my gratitude to all of the fine staff that I have had the privilege to work with over these many years. Truly the staff is the life blood of the Center; for, without their dedication and professionalism, the Center would not have become the resource to the community that it is today.

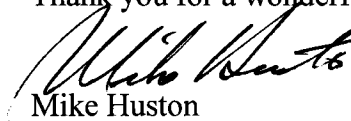
I would also like to thank the many members of city and county government, the City Council, County Commissioners, and Natrona County Legislators for their support of the Center and the work we do to make Casper and Natrona County a better place to live and raise families. I am so very grateful to the wonderful benefactors that helped us realize the dream of building the new residential substance abuse treatment facility. Without the financial generosity of so many contributors and especially Mick and Susie McMurry, Neil and Doris McMurry, the City of Casper, The Daniels Fund, The Martin Family Foundation, and the support of Chief of Police Tom Pagel, this state of the art facility would not exist.

It will be more than difficult for me to walk out of the door of a place that has been so much a part of my life for so many years. From our humble beginnings in 1959, the Center has grown to be the major resource in our community for so many individuals and families that otherwise would not have received the help they needed. We owe a special thanks to those founders of the Blue Envelope Health Fund who in 1958 recognized the importance of having mental health treatment grouped with the other major health concerns of cancer and heart disease. They pioneered the bringing of mental health treatment out of the closet and into public awareness. They were truly people of vision and compassion.

I will take solace in knowing that the center will carry forth and continue the fine work it does for our community and citizens. The ship will have a new captain but the ship is seaworthy and ready to take on new challenges!!

Best wishes and keep up the good work!

Thank you for a wonderful 39 years.

A handwritten signature in black ink, appearing to read "Mike Huston", with a long, sweeping horizontal stroke extending to the right.

Mike Huston
Executive Director

CENTRAL WYOMING COUNSELING CENTER
ORGANIZATIONAL CHART

BOARD OF DIRECTORS

EXECUTIVE DIRECTOR

ADMINISTRATIVE ASSISTANT

MEDICAL PSYCHIATRIC

BUSINESS MANAGER

IT MANAGER

OFFICE MANAGER

BOOKKEEPER

NETWORK ADMINISTRATOR

CLERICAL STAFF

PROGRAM MANAGER
OUTPATIENT MENTAL HEALTH

PROGRAM MANAGER OUTPATIENT AND
RESIDENTIAL SUBSTANCE ABUSE

PROGRAM MANAGER
THERAPEUTIC FAMILY CARE

PROGRAM MANAGER
PSYCHIATRIC REHABILITATION

OUTPATIENT MENTAL HEALTH SERVICES

SECONDARY AND ELEMENTARY SCHOOL PROGRAMS

NURSE

SUPERVISOR
RESIDENTIAL TREATMENT CENTER

ADULT IOP
ADOLESCENT IOP
SA EVALUATION
JAIL-BASED SERVICES

COMMUNITY/HOME BASED TREATMENT

INTENSIVE SED CHILDREN'S SERVICES

THERAPEUTIC FOSTER HOME

EARLY CHILDHOOD INTERVENTION

CASE MANAGEMENT

SIP

SUPPORTED EMPLOYMENT

CRISIS INTERVENTION TEAM (CIT)

NURSE

CRISIS STABILIZATION

CASE MANAGEMENT

CENTRAL WYOMING COUNSELING CENTER

BOARD OF DIRECTORS

Louis Roussalis, M.D., President
Wayne Beatty, Vice President

Susan Griffith, Secretary
Bryant Badger
Marjorie Haass
Ron Karkela
Bob Price

Dennis Howard, Treasurer
Samantha Benton
Patricia Henry
Ed Opella

STAFF MEMBERS

Mike Huston, M.A., Executive Director

Mental Health/Substance Abuse Program

Charles Powell, Ph.D., Program Manager

Licensed Mental Health/Substance Abuse Professionals

Outpatient Mental Health Services

Sharon Done, M.A.

Regina Lathem, M.A.

Dee Ann Lippincott, M.A.

Stephen Wohlfeld, M.S.W.

Edwin Young, M.S.W.

Secondary School Program Therapists

Patty Bachand, M.S.W.

Mary Sue Jacques, M.S.W.

John Koffman, Ed. Spec.

Steven Kumetat, M.S.

Sharil Williams, M.S.

Elementary School Program Therapists

Donald Allen, M.S.

Martha Carter, M.S.

Kathleen Curtis, M.S.

Elizabeth Gunderson, M.S.W.

Mary Ann Jacobs, M.S.W.

Lillian Witte, M.A.

School Grant Program

Kathy Ecklund, M.A.

Outpatient Substance Abuse Services

Thomas Connor, M.A.
Randy Copas, M.S.W.
DeRay Dout, M.A.
Ellen Herrin, A.A.
Maegan Kemery, M.S.W.
Patrice Lichliter, M.S.W.
Danielle Teeters, B.S.W.

Circuit Court Case Manager

Shelley Sands, A.A.S.

Residential Treatment Program

Patty Linville, M.A., Supervisor

Licensed Mental Health/Substance Abuse Professionals

Willie Adams, M.S.W.
Charlotte Frizzell, M.S.W.
Carol King, M.S.W.
Jessica Konicek, M.S.W.
Ruth Mena-Tellez, M.S.W.
Amanda Root, M.S.
Carla Winemiller, M.S.W.

Secretary/Receptionists

Karen Mohrman
Cathy Rorabaugh

Kitchen Manager

Monte Henrie

Psychiatric Rehabilitation Program

Paul Demple, M.A., Program Manager

Licensed Mental Health/Substance Abuse Professionals

Danny Ashland, M.A.
Catherine Cywinski, M.S.W.
Kimberly Failes, M.S.
Alicja Iznerowicz, M.S.W.
Tabatha Madrigal, M.A.
Tamara Page, B.S.W.
Kelly Shipley, M.S.W.

Elderly Outreach Project

Kimberly Preletz, M.S.W.

Psychiatric Rehabilitation Case Managers/Job Coaches
Supported Employment Program

Kyra Fitzsimmons, B.A.
Jolayne Opitz, B.S.W.
Leanora Rimmer, B.A.
Heather Shears, B.A.

Secretary/Receptionists

Patti Jolly
Jessica Mackey

Therapeutic Family Care Program

Susan Kates, M.S., Program Manager

Licensed Mental Health/Substance Abuse Professionals

Trelene De Fry, M.S.
Kathleen England, M.A.
Coleen Meade, M.S.W.
Tricia Miller, M.S.W.
Michelle Russell, M.S.
Lisa Smith, M.S.W.
James Zoeller, M.C.

