



# ANNUAL REPORT FY 2020

## MISSION STATEMENT

North Suffolk Mental Health Association, Inc. (NSMHA) strives to help people achieve independence and fullness of life by providing a wide array of community-based, person-centered treatment, recovery and rehabilitation opportunities; by intervening as early as possible; by promoting prevention, education and hope; and by participating in training and research.

NSMHA is guided by the principles of dignity and respect for all clients, family members, community members, colleagues and co-workers; accessibility; quality outcomes; cultural and linguistic competence; confidentiality; compliance with all applicable laws, standards and regulations; and effective and efficient management.

# INSIDE

## PAGE 1

A LETTER FROM THE BOARD CHAIR  
AND CEO

## PAGES 2-8

SERVICES: RESIDENTIAL  
ADULT COMMUNITY CLINICAL SUPPORTS  
ADDICTION & RECOVERY  
OUTPATIENT/AMBULATORY  
EMERGENCY SERVICES (B.E.S.T.)  
COMMUNITY-BASED SERVICES  
EARLY CHILDHOOD SERVICES

## PAGE 3

QUALITY MANAGEMENT

## PAGES 4-5

SPECIAL THANKS

## PAGE 9

FINANCES

### ON THE COVER

*Top row, from left: Caitlin Mulligan, Jose Luna, Carolyn Glover, Emile Pierre-Louis, Melissa Kwiatkowski & Amber Francisco. Second row: Kevin O'Brien, Clovis Foingwe, Sarah Maclaurin, Kate Moore, Kellie Farrell & Heidi Colon. Bottom row: The B.E.S.T. team, Reynold Prospere, Andrea Medrano, Olivia Reiser and Kathy Marion.*

## SO MUCH HAS CHANGED



Deborah Wayne,  
Board Chair



Jackie K. Moore,  
CEO

As we were compiling information for this annual report, which covers our Fiscal Year 2020 (July 1, 2019 through June 30, 2020), it was hard to believe that only four months of that period fall within the timeframe of the pandemic. A full eight months were “before COVID-19,” but the pandemic has demanded - and taken - so much from so many within our North Suffolk community, within our Chelsea-Revere-Winthrop-East Boston communities, and across our state and country. It’s hard to think back to “before.”

As Massachusetts issued shelter-in-place orders, shutting down all but essential businesses and ending in-person services, North Suffolk followed the guidance and switched as much as possible to remote work virtually overnight. “The virus” didn’t lessen the need for services of any of our clients. In fact, the needs of the individuals and families that make up our community grew, continuing to increase because of the isolation and stress of the pandemic as well as the growing social unrest that was taking place across the country. Our employees throughout the organization responded with overwhelming creativity, dedication and commitment.

We marked a number of successes in FY20 that should not be overshadowed by COVID-19. Some of the highlights such as being awarded up to \$4 million in federal funding to expand our behavioral health clinics and adding new programs in our Addictions Services division are noted in this report. In addition, we pay tribute to two longtime managers who helped shape the services currently being provided by North Suffolk.

In the early months of the pandemic, we made changes to respond to the needs of our communities as NSMHA has done since 1959. This Annual Report captures what we did, but the lessons learned and the way this agency rose to the challenges thrown at us have us looking forward with a strong understanding of what we can do. Our services are essential, now more than ever, and we are both poised and energized by the possibilities of the future.

We thank every member of our staff for their resolve and resilience. We thank our fellow human services providers for the mutual support that strengthened partnerships and capacity. We thank our Board of Directors for their time, encouragement and support. And, especially, we thank the individuals and families who trust us to be part of their lives – we are humbled and uplifted by that privilege.

