



Dear Friends and Colleagues,

Throughout its history, Community Alliance has responded to meet the needs of our community and those facing mental health and substance use challenges. In our earliest days, this responsiveness had us focusing on housing and other basic needs of those moving in and out of our state psychiatric hospitals. Too many individuals were ending up dependent on parents or substandard housing, and without sufficient services and supports to effectively manage their illness or the stressors of daily living.

In our second decade, we saw the advent of new, evidenced-based models such as Assertive Community Treatment and Supported Employment. Community Alliance implemented these and other best practices, and emerged as leaders in increasing awareness and acceptance that people living with mental illness and substance use challenges can and do recover, living, working and contributing to both family and community.

Such progress notwithstanding, new research revealed that people living with serious mental illness were dying, on average, 20 to 25 years younger than those without mental illness. The vast majority of these premature deaths were attributable to treatable physical health conditions. Research also showed that access to physical health care was severely limited for those experiencing a serious mental illness. This precipitated Community Alliance's decision to introduce primary health care within our service continuum. Today, coming off

three years of physical and social-economic trauma brought on by a global pandemic, we continue to see increases across all age groups — adults, teens and children — in the prevalence of anxiety and depression, substance use and abuse, and emergency room visits attributable to mental health concerns. Once again we are called to expand our vision of an accessible, responsive mental health system for all in our community.

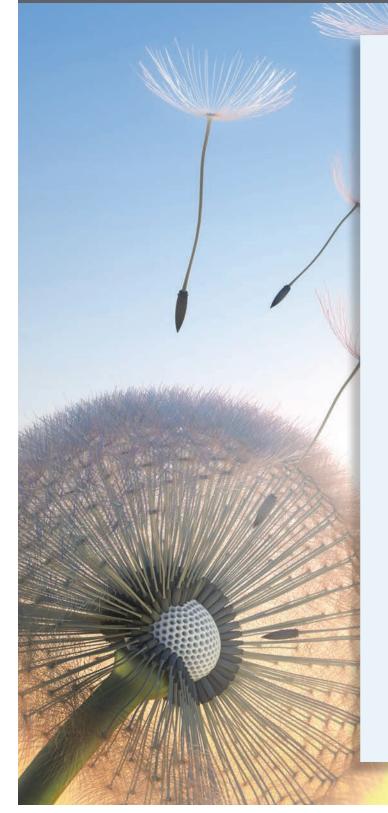
This expanded vision requires increasing access, developing new services and enhancing existing ones to fill identified needs and gaps. It means embracing a whole-person approach in defining what recovery really means, and further expanding our outreach and educational efforts to increase awareness. And it compels us to partner with others throughout our community to more effectively meet these needs. We have achieved significant success this past year in each of these areas, as reflected in this annual report. Yet, there is so much still to be done.

We must continue to learn, lead and partner with all in our community, and across the state, as we work towards a future in which all our friends, neighbors, and loved ones who face a mental health and substance use challenge attain the services and supports they need and deserve along their journey to recovery. We are immeasurably grateful to each and every one of you supporting us in this effort. Together, we can and will make progress and achieve the expanded vision we collectively share.

> Carole J. Boye CHIEF EXECUTIVE OFFICER

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Expanding Our Vision of Access





It takes enormous strength and a good dose of courage to ask for help when facing a mental health challenge. When one summons such strength and courage, the mental health system must be there to respond in the moment.

Why is this so important? Because when people aren't able to access care in a timely manner, that moment of strength and courageous vulnerability may pass. And what may be a mild to moderate problem can grow in severity, ultimately leading to crisis and the potential for long-term disability. Wait lists in particular are detrimental to access and recovery. Research tells us that when individuals experience a delay in response or are put on a wait list, at least 25% and as many as 50% never enter into services.

At Community Alliance, we envision a system of care where people do not need to wait until there is a crisis, and then rely on an emergency room, to access the help they want and need. During 2022, we took active steps to achieve this vision by formalizing a centralized access team who can provide same-day connection to trained mental health workers via appointment, telephone, walkin or scheduled appointment. Peer Support Specialists continue to be available by phone or in-person 24/7 at our Safe Harbor crisis diversion center to help individuals navigate stressful situations that do not require clinical intervention. We also modified our processes and adopted national standards related to timely access, as well as continued to work on increasing our capacities and responsiveness in identified service areas.

Our goal is clear: When one summons that strength and courage to ask for help, we will be there. We will be there to help identify and address the immediate need. We will be there to form a plan built on the understanding that you are not alone - by working together toward recovery, tomorrow can be better and more hopeful than today.