Case Managers

Christine Becker, B.S.W.
Taryn Blackett, B.A.
Teresa Gutwein, B.S.W.
Beri Penny, B.S.
Abby Sayre, B.A.

Early Childhood Intervention Program

Darice Orpet, M.S.W.
Codie Wallace, M.S.W.

Business Office

Mary Spethman, Manager

Bookkeeper

Wilma Marshall

Information Technologies

Tracy Morstad, A.S., Manager

Clerical Services

Merry Lou Buffington, B.S., Office Manager

Secretary/Receptionists

Peggy Hinrichs

Jo Lafferty

Keri Owen

Michelle Reynolds

Susan Short

Delores Sievers

Consuelo Smith

Deanna Swearson

Jennifer Wallace

Building Maintenance

Mike Ingram

Medical Staff

Robert O. Brown, M.D., Physician/Addictionologist (Part Time)

Robin DeCastro, APNR (Part Time)

Frank Del Real, M.D., Psychiatrist (Part Time)

Karen Graves, M.S.N., APRN (Part Time)

Arlene Viray, M.D., Psychiatrist (Part Time)

Mark Vuolo, M.D. Psychiatrist (Part Time)

Rachel Bickels, R. N., Nurse

Kelly Hill, R. N., Nurse

Jeanne Oehlman, R. N., Nurse

Diane Werner, R. N., Nurse

Maureen Young, R.N., Nurse

TABLE I

STATISTICAL SUMMARY

July 2009 - June 2010

Admissions:

Mental Health Outpatient Program	1,331
Substance Abuse Outpatient Program	756
DUI Assessments	37

Total Admitted 2,124

Therapeutic Family Care	66
Early Intervention Program for Children	51

Total Admitted 117

Adult Men Residential	
Non CWCC Referrals - 250	
Referrals from CWCC - 51	

Total Admitted 301

Adult Women Residential	
Non CWCC Referrals - 138	
Referrals from CWCC - 30	

Total Admitted 168

Adolescent Residential	
Non CWCC Referrals - 36	
Referrals from CWCC - 9	
Male - 31	
Female - 14	

Total Admitted 45

Social Detoxification

Total Admitted 31

Psychiatric Rehabilitation Program	79
Elderly Outreach Project	26
Independence House (Group Home)	

 Male - 0

 Female - 1

Total Admitted 1
106

Total First Time Admits 2,802

Total Admissions 2,892

TABLE I (Cont'd)

Enrolled Clients Served

By Program:

Mental Health Outpatient Services	2,073
Therapeutic Family Care Services	217
Early Intervention Program for Children	90
Psychiatric Rehabilitation Services	397
Elderly Outreach Project	98
Outpatient Substance Abuse Services	1,193
Adult Men Residential Services	354
Adult Women Residential Services	195
Adolescent Residential Services	63
Social Detoxification	113

Total 4,793

Therapy Sessions:

Mental Health Outpatient Program	14,383
Therapeutic Family Care Program	3,329
Early Intervention Program for Children	1,066
Psychiatric Rehabilitation Program	5,288
Elderly Outreach Project	1,363
Outpatient Substance Abuse Program	1,400
Adult Men Residential Program	1,469
Adult Women Residential Program	1,066
Adolescent Residential Program	85

Total 29,449

Group Therapy

Sessions:

Mental Health Outpatient Program	379
Therapeutic Family Care Program	102
Psychiatric Rehabilitation Program	24
Outpatient Substance Abuse Program	667
Substance Abuse IOP Services	600
Adult Men Residential Program	1,779
Adult Women Residential Program	626
Adolescent Residential Program	365
Education Class - Residential	1,021

Total 5,563

TABLE I (Cont'd)

SCHOOL DISTRICT SERVICES

July 2009 - June 2010

<u>Secondary Team</u>	Junior and Senior High Mental Health Referrals	217
	Junior and Senior High Substance Abuse Referrals	29
	Safe Schools Referrals	20
	Total Referrals	266
	Junior/Senior High School/Safe Schools Seen	431
	Total Hours of Service	10,356
<u>Elementary Team</u>	Elementary Program Referrals	204
	Elementary Program Clients Seen	428
	Elementary Program Hours of Service	9,531
<u>Total for Secondary/Elementary Schools</u>		
	Total Junior/Senior High School/Safe Schools and Elementary School Referrals	470
	Total Junior/Senior High School/Safe Schools and Elementary School Clients Seen	859
	Total Junior/Senior High School/Safe Schools and Elementary School Hours of Service	19,887
<u>Adult Men Residential</u>	Completed Treatment	212
	Terminated Prior to Completing Treatment	82
	Number of Patient Days	16,260
	Average Days in Treatment	55.31
<u>Adult Women Residential</u>	Completed Treatment	113
	Terminated Prior to Completing Treatment	56
	Number of Patient Days	8,133
	Average Days in Treatment	48.12
<u>Adolescent Residential</u>	Completed Treatment	13
	Terminated Prior to Completing Treatment	35
	Number of Patient Days	1,608
	Average Days in Treatment	33.50
<u>Social Detoxification</u>	Completed Treatment	96
	Terminated Prior to Completing Treatment	21
	Number of Patient Days	372
	Average Days in Treatment	3.18

TABLE I (Cont'd)

Independence House

Average Census	8
Number of Patient Days	2,571

Services

Psychological Evaluations/Consultations	51
Medical/Psychiatric Consultations	3,061
Nurse (Injection/Med Check/TB Test)	1,943
ASI Evaluations	556
ADAD Evaluations	132
Hours of Direct Service	63,002
Hours of Indirect Service (Consultation and Education)	<u>2,001</u>
Total Hours Provided	65,003
Cost Per Hour of Outpatient Service Provided	\$94.71
Active Caseload (As of June 30, 2010)	1,325
Monthly Average of Clients Seen	1,630
Total Enrolled Clients Served	3,982
Total Unenrolled Clients Served	<u>552</u>
Total Number of People Served (July 2009 - June 2010)	4,534

TABLE II
CLIENTS BY INCOME RANGE

Income	<u>Total</u>	<u>%</u>
0*	2,503	63%
100 - 5,000	212	5%
5,100 - 10,000	304	8%
10,100 - 15,000	244	6%
15,100 - 20,000	184	5%
20,100 - 25,000	133	3%
25,100 - 30,000	103	3%
30,100 - 35,000	48	1%
35,100 - 40,000	55	1%
40,100 - 45,000	27	1%
45,100 - 50,000	45	1%
50,100 and over	<u>124</u>	<u>3%</u>
GRAND TOTAL	3,982	100%

* Indicates unemployed (904), children and student (1,126), disabled (71) and other (436)