### BOARD OF DIRECTORS

**Deborah Wayne, O.D.**

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**Saritin Rizzuto**

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**Charlotte Nunez**

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*Clerk*

**Shannon (Lundin) White**

**Jean Staropoli**

**Virginia Todd**

**Calandra Clark**

**Callahan McGuinness**

**Mark Rossi, Esquire**

**Ricardo Patrón**

### LEADERSHIP TEAM

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*Chief Executive Officer*

**Judith Lemoine,**

*Chief Operating Officer*

**Manjola Ujkaj, MD, Ph.D**

*Chief Medical Officer*

**Kim Joyce**

*Chief Financial Officer*

**Jason Romano**

*Chief Human Resources Officer*

**Julio Vazquez**

*Chief Information Officer*

**Sandra Heath**

*Director of Compliance & Quality Management*

# RESIDENTIAL SERVICES

NSMHA operates 35 residential programs, serving clients with either mental health challenges or developmental disabilities. In all, 270 persons were living in our group living environments (GLEs) in FY20, including 146 in MH programs and 124 in DS programs. Another 16 individuals were provided in-home supports. Some 650 employees – full-time, part-time and relief – provide services around the clock, allowing clients to live with varying degrees of independence in the community. This division is the largest employer within North Suffolk. In FY20, we also opened our first residence dedicated solely to individuals with acquired brain injury (ABI) on Winter Street in Burlington. Five people currently live at the Winter Street residence.

Overall, our group living environments (GLEs) have the capacity to house nearly 300 individuals. In April, as COVID-19 cases were surging in Massachusetts, 35 of the residences adopted a live-in model nearly overnight, meaning staff lived with residents in the home, and the only outsiders let in to the houses were North Suffolk nurses or facilities employees. Thirty-two of these programs were in the live-in model for nearly 3 months – from mid-April through the first week of June – and we strongly believe this played a significant role in the low number of clients and staff who tested positive for COVID-19. Playing key roles in these achievements were the Developmental Services nursing staff, who not only assisted throughout all residential programs, but throughout the agency, providing urgent care and administering on-site COVID-19 testing for clients and staff.

The Residential Division team and Training Center staff quickly pivoted to online training and support, and the IT team was instrumental in providing needed hardware and software that allowed many staff to work remotely and coordinate operations with houses that were in the live-in model as well as allow telehealth visits for residential clients. The quick introduction of technology also meant that – at a time when so many events were being canceled, the annual Greenway art show was able to be held ... virtually.

**925+**  
EMPLOYEES

*More than 60 percent of our 925+ staff identifies as a person of color/BIPOC. Languages spoken throughout the agency include English, Spanish, Portuguese, ASL, Khmer, Vietnamese, Chinese, Arabic and Haitian Creole.*

# ADULT COMMUNITY CLINICAL SERVICES

North Suffolk has four ACCS teams that work with 426 individuals diagnosed with severe and persistent mental illness who need support for their recovery efforts and are referred by the Department of Mental Health. The 85 staff across these teams provide linguistically and culturally competent care for individuals in the Deaf Community, and those who are of Chinese, Vietnamese and Cambodian descent. They may live independently, in a group home or in a NSMHA property. One of the program's goals is to help people move to an appropriate level of housing that affords as much independence as possible. Between July 2019 and February 2020, ACCS had moved 25 persons into housing. Many of them were previously homeless, living in shelters or on the streets.

ACCS team staff work with residents of 13 group homes providing rehabilitative interventions based on the needs and goals of the residents. ACCS also serves 45 residents in intensive and specialized group homes for persons that require significant clinical or medical supports.

ACCS services are considered essential services by the Commonwealth of Massachusetts. Although face to face encounters with persons served were curtailed in March 2020, all essential services were provided to our 471 persons served, including Medication Administration services, representative payee services and clinical interventions. Offices remained open and staff took appropriate precautions to see persons in the community, as well as meet the needs of residences that were in the live-in model, such as delivering groceries and prescriptions.

ACCS's use of interventions via telehealth increased greatly and was refined as a result of the pandemic, using a combination of videoconferencing and phone calls. Many persons were taught to use smart devices and communicated with staff in this manner, and all of the group homes were given laptops or tablets to expedite communication with ACCS teams during the height of COVID-19 restrictions. ACCS will continue to use telehealth as an adjunct to face-to-face interventions going forward, providing another tool to support individuals.

## QUALITY MANAGEMENT & COMPLIANCE

*In FY20, Quality Management and Compliance began the process of reviewing and updating our data systems and processes to provide more timely relevant reporting to program staff and management. Many paper-based processes were converted to electronic, reducing the amount of data entry and providing more timely and efficient data collection. And the addition of a data analyst helped us move from an antiquated data system to more efficient processes.*