Expanding Access...

- During 2022, Community Alliance responded to 1,210 referrals and initial inquiries for services through our expanded response team, an increase of 34% over the previous year.
- The Safe Harbor peer-run crisis diversion service responded to 701 guests and 9,007 calls, helping individuals in dealing with stressful situations; 98% of persons surveyed reported the service prevented an emergency room visit or hospitalization.
- Intake and response processes were modified to improve timeliness, including adoption of new guidelines outlined under Certified Community Behavioral Health Center standards to provide access to screening and initial assistance within one business day for urgent needs and within 10 business days for non-urgent care. Delays in access to initial service were decreased by as much as 70% across various program areas.
- Overall, Community Alliance enrolled 3,657 persons for mental health treatment, rehabilitation and recovery services and/or primary health care, an increase of 13% over the prior year. An additional 1,386 persons received one-time assistance.



Construction of our new, centrally located headquarters at 72nd and Mercy Road in Omaha began in 2022. When completed in Spring 2024, this facility will fully support our integrated model of care and provide added service capacity for existing and new services going forward.

Expanding Our Vision of Care





At Community Alliance, expanding our vision of care starts with fully embracing an integrated service model, meaning both existing and new services are organized in ways that recognize and address the inter-relationship between one's mental health, physical health and social-economic needs in a holistic manner. Among the benefits of such an approach is greater access to a broad spectrum of trained clinical and community specialists at a single point of entry, and a highly coordinated plan of care. This alleviates a person having to go to several different agencies to address multiple, inter-related problems. It also helps to assure that the various professionals working with the individual interact with one another, each offering their perspective and together determining a set of coordinated interventions and supports.

While proud of the breadth of our services, we are continuously evaluating both service capacities and service gaps. Historically, Community Alliance has focused on people living with serious mental illness and those most vulnerable, including individuals at risk of homelessness, people with very low income, those experiencing food insecurity and those reliant on public assistance. This population is also three times as likely to have a chronic physical condition and experience early mortality. Our commitment to those who are under-resourced and living with serious mental illness is unwavering.

At the same time, in listening to persons served, their families, and our community, we see clearly that more is needed. Such listening sessions have resulted in Community Alliance embracing a new, national framework for service delivery and expanding our service continuum this past year to better position ourselves as a resource to anyone facing a mental health or substance use challenge, across all ages and socio-economic levels.



Expanding Care...

New service development and enhancement of current services in 2022 included the following:

- Expanded psychiatric and therapy service capacity, including the recruitment of both on-site and telehealth providers.
- Hiring of a chief medical officer.
- · Added levels of substance use treatment options, including assessment, outpatient and intensive outpatient modalities.
- Expanded employment services including embedding employment specialists within our day rehabilitation program sites.
- · Initiation of team-based re-entry services for justiceinvolved individuals with mental health needs.
- Integration of population health and care coordination services within the integrated health clinic.
- Further expanding our health and wellness service capacity.
- Expanding peer support to our First Episode Psychosis Program.









Expanding Recovery...

Mental Health

- **80%** of participants in our outpatient psychiatric treatment and counseling programs and evaluated as part of our federal grant programs reported improvement or alleviation of impact of mental health symptoms after 6 months of engagement, and a statistically significant reduction in psychological distress and an associated increase in ability to effectively deal with daily activities.
- **94%** of survey participants agreed or strongly agreed that services helped them to obtain the information needed to take charge of managing their illness.
- **65%** of participants served in community support services showed improvement in daily living skills.
- **75%** of persons enrolled in residential services were able to transition to a more independent level of care.
- 92% of all persons served achieved a level of recovery and community tenure that averted the need for psychiatric hospitalization throughout the year.

Social Wellbeing

- 75,555 days of community housing were provided through Community Alliance-owned apartments and group residences.
- 8 out of 10 persons without any source of income at time of admissions were aided in obtaining financial resources through employment, federal and state assistance programs, or other means.
- External evaluators found a statistically significant reduction in "troubled nights" defined as nights in jail, detoxification, or hospital after 6 months program engagement in one or more of Community Alliance's federally funded grant programs.