TABLE III
CLIENTS BY SEX AND AGE GROUPS

<u>AGE RANGE</u>	<u>MALE</u>	<u>FEMALE</u>	<u>TOTAL</u>	<u>%</u>
1 - 4	22	31	53	1%
5 - 9	218	106	324	8%
10 -14	263	180	443	11%
15 - 18	272	239	511	13%
19 - 24	304	230	534	13%
25 - 29	234	222	456	11%
30 - 34	231	172	403	10%
35 - 39	145	126	271	7%
40 - 44	140	110	250	6%
45 - 49	131	123	254	6%
50 - 54	99	88	187	5%
55 - 59	71	60	131	3%
60 -64	26	41	67	2%
65 and over	20	78	98	2%
	2,176	1,806	3,982	100%

TABLE IV

Days spent at Wyoming State Hospital:	9
Patient contact in community following release from WSH (Follow-up for six months):	24
Individuals for whom WSH hospitalization arranged:	0

TABLE V

CLIENT FEES

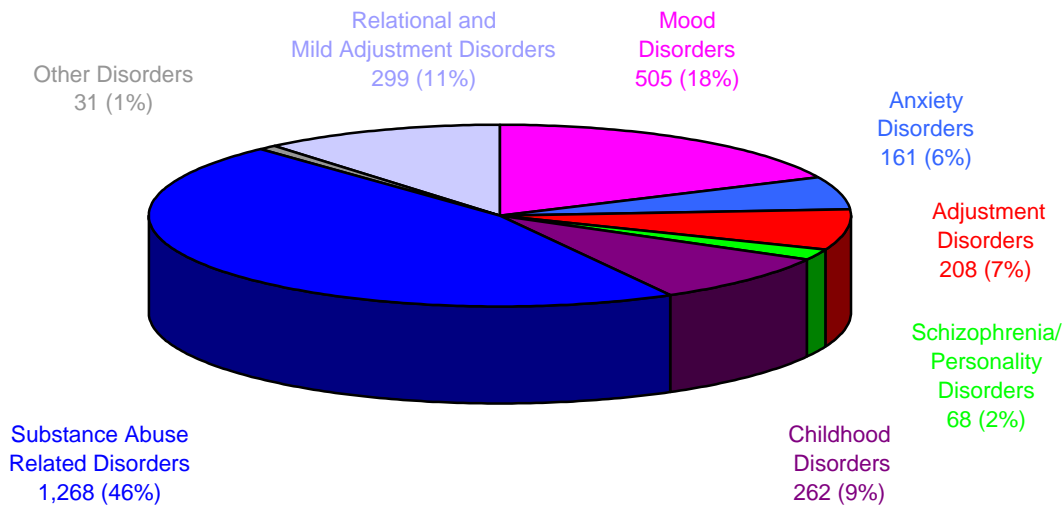
July 1, 2009 - June 30, 2010

<u>Actual Client Fee</u>	<u># of Clients</u>
No Charge *	2,318
\$ 4.00	439
\$ 6.00	69
\$ 8.00	29
\$ 10.00	81
\$ 13.00	50
\$ 16.00	32
\$ 18.00	7
\$ 20.00	53
\$ 25.00	41
\$ 30.00	20
\$ 35.00	9
\$ 40.00	14
\$ 45.00	5
\$ 50.00	12
\$ 55.00	5
\$ 60.00	4
\$ 65.00	3
\$ 70.00	2
\$105.00	10
\$120.00	5
\$120.00 Third Party Billings**	774
TOTAL	3,982

* Includes Natrona County School District Referrals.

** Includes billings made to Medicaid, State and Federal Agencies.

ADMISSIONS BY DIAGNOSTIC CATEGORIES JULY 2009 - JUNE 2010



TOTAL ADMISSIONS - 2802

Childhood Disorders: Disorders seen primarily in school-aged children, such as Conduct Disorder, Attention-Deficit Hyperactivity Disorder, Oppositional Defiant Disorder.

Adjustment Disorders: Transient stress reactions to specific events that include significant symptoms of depression, anxiety or other emotional difficulties.

Mood Disorders: Serious mood disturbances such as Bipolar Mood Disorder (formerly known as Manic Depression), Major Depression and Dysthymia Disorder.

Substance Abuse Related Disorders: Disorders such as Alcohol Abuse, Alcohol Dependency, Methamphetamine Abuse, Methamphetamine Dependency, etc.

Schizophrenia/Personality Disorders: Serious and chronic relationship disturbances such as Schizophrenia, Borderline Personality Disorder, Antisocial Personality Disorder and Dependent Personality Disorder.

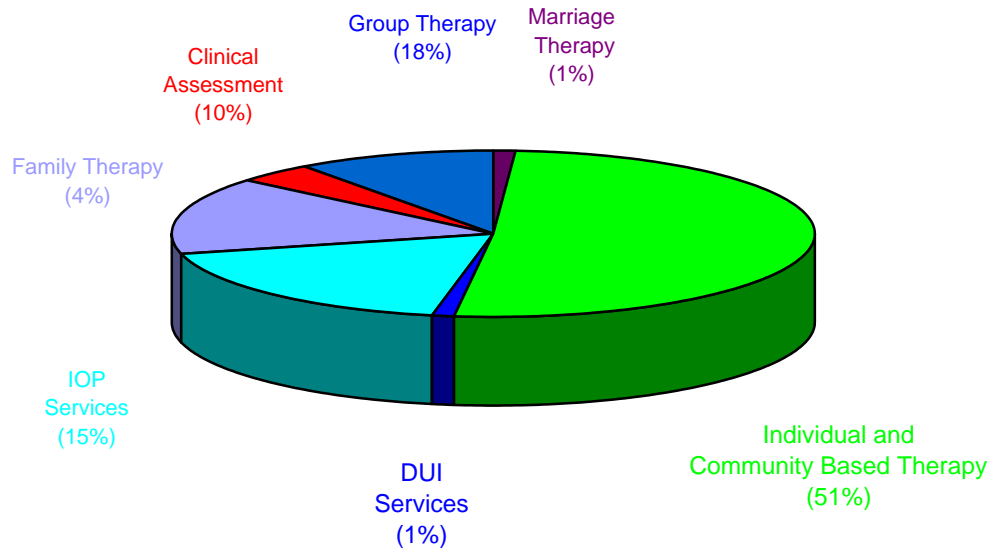
Relational and Mild Adjustment Disorders: Significant life problems that interfere with important life tasks, such as Parent-Child Relational Problems, Partner (Marital) Relational Problems, Physical Abuse of a child, Borderline Intellectual Functions.

Anxiety Disorders: Includes disorders related to Post Traumatic Stress, Generalized Anxiety, Agoraphobia and Panic Attacks.

