MID-YEAR REPORT FOR OUTCOME PROGRESS

Reporting for: July 1 – November 30 of the current year!

Agency Name: NAMI Central Iowa (NAMICI)

Program Name: NAMI on Campus

Brief Description of Program: NAMI on Campus is a student-led, student-run mental health (MH) organization at ISU and is dedicated to raising awareness, educating campus community, promoting services, supports & advocating on MH issues. With increase in student population at ISU we see an increased need to educate, support and advocate on behalf of those affected with or by MH issues.

1. **Program/ Service Outcome (Change/ Benefit to Clients/ Community) – please refer back to the corresponding ABF 5(O) and provide an update on program/ service outcome from July 1 to date:** NAMI on Campus is a student-led, student-run mental health (MH) organization at ISU and is dedicated to raising awareness, educating campus community, promoting services, supports & advocating on MH issues. With increase in student population at ISU we see an increased need to educate, support and advocate on behalf of those affected with or by MH issues.
   The program is of benefit to ISU students and the overall community in raising awareness about mental health and resources available.

2. **Measurement Used (How Often, Tools Used) – please refer back to the corresponding ABF 5(O) and provide an update on measurement used from July 1 to date:** We will keep statistics on how many people attended and participated in NAMI on Campus classes. A survey will be administered to participants in meetings/classes to determine (1) if the presentations increased participant awareness of mental illness and; (2) if the presentation increased their understanding of mental illnesses as treatable biological disorders. Surveys are administered quarterly.

3. **Measurement Update (Please provide update on measurement data collected based on the ABF 5(O) from July 1 to date):** Data is collected quarterly, 100% of the respondents stated that the presentations have both increased their awareness and understanding of mental illnesses.

4. **Outcomes Achieved (Result to Clients/ Community) – please refer back to the corresponding ABF 5(O) and provide an update on the outcomes achieved from July 1 to date:**
   100% of the respondents stated that the presentations have both increased their awareness and understanding of mental illnesses. Additional comments have included: "NAMI has seriously impacted my life and increased my awareness". "I have learned much more about what mental illness looks like and how to help those who are struggling." "I have learned more about mental illness related statistics and resources." "I

have learned more about resources available on campus."

5. **Barriers Encountered (please refer back to the corresponding ABF 5(O) and provide an update on the barriers encountered from July 1 to date):** No barriers encountered to date.

6. **Clients Served (please refer back to the corresponding ABF 5 Service Statistics and provide an update on number of clients served from July 1 to date):** To date: 271 clients served and 70.53 units of services (Aug-Oct)
   - Monthly meetings approx. 10 individuals attend

   To date; outreach has included: Bandana project, ISU Homecoming parade, Club Fest, MH Expo, NAMI Walk, ISU After Dark and monthly meetings.

7. **Have you had to turn any clients away that desire to participate in this program? If so, why? If so, how many? If so, when?** No, the group has not turned away anyone who desires to participate in the program.

8. **Comments:**
   NAMI on Campus president serves on the NAMI Central Iowa Board of Directors. Additionally, the advisory for NAMI on Campus is ISU police chief Newton. His is the former president of NAMI Wisconsin and currently serves on the NAMI Iowa Board of Directors.

   NAMI on Campus was also a partner in bringing in the guest speaker for the 2017 Mental Health Expo, and introduced the speaker at the event.

Staff Use Only:		
Change/ Benefits demonstrated for client/ community?	Yes	No
Quantifiable Outcome Measures?	Yes	No
Outcomes Reported?	Yes	No

MID-YEAR REPORT FOR OUTCOME PROGRESS

Reporting for: July 1 – November 30 of the current year!

1. **Agency Name:** NAMI Central Iowa (NAMICI)

   Program Name: Wellness Center

   Brief Description of Program: The Mental Health Wellness (Drop-In) Center provides support and programs with an emphasis on whole health for individuals living with a mental illness. Every weekday afternoon the center is open and offers programs such as writing group, exercise classes, art, music, agency awareness, and talks on issues that affect individuals living with mental illness. A monthly calendar is available at our Center, website, delivered to organizations and e-newletter of monthly activities.

2. **Program/ Service Outcome (Change/ Benefit to Clients/ Community) – please refer back to the corresponding ABF 5(O) and provide an update on program/ service outcome from July 1 to date:** Many of the clients at the Wellness Center come every day. We averaged 126 visits each month. For many of these people, it's their reason to get out of bed in the morning, and the other participants are their "family of choice." As long as mental illness carries such stigma, having a safe place to come where others understand and give support is crucial to those who use the Center. The center offers early intervention and support that could help deter situations from requiring more costly services.