Physical Health

Improvements in physical health were also found by our external evaluators. These include:

- 49% of persons with hypertension and at greater risk for stroke achieved normal levels of systolic blood pressure after 6 months of program engagement; 41% saw normal levels for diastolic blood pressure during the same timeframe.
- 63% of individuals diagnosed as diabetic or prediabetic were able to lower their A1C level.
- 60% of enrolled clients that were assessed as obese based on BMI showed improvement in weight or waist circumference at six month reassessment.
- 1,894 individuals across all program areas participated in Community Alliance-provided health and wellness activities including exercise classes, diabetes management, stress reduction, weight management and smoking cessation.

Meaningful Purpose and Contribution

- A decrease from **29% to 16%** of respondents reporting not having a sense of belonging within the community after six months of services.
- A decrease from 25% to 13% in persons rating quality of life as poor or very poor during the same six month period.



Expanding Outreach & Partnership...

Throughout 2022 our outreach and partnership took many forms including:

- Providing suicide prevention, education and training to 1,937 people over the course of the year.
- · Hosting Breaking the Silence, our annual community education effort to expand awareness, education and support. In 2022, more than 600 individuals joined us to hear actor, producer and director Sean Astin talk about coming to understand his mother's - Patty Duke - struggle with mental illness, and the importance of advocacy for our loved ones.
- In partnership with the Nebraska Division of Public Health, providing leadership in the state-wide Nebraska Integrated Health Task Force to advance integrated behavioral health and primary health care for those experiencing serious mental illness and chronic health conditions.
- · Joining with the Kutilek family for the second annual Bike with Mike event, held in honor of their son and brother, and reaching out to the hundreds who participated with a message that it's okay to ask for help.
- Participating in community awareness events including AFSP Nebraska Out of the Darkness walk, NAMI Nebraska Mental Health for All walk, and the summer Maha Festival community village.
- · Expanding family education outreach and support, with the support of the City of Omaha and the Medica Foundation.

- Facilitating multiple peer support training classes, resulting in the graduation of 47 individuals and preparing them for State certification as Peer Support Specialists.
- Hosting 472 students from 14 academic institutions across 10 disciplines to help educate and grow the behavioral health workforce in collaboration with the Behavioral Health Education Center of Nebraska.
- · Participating in more than 100 presentations and community forums related to mental health and substance use challenges, services, and tools for recovery and wellbeing.
- Providing information and outreach to legislators and public policy makers about the impact and benefits of the new federal framework for mental health service delivery, Certified Community Behavioral Health Centers (CCBHC) and adoption of other emerging best practices.
- Maintaining strong working relationships with colleagues in a wide range of collective impact efforts, including Metro Area Continuum of Care for the Homeless, Nebraska Association of Behavioral Health Organizations, Metro Area Suicide Prevention Coalition, and Nonprofit Association of the Midlands.



Lord of the Rings actor Sean Astin, this year's guest speaker at Breaking the Silence.



Sharing some fun along with information on mental health at 2022 Maha Festival.

The People We Serve

TOTAL PERSONS SERVED

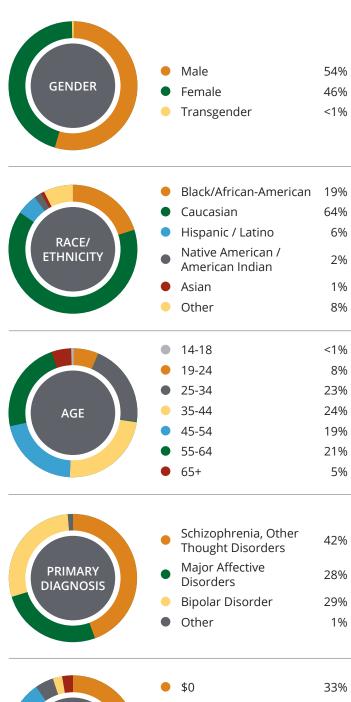
5,043

BY SERVICE AREA

SERVICE AREA	2022	
Psychiatric Services	749	
Mental Health, Substance Use Counseling Services	311	
Primary Health Care	647	
Navigate to Success (First Episode Psychosis) Services	25	
Assertive Community Treatment	89	
Residential Rehabilitation Services	147	
Day Rehabilitation Services	667	
Employment Services	145	
Community Support Services	431	
Family Education & Support	170	
Peer Support Services	129	
Peer Crisis Diversion		
Callers	793	
Guests	255	
Homeless Outreach/Transition Services	282	
Social Security Outreach, Access and Recovery (SOAR)	335	
Emergency Rental Assistance Program	1386	
Supportive Housing	226	

Total by service exceeds agency total as persons may be served in more than one service area during the program year. Data is for the 2022 program year.