Other Disorders: An unrelated collection of disorders with relatively low rate of admission, such as Anorexia Nervosa, Pedophilia and Hypochondriasis.

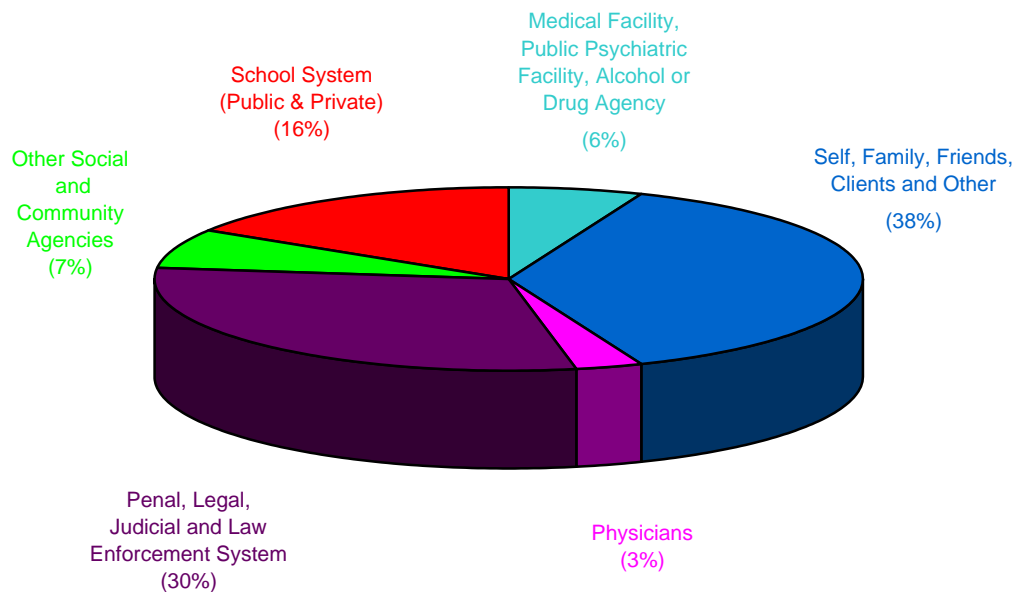
TYPES OF THERAPY PROVIDED

Fiscal Year 2009 - 2010



SOURCE OF REFERRALS

Fiscal Year 2009 - 2010

