



Statement of Program Activities 2012/2013
Statement of Fiscal Activities Fiscal Year 2012/2013

Board of Directors

Officers

David Woledge, President
Bylinda Brown, 1st Vice President
Joseph Alex Martin, 2nd Vice President
Deborah Marshall, Treasurer
Shirley Ruth French, Secretary

Mark Davis, Founding President

Regional Representatives

Region 1 Linda Parker, Charlene Saner
Region 2 Bylinda Brown
Region 3 Shirley Ruth French
Region 4 Deb Milheim
Region 5 Vacant
Region 6 Alicia Kanelopoulos
Region 7 Joseph Alex Martin
Region 8 Vacant
Region 9 Vacant
Region 10 Ronald Cole

At-Large Representatives

Tracy Carney
Mary Fala
Deborah Marshall
Bette Peoples
Margaret Thatcher
David Woledge
Cindy Work through November 1, 2012
(deceased)

New Board Officers effective July 1, 2013

David Woledge, President
Deb Marshall, First Vice President
Joseph Martin, Second Vice President
Laurie Combs, Secretary
Tracy Carney, Treasurer

New Board Members effective July 1, 2013

Region 1 Liz Woodley
Region 2 Bette Peoples
Region 3 Laurie Combs
Region 5 Tracy Carney



Board Officers Retiring effective June 30, 2013

Bylinda Brown – 2007 to 2013
Shirley Ruth French – 2008 to 2013
Charlene Saner – 2011 to 2013

PMHCA Staff

Lynn Keltz, Executive Director
Pat Madigan, Outreach Coordinator
Tyler Eppley, Fiscal Manager
Samantha Harkins, Administrative Assistant
Rita Cisneros (deceased), Program Coordinator through May 25, 2013

Executive Director's Report

Change is constant and that has been apparent at PMHCA. Through the positive changes and the challenges, the staff, Board of Directors and members have continued striving to meet our mission and live up to our vision of enhanced mental health recovery. The lessons learned through the lived experience unique to each of us, yet shared among all, have enabled us to keep going in the tough times.

The previous fiscal year ended with a lack of funding from the Office of Mental Health and Substance Abuse Services. Two grant funded programs continued and the four remaining part time staff provided many volunteer hours to continue much of our typical PMHCA work. The team of Pat, Tyler, Rita and Lynn pulled together to perform administrative work, provide information and referral services to individuals, provide technical assistance to the Pennsylvania Peer Support Coalition (PPSC) and Community Support Programs (CSP), attend policy meetings where advocacy was done to promote consumer driven goals, and keep the fiscal house in order. Many thanks go to Nancy Massey of MassyNet.com, Inc. who maintained both the PPSC and PMHCA Websites for no charge during the months when PMHCA funding was unavailable.

The grant programs of the Keystone Pride Recovery Initiative, funded by Substance Abuse and Mental Health Administration (SAMHSA), and the Stigma Project, funded by the Pennsylvania Developmental Disabilities Council, continued as planned. More information about these projects can be found at www.pmhca.org. Members receive regular updates through our email distribution lists, their elected representatives to the Board of Directors and at gatherings such as the regional CSP meetings.

Received this year was a six month grant from BRSS TACS (Bringing Recovery



Supports to Scale Technical Assistance Center Strategy). Pat Madigan is coordinating focus groups to obtain information from consumers about what they need to know about the Affordable Care Act's insurance marketplaces and to share information about them, as it becomes available. The focus groups are held at regional CSP meetings.

PMHCA collaborated with the Mental Health Association in Pennsylvania (MHAPA) to apply for funds from OMHSAS, using the new Statement of Work process. Partial funding for the fiscal year was received in mid-December and the new work plan was implemented. Sue Walther, MHAPA Executive Director, understood the need to collaborate during tough financial times. She will present during the Annual Meeting about our approach and the Behavioral Health Navigator's who have provided information and referral services as MHAPA employees. One Navigator is located in the PMHCA office.