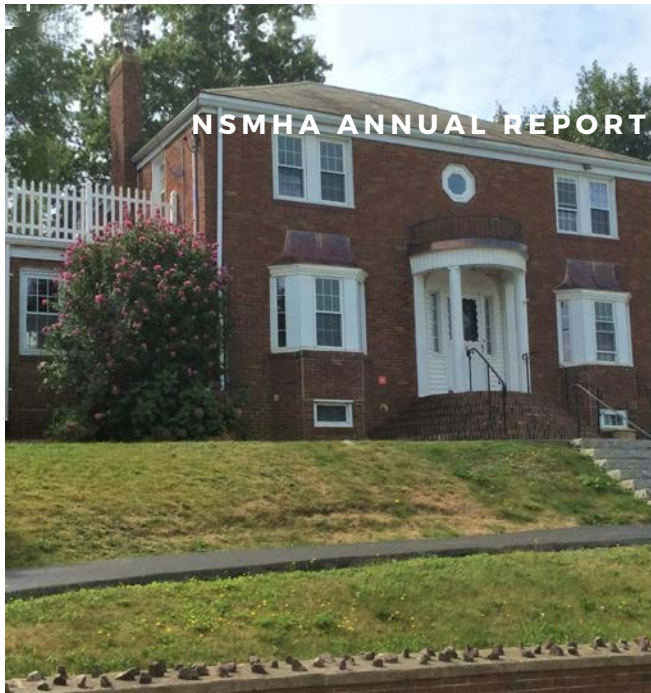
*In response to the pandemic, QM, with the help of the IT Department, quickly moved to completing our departmental tasks remotely. The department plays an integral role in ensuring NSMHA compliance with new state mandates regarding COVID-19 restrictions and guidance, as well as requirement from our funding agencies. Additionally, revisions to the Comprehensive Audit process due to COVID-19 has allowed QM to be able to provide results to program staff and managers within 24 hours of completing the audit.*

## ADDICTIONS SERVICES

North Suffolk Mental Health Association has been providing Addictions Services for five decades and is a renowned and trusted partner in the North Harbor area. In FY20, 62 staff, including clinicians, peers, and Recovery Coaches, worked with nearly 3,000 individuals to acknowledge, manage and treat their substance use disorders, through Intensive Outpatient Program (IOP), Structured Outpatient Addiction Program (SOAP), among others. Meridian House, NSMHA's 30-bed residential therapeutic treatment program, will mark its 50th anniversary in 2021. Addictions services and recovery support are also provided through our recovery support centers, in local emergency departments and through drug courts.

In the early part of FY20, Addictions Services was successfully awarded contracts for a new residential treatment program for persons with co-occurring disorders, and a second recovery support center. Bringing the 12-bed program located on Clinton Street in Chelsea; and Recovery On The Harbor, an RSC on Bennington Street in East Boston, were slowed by construction and permitting delays due to COVID-19, but both were expected to open in 2021.

Meridian House was the first NSMHA residential program to adopt the live-in model during the pandemic surge last spring, gaining staffing commitments and resident buy-in, and instituting protocols nearly overnight. From April 6 through late May, there were no cases of COVID-19 among residents or staff at Meridian. State restrictions on in-person services temporarily halted the IOP program, but the Addictions team, working with IT, were about to get the program back up and running via telehealth.



### THANK YOU KIM HANTON

NSMHA's Addictions Division wouldn't be what it is today without the leadership, guidance and vision of Kim Hanton, who retired from the organization in 2020 after 34 years as Director of Addiction Services. Kim joined NSMHA in 1988, coming from the state's Department of Social Services, where she started her clinical career in 1982. Under Kim's leadership, Addictions Services grew to include Recovery Coaches and Drug Court interventions, and it was her determination and effort that resulted in a second residential addiction program that will specifically serve persons with co-occurring disorders of substance misuse and mental health issues. She was key to NSMHA's incorporation of the STEPBox Recovery Support Center as well as a second RSC – Recovery On the Harbor – slated to open in 2021. From the opioid epidemic to the early stages of the COVID-19 pandemic, Kim led our addiction services response. And she was instrumental in bringing in her successor, Audrey Clairmont, whom she mentored during Clairmont's first stint with NSMHA. Before retiring from NSMHA, Kim concurrently served as the City of Revere's Chief of Health and Human Services and City COVID-19 Response Team leader, and still consults with our agency.



## OUTPATIENT CLINICS

North Suffolk's outpatient clinics and the services provided are well-established and widely respected. The three major clinics are the Chelsea Clinic at 301 Broadway; East Boston Counseling Center at 14 Porter St. and the Freedom Trail Clinic in the Erich P. Lindemann Building at 25 Staniford St. in Downtown Boston. The Revere Clinic is now primarily office space for several programs, including Quality Management, but some counseling sessions for our clients who speak Khmer or Vietnamese are held there.