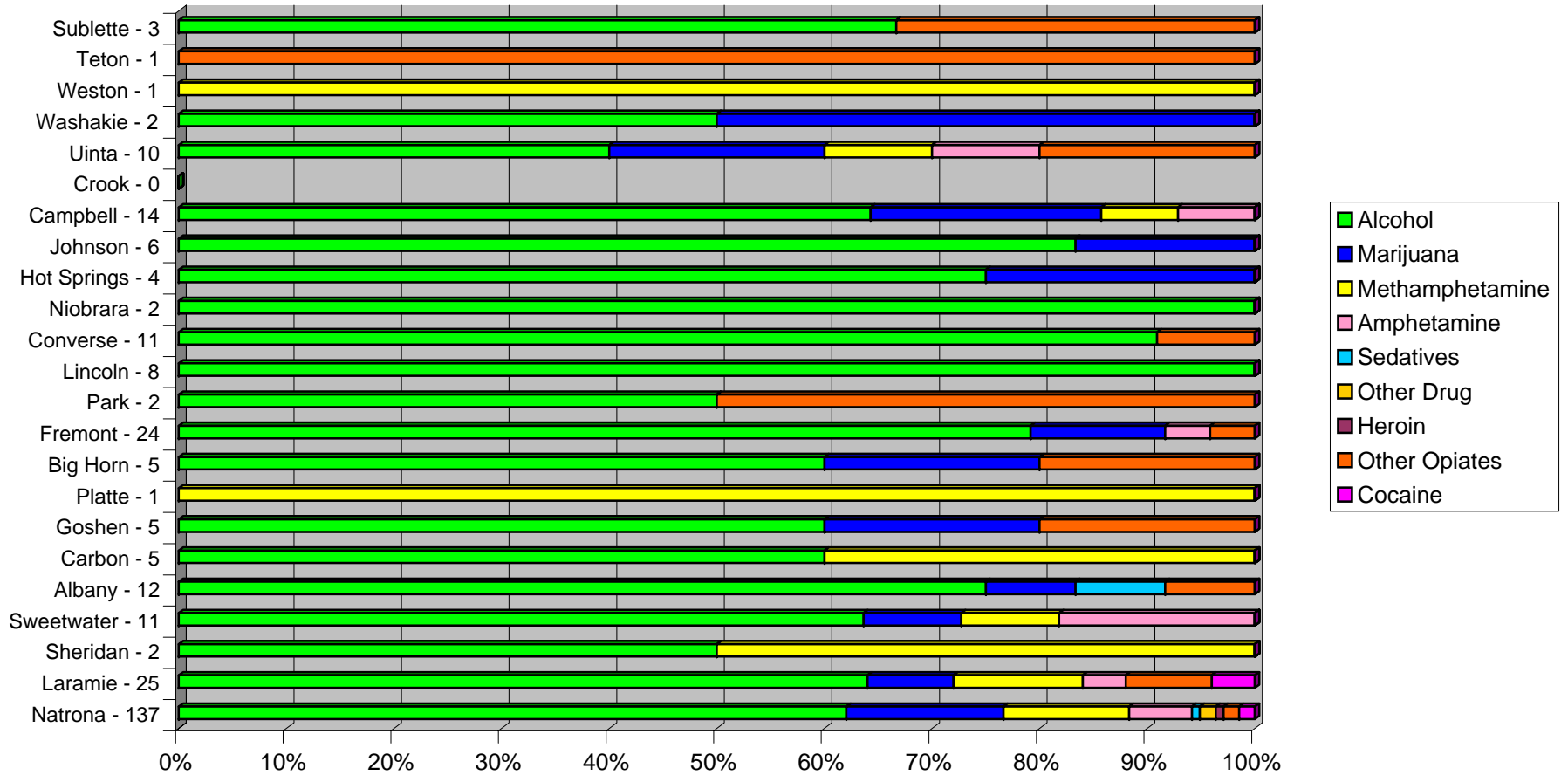


YEARLY ADMISSIONS

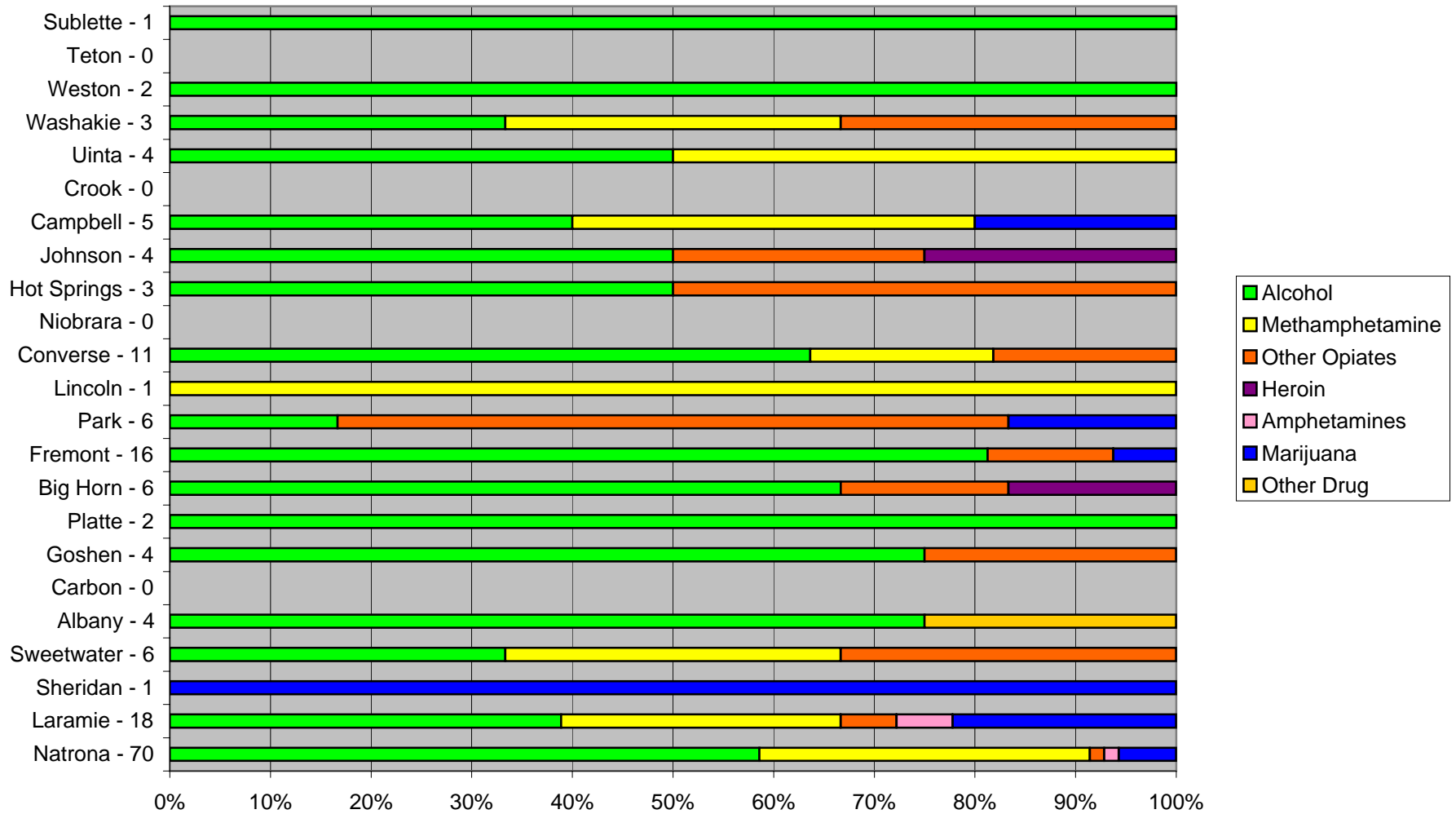
July 1, 1990 - June 30, 2010



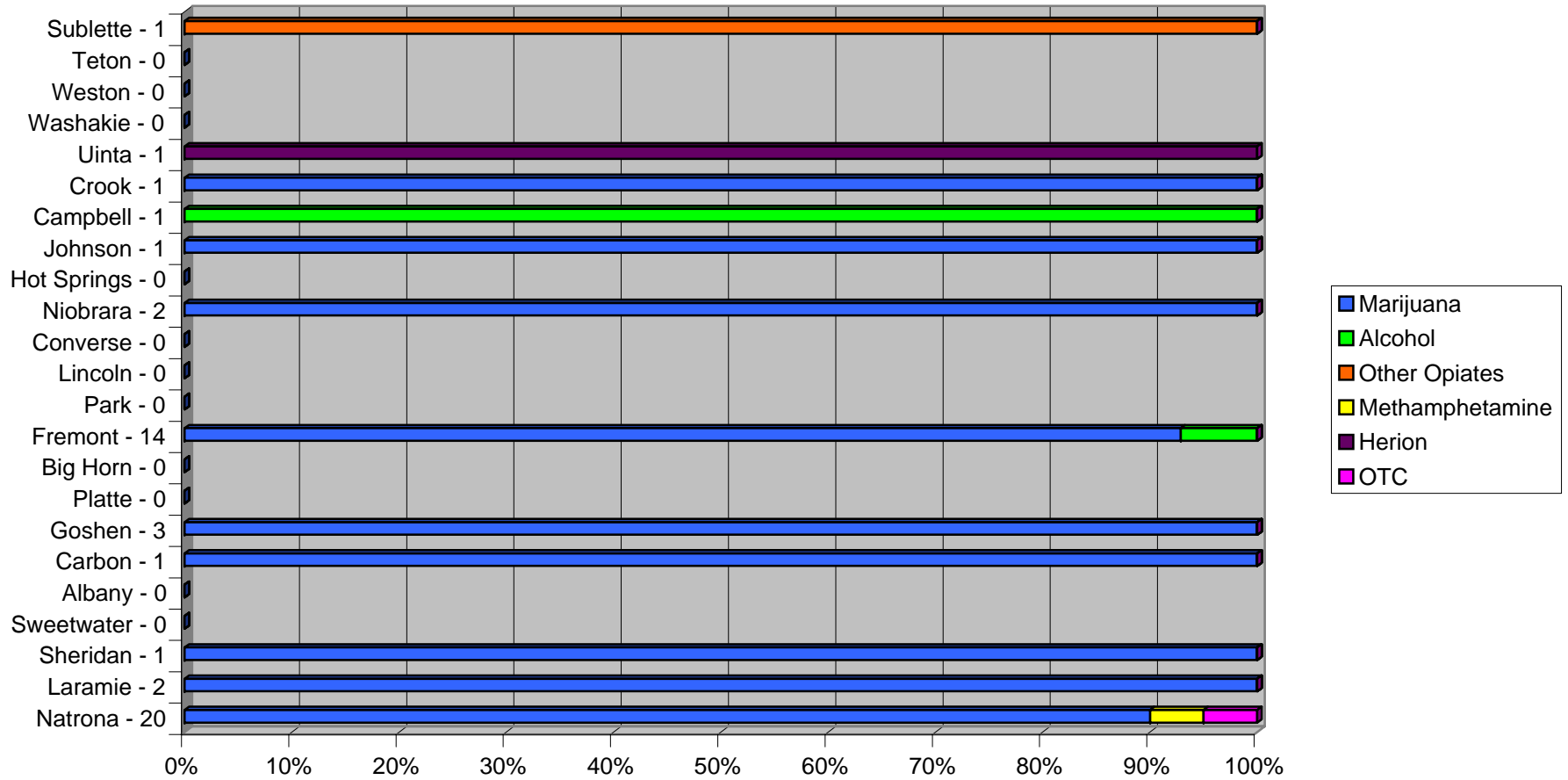
Residential Adult Men Admits by County and Drug of Choice
July 2009 - July 2010
291 Admits