Administrative responsibilities were turned over to Samantha Harkins in late December when OMHSAS funding was received. It is tremendously important to have this type of expertise in any organization and it was missed for the six months we were without it.

In the final six months of the fiscal year, PMHCA and MHAPA jointly provided three Recovery Sharing Workshops held in Wyomissing, Mars and State College. All featured workshops on Mental Health Advanced Directives, I'm the Evidence and Leadership in Recovery. Some members found this to be an alternative to the learning opportunities and networking typically found at the PMHCA Annual Conference, which could not be held this year.

Community Support Programs received partial funding for the fiscal year and were able to distribute seed grants and provide scholarships to a variety of events. The Drop in Center Coalition was not active but a Drop in Center list available on the PMHCA Website can help link people to local opportunities. Centers and consumers are relied on to help us keep it updated.

New for the PPSC and PMHCA Websites is a [database](#) that allows users to find peer support services and/or employers of peer specialists by county. These are based on providers licensed by OMHSAS. We have been pleased to get feedback and local updates from peers and providers.

The goal of the Pennsylvania Peer Support Coalition (PPSC), since its beginnings, has been to develop into an independent organization. The Coalition has been provided PMHCA office space, technical assistance and operational support and has been welcomed as a part of PMHCA. Throughout this past year, the PPSC Steering Committee held discussions and a strategic planning meeting that led them to a major decision. They voted to assume the non-profit 501 (c) (3) status of an organization in



Lancaster County, Recovery Connections, which had lost its county funding for Consumer/Family Satisfaction Team work. Exploration was done by the Steering Committee with the board of Recovery Connections (RC), resulting in PPSC members joining that board in preparation for a July 1, 2013 start up of independent status. We wish them the very best as they prepare for this new chapter. PMHCA will continue to provide the PPSC Website through September 30, 2013 and expects to collaborate in many ways as we all move forward to promote peer support.

Our association works to influence public policy through activities of staff and the Board of Directors. This is an important way to combat stigma and discrimination, to promote a recovery-oriented mental health system and to inform the public about mental health concerns. Participation on various stakeholder groups continues, enabling us to use our voices for members on issues that affect their lives. This year the Human Services Block Grant is again a point of debate, as legislative efforts both to stop it and to continue it are being introduced as the legislature prepares to vote on the 2013-2014 budget.

Another advocacy tool is litigation. PMHCA entered into a law suit against the Pennsylvania Department of Welfare, with other organizations and individuals. The Disability Rights Network filed the petition with Commonwealth Court asserting arguments against the pilot Human Services Block Grant Program enacted through Act 80. This program started with implementation of the 2012-2013 state budget year. The Court issued an opinion June 24, 2013 asking the petitioners, DRN, and DPW to submit further arguments on three points. Although a final decision will not be rendered for a least a couple months, the Court did state it agreed with petitioners that the bill "appears to vest legislative authority in the Department of Public Welfare, in violation of separation of powers". It is unknown how this will affect the state budget's final outcome for human services. When a final decision is reached, it will be shared with PMHCA members.

Medicaid Expansion has been a topic of debate in Pennsylvania also. The Corbett administration opted out of the opportunity to expand, just as they opted out of operating the new insurance marketplaces. People with mental health needs who are not eligible for Medicaid and do not have private insurance could benefit from Medicaid expansion. Advocates will continue to push for expansion in final budget negotiations. PMHCA will keep people informed of insurance plans that will become available through the Affordable Care Act, as material is released.

Public relations efforts have been strong throughout the year with newspaper letters to the editor and op eds; television, newspaper and radio interviews; the use of our database for email blasts, and posts on our Websites and our Facebook page. We request that all members keep us informed when email addresses change so we can



continue to be in touch.

What will the next year bring? There will be change, to be sure. There will also continue to be dedicated, committed people in recovery who come to the forefront when education, stigma busting, advocacy, training and peer support are needed to assert and to demonstrate that **people** matter.