About 40 staff, including administrative and clinical, provided mental health and addiction services for approximately 3,000 individuals in FY20. Easily accessible by public transportation or walking, the clinics draw from the communities in which they are located. A major achievement was securing a \$2 million community-based behavioral health center expansion grant from the Substance Abuse and Mental Health Service Administration, which, when renewed will infuse \$4 million between FY20-FY22 to increase access to mental health and addiction services in our diverse, low-income communities. Part of the funding is being invested in recruiting and retaining culturally diverse staff and adding navigators and peers to build community awareness and trust and help ease access to services.

Even before receiving the grant, the Ambulatory/Outpatient programs had already been successfully working to expand our clinic workforce to include more bilingual clinicians to better serve these communities. The primary languages added were Spanish and ASL.

All of the clinics transitioned from in-person to telehealth services during the initial statewide shutdown in response to the COVID-19 pandemic. In June, the Freedom Trail and East Boston Clinics resumed limited on-site services to provide injectable medications and medication assisted treatment to approximately 250 individuals. Ultimately, the response to telehealth has been overwhelmingly positive and not only allowed us to continue to provide services when face-to-face sessions were not possible, but also started shaping future services and ways in which more individuals in the community will be able to access needed care.



### *THANK YOU EMILY RANDALL*

When former Director of Ambulatory Services Emily Randall decided to depart the agency in FY20 to focus on private practice, her parting gifts were \$4 million in grant funding to expand North Suffolk's Chelsea and East Boston outpatient clinics and a deep pool of talented, up-and-coming clinicians with strong leadership potential. Emily is the perfect model of climbing the career ladder, having started at North Suffolk fresh out of graduate school as a clinician in psychiatric day treatment. Over the course of 25 years at North Suffolk, she grew into the role of program manager and ultimately Director of Ambulatory Services, overseeing the programs and services offered through the outpatient clinics. Emily was a key part of the NSMHA team that secured a two-year, \$2 million certified community behavioral health clinic (CCBHC) grant from SAMHSA in FY20. More importantly, she hired and/or mentored many clinicians and staff members who are now taking leadership roles in the agency. These new leaders continue to work to strengthen NSMHA's commitments to competent care, access and equity for our communities, clients and staff, and Emily continues to consult as needed.



## B.E.S.T. TEAM: EMERGENCY SERVICES

The definition of first responders our BEST Team provides services 24/7/365 by telephone or in person to individuals in crisis due to mental illness, substance use disorder or both. Working in concert with Bay Cove Human Services under contract with Boston Medical Center, the B.E.S.T. team comprises more than 60 staff members (full-time and fee-for-service). Between July 1, 2019 and June 30, 2020, they completed 5,862 billable crisis evaluations, by phone, in person, in the community, and in hospital emergency departments. Those numbers have risen steadily throughout the pandemic.

North Suffolk's B.E.S.T. team operates out of two locations: the Lindemann Building in Downtown Boston and a new location opened in FY20 at 140b South Street in Jamaica Plain. The JP location has allowed B.E.S.T. to expand services through an increased footprint in the community. B.E.S.T. works in concert with a number of other entities. In April, co-director Kate Moore joined the medical-social coalition that staffed The Inn, a Revere hotel that was turned into a place where people could isolate or quarantine when they couldn't go home. Moore provided behavioral health assessments and support which were a key piece of the services provided at The Inn.

**5,862**  
CRISIS EVALUATIONS

*These incredible numbers were growing steadily throughout the pandemic and could approach 10,000 in FY21 as COVID-19 continues to take a toll on mental health in the Commonwealth.*



## COMMUNITY-BASED SERVICES

Community-based services at NSMHA comprise seven programs for adults, youths and families, including the Community Support Program, MINDeaze school-based programs, children's after school program (CASP); the Children's Behavioral Health Initiative, including In-Home Therapy and Therapeutic Mentoring; and the Community Support Agency. The 55 staff includes a clinician embedded at partner agency ROCA and a school-based clinician funded by the Department of Elementary and Secondary Education.

Nearly 500 individuals and families were enrolled in these programs in FY20. As the name of these vital services implies, they are community-based, providing in person, face-to-face support. That was quickly altered in March 2020 as COVID-19 overtook our communities. Every program within the division, except for CASP, was able to quickly move to remote work. There was absolutely no disruption of services to clients served during the transition.