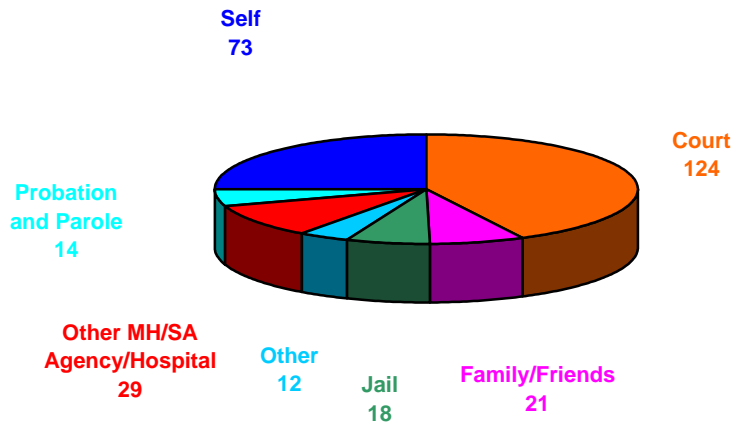
Residential Adult Women Admits by County and Drug of Choice
July 2009 - June 2010
167 Admits



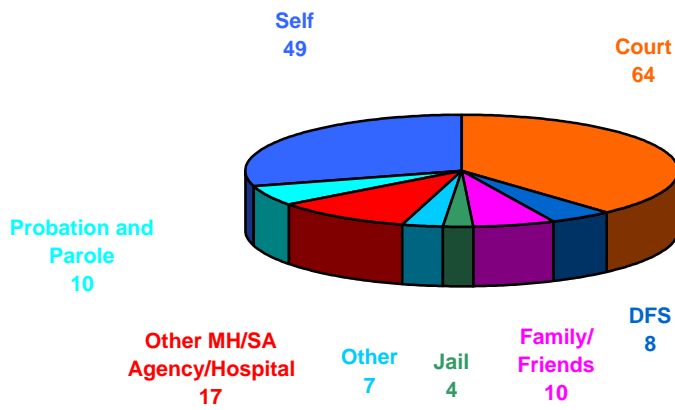
Residential Adolescent Admits by County and Drug of Choice
July 2009 - July 2010
48 Admits



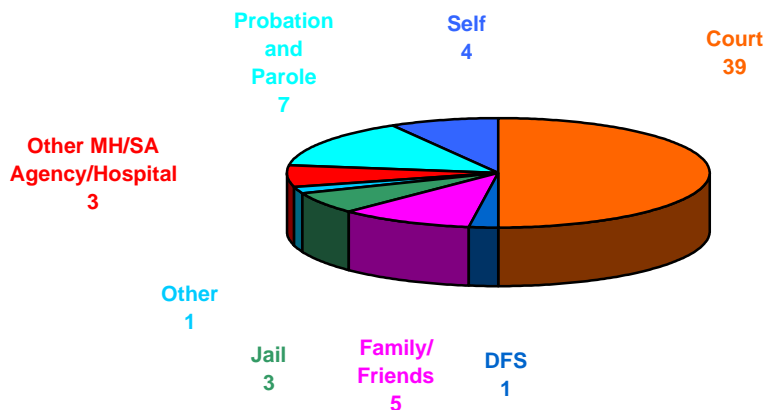
**Residential Adult Men Admits by Referral Source
July 2009 - June 2010
199 Admits**



**Residential Adult Women Admits by Referral Source
July 2009 - June 2010
167 Admits**



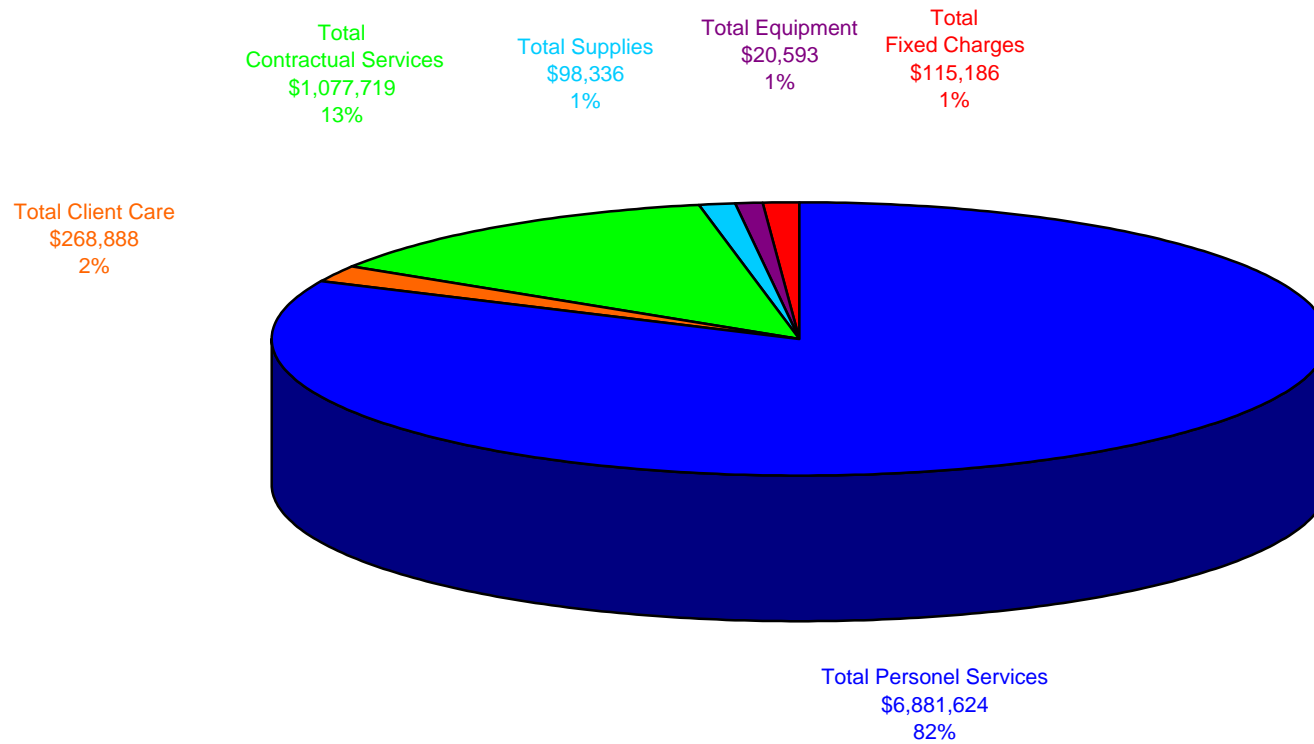
**Residential Adolescent Admits by Referral Source
July 2009 - June 2010
48 Admits**