BY DEMOGRAPHICS





2022 Donations

Our sincere thanks to all who, through their financial contributions, in-kind gifts and other donations, gave to Community Alliance in support of its mission and services in 2022.

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2022 Memorials and Tributes

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John & Sharon McClure

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Charles Neumann

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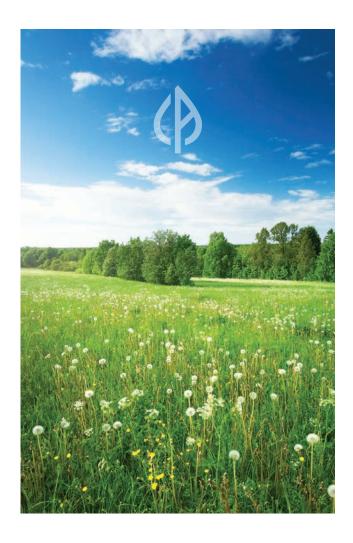
Financial Summary

REVENUE & SUPPORT	2022
Earned Contracts & Fee for Service	\$ 15,500,698
Rent & Other Housing Related	568,992
Client Fees	289,114
Restricted Grants & Contributions	365,719
Fundraising & Other Donations	1,237,383
Interest & Other Income	1,165,599
Total Operating Revenue	\$ 19,127,505

OPERATING EXPENSES	
Residential Rehabilitation Services	\$ 2,243,151
Assertive Community Treatment	1,026,285
Day Rehabilitation Services	1,023,866
Community Support Services	1,670,662
Outpatient/Integrated Care Services	2,601,406
Homeless Services	1,101,360
Employment Services	373,467
Family & Peer Support Services	901,297
Housing Services	726,157
Covid Response	4,690,850
Other	76,275
Management & Fundraising	2,405,408
Total Operating Expense	\$ 18,840,184

NET OPERATING GAIN (LOSS)	
Before Capital Investments	\$ 287,321

CAPITAL INVESTMENTS	
Capital Grants & Donations	\$6,247,210
Capital Expenditures	8,828,866
Total Capital Investments	\$(2,581,656)



The services of Community Alliance are funded, in part, by the Nebraska Department of Health and Human Services; Region 6 Behavioral Healthcare; Nebraska Department of Education, Division of Vocational Rehabilitation; Nebraska Department of Corrections; U.S. Department of Health and Human Services; U.S. Department of Housing and Urban Development; and United Way of the Midlands. Federal financial support is received both directly and through contractual arrangements with the State of Nebraska, Region 6 Behavioral Healthcare, and the City of Omaha. Community Alliance received direct federal funding from the federal Substance Abuse and Mental Health Services Administration (SAMHSA), a division of the U.S. Department of Health and Human Services under the following grant awards:

CFDA 93.839 ,SAMHSA Certified Community Behavioral Health Centers Expansion Grants, Award No. H79SM085230.

CFDA 93.665, SAMHSA COVID-19 Emergency Response for Suicide Prevention Grants, Award No. H79FG000379.

CFDA 93.958, SAMHSA Community Mental Health Centers Grant Program, Award No. H79SM085420.

Of total program costs incurred by Community Alliance, \$8,202,618 or 44% represents federal funding received through these grants or passed through by other governmental authorities.

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Community Volunteer

Muirne Heaney

Legal Aid of Nebraska

Margie Heller

Mutual of Omaha Bank (retired)

Mike Homa

R&R Realty Group

Steve Kerrigan

University of Nebraska at Omaha

George Kleine

Kiewit Corporation (retired)

Steve Kutilek

Customer Service Profiles

Lorie Lewis

American National Bank

Ralph Morocco

Healthcare Consultant (retired)

Darlene Mueller

Community Volunteer

Taylor Renfro

Dornan, Troia, Howard, Breitkreutz & Conway

Janet Sutera

Union Bank & Trust

Tara Wisdom

OrthoNebraska



This annual report is a publication of Community Alliance. The Board of Directors and all employees are committed to carrying out their responsibilities in a professional and ethical manner reflecting Community Alliance's mission, values and purpose. Community Alliance operates within a multi-corporate structure designed to enhance the effectiveness and efficiency of its many operations and to meet various statutory and regulatory requirements. Our service area includes the greater Omaha area and the five Nebraska counties within the Region 6 behavioral health area. All corporations comprising the Community Alliance system are recognized as nonprofit, charitable corporations under Section 501(c)(3) of the Internal Revenue Code. Contributions are tax deductible as permitted by law.





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