Among this division's accomplishments during the fiscal year, was the successful inclusion of the CSA program within IRIS, an online referral system for the City of Chelsea. This will expand access to the program for families. Online referral forms were added to North Suffolk's website as well, providing easier access to referrals for both individuals and community partners for the CSP and CBHI programs. Additionally, four Clinicians from the IHT program successfully completed the Assessment & Clinical Understanding Training.



### WHERE HOPE LIVES

North Suffolk Mental Health Association owns and leases a total of 49 properties in a dozen municipalities in Eastern Massachusetts, primarily Chelsea, Revere, Winthrop and East Boston. This includes three outpatient behavioral health clinics and 37 residential properties that are home to our group living environments for persons with mental health issues, brain injury, intellectual/developmental disabilities, and/or substance use disorders. Properties, like programs, are regularly subject to review by agencies providing funding. In FY20, our Noble House property received high marks in a Management Review by the U.S. Department of Housing and Urban Development.

The novel coronavirus delayed some construction projects, but it couldn't stop our growth begun in FY20. NSMHA started work on two new leased sites: A COE at 69 Clinton St. in Chelsea and the new home of our Recovery Support Center, STEPRox, at 153 Blue Hill Ave. in Roxbury. The COE is a new residential addiction recovery program for persons who also have mental health issues (co-occurring disorders). Both sites are expected to open in early 2021. We also found a location for a second RSC, Recovery On The Harbor, at 977 Bennington St. in East Boston. In addition to construction delays, Housing staff had to navigate significant changes in city inspectional services, dealing with new requirements and a new environment to ensure all our properties and programs were in compliance with local regulations.

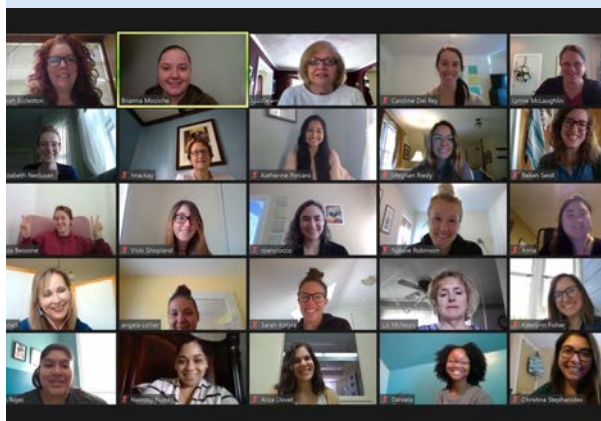
## EARLY CHILDHOOD SERVICES

Harbor Area Early Childhood Services receives approximately 1,200 referrals annually from the communities of Chelsea, Revere, East Boston, Winthrop and Charlestown, servicing approximately 700 children and having 550 children and their families with active Individual Family Service Plans at any given time. The staff of 40 are culturally and linguistically diverse, and many grew up or reside within our service catchment areas, creating a precious bridge of trust between families and providers. The Early Intervention program at NSMHA provides developmental screening and evaluation; a range of direct therapies to children showing developmental delays and family support to primary caregivers through home-based, in-person visits, center-based child/parent groups, and in community settings.

The ECS program responded quickly and deftly to the statewide stay-at-home order in March, creating the needed documents and procedures to allow the program to continue to serve families remotely. The program team was able to completely change our ECS service delivery system and model of business from in-person to remote in two weeks. Weekly intake and staff meetings were moved to teleconference, and agendas for all ECS Managers and Team Leaders were created. Small group team meetings were instituted twice a month for trainings and clinical support. In addition, EI staff quickly learned telehealth therapy tools and practices to engage our EI families most significantly affected by the COVID-19 pandemic. The program clinically tracked COVID-19 cases and created an online forum with the program director and supervisors to review and support both families and staff. For those immuno-compromised children at great risk, ECS staff waited in line for diapers/food and delivered basic supplies and “baggies” containing weekly group curriculum (such as crayons, coloring pages, sensory toys, etc) for preparation for online groups.

Remote work and telehealth will bring new challenges, as well as opportunities, for community outreach and home-based work. Our workforce in Early Childhood is primarily women, and many have children of their own, impacting the work/home balance. NSMHA, like many businesses, has been able to “pivot” and make changes allowing for success, but it has been a more natural fit for some programs. In order to move forward, ECS and the agency must continue to support flexible hours and remote work, and develop more technological monitoring and streamlining infrastructure.