Agency Expenditures

Fiscal Year 2009 - 2010

Total Expenditures \$8,462,345



**CENTRAL WYOMING COUNSELING CENTER
CASH POSITION STATEMENT
AS OF JUNE 2010**

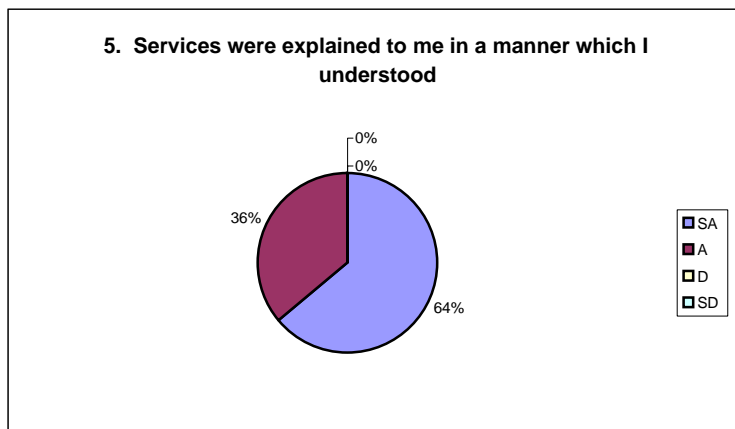
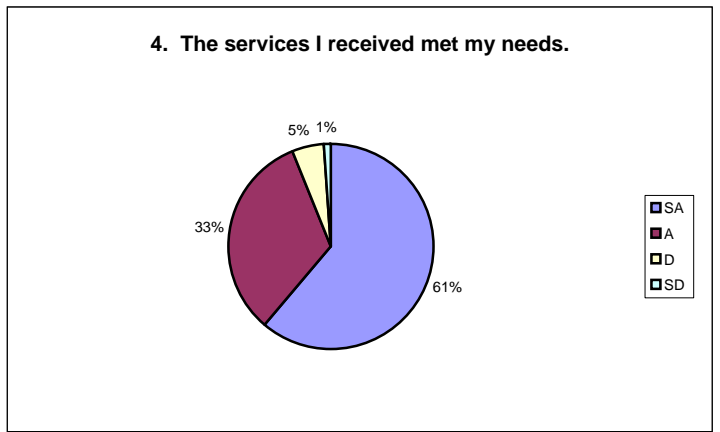
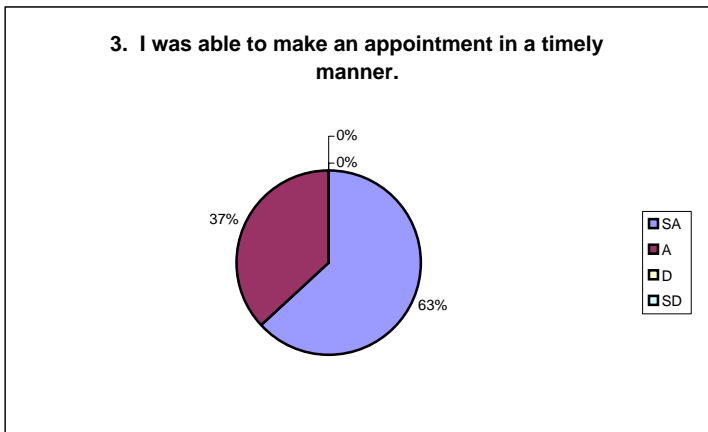
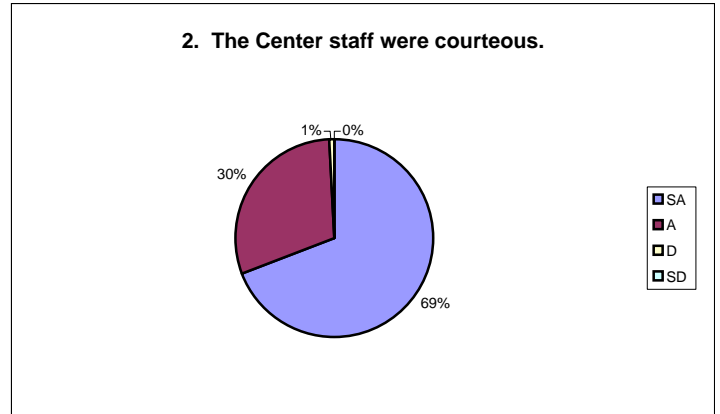
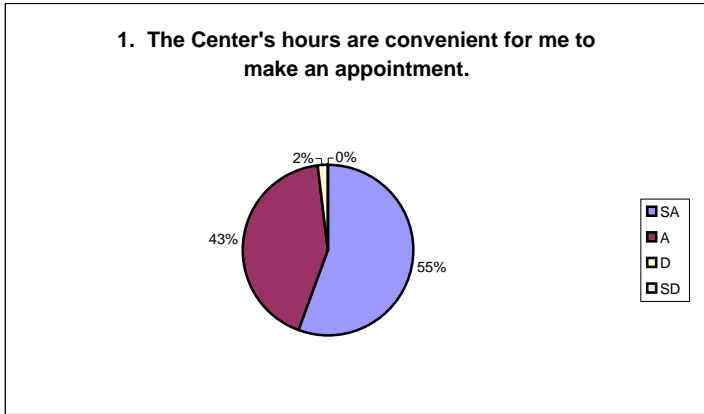
CASH DRAWERS		\$200.00
CHECKING ACCOUNT		950,101.56
PETTY CASH		380.00
TOTAL CASH		\$950,681.56
SMITH BARNEY		
	Health Insurance Claims Fund	\$855,146.65
	Cash & Money Market Funds	1,665,582.12
	Certificate of Deposits	2,284,321.37
	Unsettled purchases/sales	0.00
		\$4,805,050.14
WELLS FARGO		
	Cash & Money Market Funds	\$307,529.57
	Stocks	39,540.00
		\$347,069.57
FIRST INTERSTATE BANK		
	Cash & Money Market Funds	\$17.05
	Mutual Funds	185,852.45
	Health Insurance Plan Fund	57,767.41
	Certificate of Deposit	115,621.86
		\$359,258.77
JONAH BANK		
	Construction Fund Account	\$729,219.31
TOTAL LIQUID ASSETS		\$7,191,279.35
<u>ALLOCATION OF LIQUID ASSETS</u>		
UNRESTRICTED FUNDS		
	Operating Reserve (5.7 months X \$769,310.59)	\$4,441,751.84
TOTAL UNRESTRICTED FUNDS		\$4,441,751.84
BOARD RESTRICTED FUNDS		
	Health Claims Fund - Smith Barney	\$855,146.65
	Health Claims Fund - First Interstate	57,767.41
	Suicide Prevention Task Force	2,775.00
	Tipsi Taxi	29,401.50
	Summer Youth/TFC Program	1,000.00
	Building Fund	924,869.62
	Accrued Employee Sick Leave	225,114.32
	Accrued Employee Vacation Leave	256,453.01
	Equipment/Building Depreciation Fund	397,000.00
TOTAL RESTRICTED FUNDS		\$2,749,527.51
TOTAL LIQUID ASSETS		\$7,191,279.35