3. **Measurement Used (How Often, Tools Used) – please refer back to the corresponding ABF 5(O) and provide an update on measurement used from July 1 to date:** Quarterly we have participants complete a survey regarding participation and volunteering at NAMICI Wellness Center.

4. **Measurement Update (Please provide update on measurement data collected based on the ABF 5(O) from July 1 to date):** Questions include: 1) Has participating in the programs at the Wellness Center had a positive impact on your mental health? 2) Has volunteering at the Wellness Center had a positive impact on your mental health? 3) Are you better able to cope? A space for additional comments is also provided.

5. **Outcomes Achieved (Result to Clients/ Community) – please refer back to the corresponding ABF 5(O) and provide an update on the outcomes achieved from July 1 to date:** Of the participants who have responded to the survey, 100 % have stated that the center has had a positive impact on their mental health and assisted with their ability to cope. Additionally, 98% stated that volunteering had a positive impact on their mental health. The other 2% stated it was not applicable.

6. **Barriers Encountered (please refer back to the corresponding ABF 5(O) and provide an update on the barriers encountered from July 1 to date):** No barriers encountered to date.

7. **Clients Served (please refer back to the corresponding ABF 5 Service Statistics and provide an update on number of clients served from July 1 to date):** To date the Wellness Center has served 58 unduplicated clients with an average of 126 visits per month.

8. **Have you had to turn any clients away that desire to participate in this program? If so, why? If so, how many? If so, when?** We have not had to turn any clients away at this time.

9. **Comments:**
The NAMICI Wellness Center is open Monday – Friday from 1-4pm.
We have seen a bit of a downturn in clients attending the Center. This could be due to warmer weather, as well as some have obtained jobs.
We are increasing our outreach throughout the County to make people aware of our Center.

Staff Use Only:		
Change/ Benefits demonstrated for client/ community?	Yes	No
Quantifiable Outcome Measures?	Yes	No
Outcomes Reported?	Yes	No

MID-YEAR REPORT FOR OUTCOME PROGRESS

Reporting for: July 1 – November 30 of the current year!

Agency Name: NAMI Central Iowa (NAMICI)

Program Name: Public Education and Awareness

Brief Description of Program: NAMI increases public education and awareness by sending newsletters, both hard copy and electronic, to community schools and churches. By having booths at community events such as ISU volunteer fairs, MH Expo etc., and by presenting to various groups and organizations.

1. **Program/ Service Outcome (Change/ Benefit to Clients/ Community) – please refer back to the corresponding ABF 5(O) and provide an update on program/ service outcome from July 1 to date:** NAMI increases public education and awareness by sending newsletters to community schools and churches. By having booths at community events such as ISU volunteer fairs, MH Expo, Gilbert MH community conversation, etc., and by providing speakers for community groups, such as Kiwanis, Rotary, Optimae. Staff or volunteers staff the booths, and the executive director usually does the speaking in the community. Understanding mental illness helps break down stigma, which can often prevent people from going for treatment. To date, NAMICI has done 8 presentations & 3 vendor fairs reaching 467 people.

2. **Measurement Used (How Often, Tools Used) – please refer back to the corresponding ABF 5(O) and provide an update on measurement used from July 1 to date:** A survey is given to those in the audience at our monthly public education presentations at least quarterly.

3. **Measurement Update (Please provide update on measurement data collected based on the ABF 5(O) from July 1 to date):** The survey measures whether the presentation increased the understanding of mental illnesses.

4. **Outcomes Achieved (Result to Clients/ Community) – please refer back to the corresponding ABF 5(O) and provide an update on the outcomes achieved from July 1 to date:):** Of the surveys that were completed, 99.9 percent stated that they learned more about mental illness. Actually, several stated that they learned about NAMICI in general.

5. **Barriers Encountered (please refer back to the corresponding ABF 5(O) and provide an update on the barriers encountered from July 1 to date):** The barrier identified so far is having individuals complete the brief survey we provide. We are working on ways to increase participation in our surveys.

6. **Clients Served (please refer back to the corresponding ABF 5 Service Statistics and provide an update on number of clients served from July 1 to date:** To date, NAMICI has done 8 presentations & 3 vendor fairs reaching 467 people. (For the vendor fairs – we keep track of how many attended, but only report the number of people we actually spoke to about NAMICI and what we provide.
Additionally, 312 individuals receive our newsletter electronically and 351 receive it via regular mail.

7. **Have you had to turn any clients away that desire to participate in this program? If so, why? If so, how many? If so, when?** We have not had to turn anyone away.

8. **Comments:**
NAMICI has been in the community for several years. While the name has evolved from the, "Alliance on Mental Illness to the National Alliance on Mental Illness of Central Iowa", many people are still unaware of our agency and what we provide. We are continuing to do our presentations, and have revamped our website to provide more information.