ECS works closely with the Massachusetts Early Intervention Consortium (MEIC) to advocate for the industry at the state level. MEIC seeks to change the business model of EI from a fee-for-service billable dependent unit, to a hybrid model that returns some portion of operational expense via a Cost Reimbursement mechanism. The bill is currently with the Massachusetts Legislature. The program and agency will also look for new federal proposals funding early child care and family support, as well as technology and health equity grant opportunities.



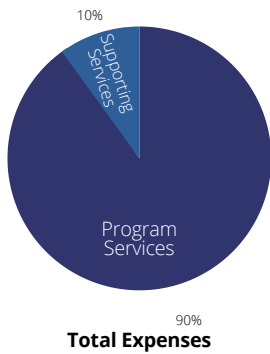
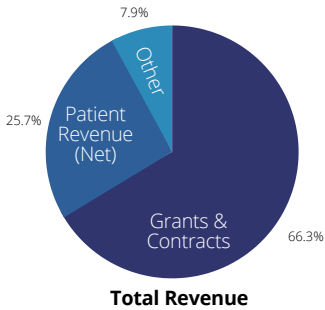
### HARBOR AREA CHILD CARE PROGRAM

*The therapeutic Early Education and Care-licensed Harbor Area Child Care program is a specialized program that enrolls a small number of families whose children are dually enrolled in the Early Intervention program. The children in this program, who must be referred by the Department of Children and Families, present with autism, hearing loss, were born prematurely, may have in-utero substance exposure, and/or social, behavioral, motor, cognitive, or language delays for a variety of medical, environmental, and other factors that impact age-appropriate developmental milestones.*

*This program's success prior to COVID-19 was the daily ongoing inter-disciplinary work of a highly specialized team to support the whole family. Staff build trusted relationships with the children and primary caregivers, and provide a daily consistent routine with highly qualified bi-lingual and bi-cultural EEC-licensed teachers and Early Intervention specialists. Additionally, daily developmental interventions are provided to medically and socially fragile children individually and as a group. Licensed occupational therapists, physical therapists, speech/language pathologists, music therapists, social work staff, and staff with Hearing/ASL and ASD specializations had scheduled times daily within this classroom.*

# FINANCES

CONSOLIDATED STATEMENT OF FINANCIAL POSITION	Audited 6/30/2020	Audited 6/30/2019
<b>Assets</b>		
Cash & Cash Equivalents	\$ 5,232,254.00	\$ 4,499,462.00
Net Accounts Receivable - Contracts, grants and other	\$ 5,503,456.00	\$ 4,269,859.00
Net Accounts Receivable - Patient Accounts	\$ 1,265,284.00	\$ 1,079,449.00
Short Term Investments	\$ 1,652,200.00	\$ 1,362,520.00
Prepaid Expense	\$ 1,057,155.00	\$ 1,032,230.00
Net Land, Buildings, and Equipment	\$ 12,530,498.00	\$ 12,637,601.00
Other Assets	\$ 2,260,524.00	\$ 2,380,272.00
<b>Total Assets</b>	<b>\$ 29,501,371.00</b>	<b>\$ 27,261,393.00</b>
<b>Liabilities</b>		
Accounts Payable	\$ 799,836.00	\$ 998,736.00
Accrued Expenses	\$ 3,311,834.00	\$ 1,994,420.00
Current Portion of Long Term Debt	\$ 167,182.00	\$ 158,324.00
Other Liabilities	\$ 7,317,711.00	\$ 6,991,467.00
<b>Total Liabilities</b>	<b>\$ 11,596,563.00</b>	<b>\$ 10,142,947.00</b>
<b>Capital Advances and Contingent Debt</b>	<b>\$ 4,726,991.00</b>	<b>\$ 4,726,991.00</b>
<b>*Total Liabilities</b>	<b>\$ 16,323,554.00</b>	<b>\$ 14,869,938.00</b>
<b>*Net Assets</b>	<b>\$ 13,177,817.00</b>	<b>\$ 12,391,455.00</b>
<b>Total Liabilities and Net Assets</b>	<b>\$ 29,501,371.00</b>	<b>\$ 27,261,393.00</b>