**Appendix A
CWCC Overall Client Satisfaction Survey
2010**

N = 132

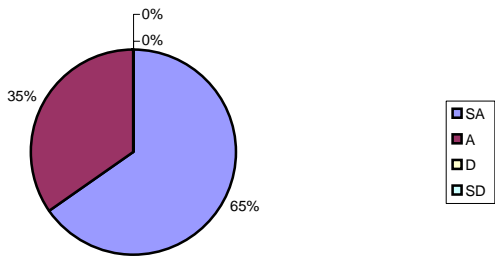
SA - Strongly Agree A - Agree D - Disagree SD - Strongly Disagree

Survey administered April 2010 for one week to outpatient mental health and substance abuse clients in the waiting room.

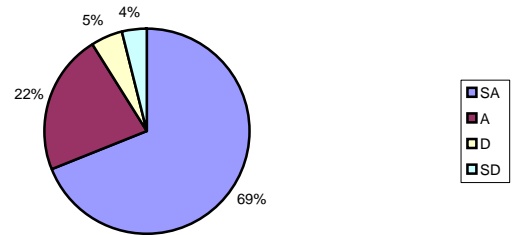


Appendix A
CWCC Overall Client Satisfaction Survey
2010

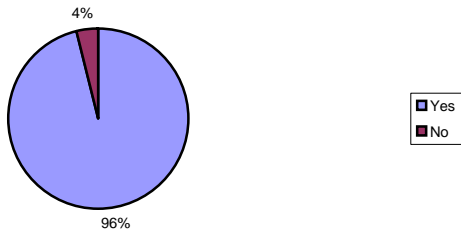
6. I participated in my own treatment.



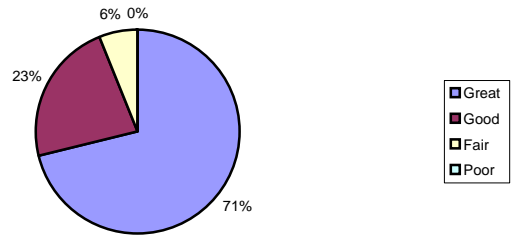
7. I felt listened to.



8. Would you recommend CWCC to a friend or relative.



9. How would you rate us overall?



APPENDIX B
CLOSED CLIENT SATISFACTION SURVEY TALLY SHEET

1. The problems, feelings or situations that brought me to the Mental Health Center are:

21 A. Much Improved	57%
11 B. Improved	30%
4 C. About the Same	11%
0 D. Worse	0%
1 E. Much Worse	3%

3. I think my therapist(s) has been:

29 A. Very Easy to Talk With	78%
5 B. Somewhat Easy to Talk With	14%
1 C. Neither Easy nor Hard to Talk With	3%
1 D. Somewhat Hard to Talk With	3%
1 E. Very Hard to Talk With	3%

5. I feel that the fee established for received was:

31 A. Very Satisfactory	84%
5 B. Somewhat Satisfactory	14%
0 C. Neither Satisfactory Nor Unsatisfactory	0%
1 D. Somewhat Unsatisfactory	3%
0 E. Very Unsatisfactory	0%

7. If I needed help in the future, I would come back to the Mental Health Center.

26 A. Definitely Yes	70%
6 B. Probably Yes	16%
4 C. Maybe	11%
1 D. Probably Not	3%
0 E. Definitely not	0%

9. The interest shown by my therapist(s) helping me solve my problems has been:

26 A. Very Satisfactory	70%
7 B. Satisfactory	19%
4 C. Neither Satisfactory Nor Unsatisfactory	11%
0 D. Unsatisfactory	0%
0 E. Very Unsatisfactory	0%

2. Because of therapy, I understand the problem well enough to manage it in the future.

17 A. Strongly Agree	46%
16 B. Agree	43%
2 C. Neither Agree/Disagree	5%
2 D. Disagree	5%
0 E. Strongly Disagree	0%

4. After requesting service, I was seen:

23 A. Very Promptly	62%
11 B. Reasonably Soon	30%
2 C. With Some Delay	5%
0 D. With Much Delay	0%
1 E. It Seemed Like Forever	3%

6. I found the receptionist and secretaries to be:

28 A. Very Helpful and Pleasant	76%
6 B. Somewhat Helpful and Pleasant	16%
1 C. Neither Helpful nor Unpleasant	3%
1 D. Somewhat Unhelpful and Unpleasant	3%
1 E. Very Unhelpful and Unpleasant	3%

8. I would recommend the mental health center to others needing help.

29 A. Definitely Yes	78%
3 B. Probably Yes	8%
4 C. Maybe	11%
1 D. Probably Not	3%
0 E. Definitely Not	0%

10. How would you rate, overall, the services you received?

22 A. Excellent	59%
12 B. Good	32%
2 C. Average	5%
1 D. Below Average	3%
0 E. Poor	0%

APPENDIX B
CLOSED CLIENT SATISFACTION SURVEY TALLY SHEET

Number of client satisfaction surveys distributed:	537
Number of completed surveys returned:	38
Number of partially completed surveys returned:	1
Number of surveys returned by post office:	0
Number of surveys not returned by client:	498

Of the five hundred thirty-seven client surveys sent out, zero were returned by the post office. Of the remaining five hundred thirty-seven surveys that were delivered, thirty-eight were returned by former clients for a response rate of 7.0 percent.