Additionally, we have a volunteer assisting us with outreach through social media, as we try to increase name recognition and connect to a broader audience.

Staff Use Only:		
Change/ Benefits demonstrated for client/ community?	Yes	No
Quantifiable Outcome Measures?	Yes	No
Outcomes Reported?	Yes	No

MID-YEAR REPORT FOR OUTCOME PROGRESS

Reporting for: July 1 – November 30 of the current year!

Agency Name: NAMI Central Iowa (NAMICI)

Program Name: Family & Consumer Support

Brief Description of Program: This program provides support for individuals living with mental illness and their family members. Individual support is provided daily at the NAMI office by the executive director or peer coordinators. Group support is provided weekly for individuals living with mental illness through NAMI Connection Peer Support, led by individuals (volunteers) living with mental illness who have received special training to lead support groups. Group support is provided monthly for family members of individuals living with mental illness through a NAMI Family Support Group, led by volunteer family members who have received special training to facilitate support groups.

1. **Program/ Service Outcome (Change/ Benefit to Clients/ Community) – please refer back to the corresponding ABF 5(O) and provide an update on program/ service outcome from July 1 to date:** Both individuals living with mental illness and their family members need a place where they can talk about their situation and feel that the group understands their experience. This happens best in a peer-run group, where everyone has had the same lived experience. Counselors and therapists can be helpful, but they are costly. NAMI is able to offer these valuable groups, as well as individual support, at no cost to the participant. Without this program, many people would be without this type of peer support.

2. **Measurement Used (How Often, Tools Used) – please refer back to the corresponding ABF 5(O) and provide an update on measurement used from July 1 to date:** All individuals attending support groups are asked to fill out an evaluation. The peer group fills out the survey on a quarterly basis.

3. **Measurement Update (Please provide update on measurement data collected based on the ABF 5(O) from July 1 to date):** Two quarterly evaluations of the NAMI Connection support group and one Family Support Group evaluation have been filled out by participants since July 1.

   The survey(s) administered asks: 1) Does this support group give you a chance to talk and feel understood? 2) Do you feel confident to use the skills learned? 3) Do you have a better ability to cope? 4) Have you made a change based on your participation?

4. **Outcomes Achieved (Result to Clients/ Community) – please refer back to the corresponding ABF 5(O) and provide an update on the outcomes achieved from July 1 to date**: To date; of the respondents, 98% responded Yes to (1) Does this support group give you a chance to talk and feel understood? 98% responded Yes (2) Do you feel confident to use the skills learned? 100% responded Yes, (3) Do you have a better ability to cope? 100% responed, Yes (4) Have you made a change based on your participation?

   I'll add that surveys are given to individuals who attend our support groups only. We do not include individuals who have called our office, emailed or stopped in to talk with staff seeking assistance; whether here at NAMICI or potentially through referrals to a more appropriate agency dependent on their specific needs.

5. **Barriers Encountered (please refer back to the corresponding ABF 5(O) and provide an update on the barriers encountered from July 1 to date):** No barriers occurred.

6. **Clients Served (please refer back to the corresponding ABF 5 Service Statistics and provide an update on number of clients served from July 1 to date):** To date we have served 135 unduplicated clients. These numbers include individuals who have attended either our peer or family support groups. It also includes calls, emails or drop-in of individuals seeking specific assistance.

7. **Have you had to turn any clients away that desire to participate in this program? If so, why? If so, how many? If so, when?** To date, we have not had to turn away any clients.

8. **Comments:**

Staff Use Only:		
Change/ Benefits demonstrated for client/ community?	Yes	No
Quantifiable Outcome Measures?	Yes	No
Outcomes Reported?	Yes	No

MID-YEAR REPORT FOR OUTCOME PROGRESS

Reporting for: July 1 – November 30 of the current year!

Agency Name: NAMI Central Iowa (NAMICI)

Program Name: Family & Consumer Education

Brief Description of Program: NAMI educational programs include: monthly program in community settings for people interested in topics related to mental health; Family to Family 12 week class for family members of individuals living with mental illness, led by trained family members. Peer-to-Peer 10 week class for individuals living with mental illness, led by trained peers. Basics is a 6-week class for caregivers & parents of children & adolescents with mental & emotional disorders, led by trained family members. Classes offered at the Wellness Center and in CICS region.