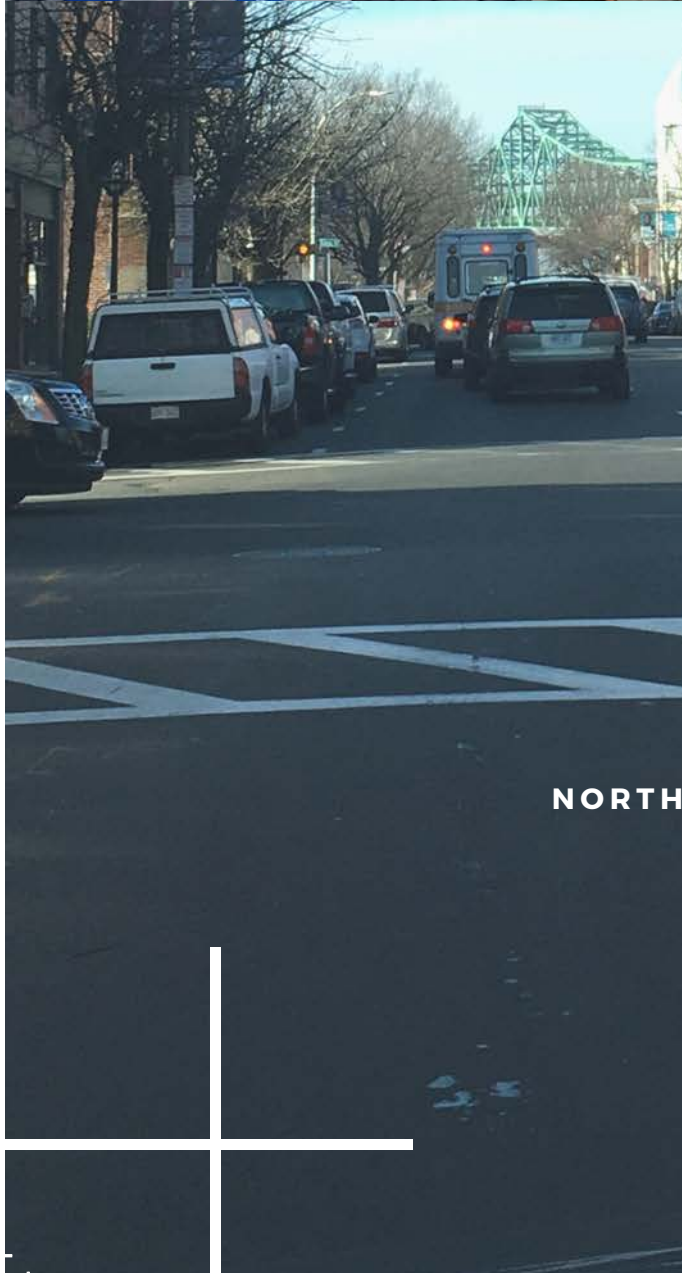
CONSOLIDATED INCOME STATEMENT	Audited 6/30/2020	Audited 6/30/2019
<b>Revenue</b>		
Grants and Contracts	\$ 37,937,490.00	\$ 33,250,708.00
Patient Revenue - Net	\$ 14,618,913.00	\$ 14,181,150.00
Other Revenue	\$ 4,458,812.00	\$ 4,298,440.00
<b>Total Revenue</b>	<b>\$ 57,015,215.00</b>	<b>\$ 51,730,298.00</b>
<b>Expenses</b>		
Program Services	\$ 50,364,851.00	\$ 45,728,027.00
Supporting Services	\$ 5,868,794.00	\$ 5,372,911.00
<b>Total Expense</b>	<b>\$ 56,233,645.00</b>	<b>\$ 51,100,938.00</b>
Other Revenue (Expense)	\$ (106,055.00)	\$ (106,215.00)
Net Assets With Donor Restriction	\$ 110,847.00	\$ (47,647.00)
<b>*Operating Income</b>	<b>\$ 786,362.00</b>	<b>\$ 475,498.00</b>

\* Foots to Audited Financial Statement - Draft

## ON THE BACK COVER

From left, Chelsea Navigator Jose Luna, Director of Recovery Support Services Katie O'Leary, and Chelsea Navigator Jose Tevenal.

Photo credits: Michael Rogers, Persistent Productions; Nina Walat  
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*"The important thing about this job is that you change people's lives."*

**JOSE LUNA**  
**CHELSEA NAVIGATOR**

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