1. **Program/ Service Outcome (Change/ Benefit to Clients/ Community) – please refer back to the corresponding ABF 5(O) and provide an update on program/ service outcome from July 1 to date:** Public education and awareness is crucial to reducing the stigma in society surrounding mental illness. Learning that these are biological illnesses, and hearing the life story of a family member or an individual living with mental illness, cuts through the stigma. This may result in people being more willing to go for treatment, or in a better understanding of friends and neighbors who may be living with mental illness. Knowledge is power, and this is especially true for knowledge about mental illness. People need to learn about the illnesses affecting them. What treatments are available, and what local resources could help them. Knowledge also combats stigma, which keeps many people from treatment.
   To date we have provided one Family-to-Family class, one peer-to-peer class, and provided six public education presentations.

2. **Measurement Used (How Often, Tools Used) – please refer back to the corresponding ABF 5(O) and provide an update on measurement used from July 1 to date:** All participants in our educational classes, and those in attendance at one of our monthly community meetings, are asked to fill out a survey

3. **Measurement Update (Please provide update on measurement data collected based on the ABF 5(O) from July 1 to date):** The survey asks three questions: 1) Has taking this class (or attending this program) increased your knowledge about mental illnesses and their treatments? 2) Has taking this class (or attending this program) increased your ability to cope with the challenges of mental illness? 3) Has taking this class made you more confident to use the skills learned in coping and support self or loved one's mental illness?

4. **Outcomes Achieved (Result to Clients/ Community) – please refer back to the corresponding ABF 5(O) and provide an update on the outcomes achieved from July 1 to date**: To date, of those who completed the survey: 100 % stated the education programs have increased their knowledge and understanding, coping skills and raised their confidence to use skills learned about mental illness.

5. **Barriers Encountered (please refer back to the corresponding ABF 5(O) and provide an update on the barriers encountered from July 1 to date):** We initially did not have trained facilitators to offer the Basics class. We now have two trained facilitators and plan to offer this class in 2018.

6. **Clients Served (please refer back to the corresponding ABF 5 Service Statistics and provide an update on number of clients served from July 1 to date):** To date we have served, 81 unduplicated individuals through our Education programs.

7. **Have you had to turn any clients away that desire to participate in this program? If so, why? If so, how many? If so, when?** Our Fall Family-to-Family class was full, so we have a waiting list for individuals interested in taking the next Family-to-Family class.

8. **Comments:**
   We have formed a subcommittee to help with outreach and marketing to increase class registration and to set scheduling of classes.

Staff Use Only:		
Change/ Benefits demonstrated for client/ community?	Yes	No
Quantifiable Outcome Measures?	Yes	No
Outcomes Reported?	Yes	No

MID-YEAR REPORT FOR OUTCOME PROGRESS

Reporting for: July 1 – November 30, 2017

Agency Name: NAMI Central Iowa (NAMICI)

Program Name: Emergency Assist Fund 2.1a

Brief Description of Program: The Emergency Assist fund provides emergency loans to individuals living with mental illness who are facing a financial crisis and can't afford certain basic needs.

1. **Program/ Service Outcome (Change/ Benefit to Clients/ Community) – please refer back to the corresponding ABF 5(O) and provide an update on program/ service outcome from July 1 to date:** The Emergency Assist fund provides emergency loans to individuals living with mental illness who are facing a financial crisis and can't afford certain basic needs. The person's mental health worker contacts NAMI with the need, and our volunteer loan administrator sends a check directly to the landlord, etc. Individuals pay back the no-interest loan as they are able.

2. **Measurement Used (How Often, Tools Used) – please refer back to the corresponding ABF 5(O) and provide an update on measurement used from July 1 to date:** We track the ways persons receiving the emergency assistance were able to meet their basic needs.

3. **Measurement Update (Please provide update on measurement data collected based on the ABF 5(O) from July 1 to date):** We have tracked the way the 10 people who received funds were able to meet basic needs.

4. **Outcomes Achieved (Result to Clients/ Community) – please refer back to the corresponding ABF 5(O) and provide an update on the outcomes achieved from July 1 to date**: Individuals receiving the emergency assistance loan were able to restart phone service, obtain a birth certificate, replace car key, rent assistance and clothing.

5. **Barriers Encountered (please refer back to the corresponding ABF 5(O) and provide an update on the barriers encountered from July 1 to date):** To date we have not encountered any barriers.

6. **Clients Served (please refer back to the corresponding ABF 5 Service Statistics and provide an update on number of clients served from July 1 to date):** Ten people have received assistance through our loan program.

7. **Have you had to turn any clients away that desire to participate in this program? If so, why? If so, how many? If so, when?** We have only had to turn someone away who didn't meet the basic MI criteria for services through our program. Those individuals were referred to another agency for assistance.

8. **Comments:** This fund continues to be of great assistance to individuals living with a mental illness.

Staff Use Only:		
Change/ Benefits demonstrated for client/ community?	Yes	No
Quantifiable Outcome Measures?	Yes	No
Outcomes Reported?	Yes	No