

NAMI Maryland is a grassroots organization dedicated to education, support and advocacy for persons with mental illnesses, their families and the wider community. Our mission is to improve the quality of life for individuals with mental illnesses and their families.

Selected Highlights of Fiscal Year 2011 (April 1, 2010- March 31, 2011)

Advocacy

NAMI Maryland fought throughout the 2011 legislative session to preserve funding for public mental health services. Despite being chronically underfunded and facing a 40% increase in enrollment, the Public Mental Health System (PMHS) was targeted for millions of additional cuts.

In the second week of the session, the Governor introduced his FY 2012 budget which included a 2.5% community services rate and a \$500,000 core service agency cut. The Mental Health Coalition including NAMI, responded by providing accurate data to the Department of Management and Budget (DMB) and mobilizing the grass roots calls to action. Subsequently, the Governor responded with a supplemental budget that included \$10 million (state general and federal funds) to enhance rates for community mental health providers and \$25 million for MHA as a deficiency appropriation to cover the FY 2010 carryover deficit caused by an explosion in enrollment.

In addition to the Governors initial budget cut, the legislature took action to make more cuts. Initially, The House of Delegates and the State Senate voted to cut mental health services by \$6.7 million and \$4.2 million respectively, in state general and federal funds. The bulk of these cuts were aimed at residential treatment services for youth (\$6 million in the House, \$4 million in the Senate) but also impacted veterans' services, inpatient care and chaplains at state psychiatric hospitals. A concerted advocacy effort was launched by the Mental Health Coalition to reduce proposed budget cuts, increase community services funding and safeguard services for vulnerable Marylanders. Calls and emails flooded the governor's and legislator's offices. This grassroots effort of NAMI and the entire Mental Health Coalition, helped to restore mental health funding cuts through the Governor's supplemental budget. The grassroots calls and emails made all the difference!



Advocacy Day

NAMI had great turnout at Advocacy Day in Annapolis. In February 2011, NAMI Maryland supporters made their mark in Annapolis by meeting with their legislators. NAMI members shared with lawmakers how mental illness impacted their lives, gave out NAMI Maryland resource packets and expressed their opposition to further budget cuts to the Mental Hygiene Administration. NAMI members then attended the Dime a Drink Rally on Lawyer's Mall. The rally was held to support the Lorraine Sheehan Health Care and Community Services bill.

Teleconferences

In January 2011, NAMI Maryland began a new project to host regular informational conference calls. Our first call was: The Arizona Tragedy: What to say? On this call we had guest speaker, Sita Diehl, national

NAMI's Director of State Policy and Advocacy, to discuss what to say to others about the Arizona shooting. She reiterated how important it is to strengthen our mental health system, so that individuals with mental illness can get the right help at the right time.



NAMI Walks 2010

We had a beautiful day on May 1, 2010 for the first year hosting two NAMI Walks in Maryland. A special thank you to all affiliate leaders, board members and volunteers who pulled together to make the 2010 NAMI Walks a success.

The Baltimore walk was a great location and the crowds came out to show their support. Approximately, 1500 people gathered in front of the Maryland Zoo to “Stomp out Stigma” and rally around their support for mental health services. Nollie P. Wood, PhD, M.P.H., Executive Director of the Mayor’s Commission on Disability Issues, brought a

welcome and acknowledgment from the Mayor Stephanie Rawlings-Blake. Cynthia Petion from the Mental Hygiene Administration presented the proclamation from Governor Martin O’Malley declaring the day, “NAMI Walks Day.” At noon, another group of NAMI Walkers gathered at the University of Maryland, College Park in front of the Comcast Center. In the mid-day heat, Jim Chambers, from the Mental Hygiene Administration read the Governor’s proclamation of NAMI Walks Day. Collectively, both 2010 walks raised \$171,661.80.

Changes at NAMI Maryland

In November 2010, Kate Farinholt joined NAMI Maryland as the new Executive Director. Kate has been involved with NAMI for 15 years, first as a volunteer local and state board member and eventually as executive director of the Metropolitan Baltimore affiliate. Kate works closely with national staff and leaders on NAMI program and outreach tool development, and NAMI organizational and leadership development. Some changes she has made include new and restructured operational systems, program and training delivery and tracking, and staffing.

In January 2011, Karin Kramer joined the NAMI Maryland team as the new Communications and Fund Development Coordinator. She brings over 10 years of experience in marketing and development.

Penelope Freire was hired in March 2011 as the Administrative Assistant. She brings to NAMI Maryland background in event management and planning.

Fundraising

NAMI Maryland has accessed funding for an improved IT system, a constituent management system, and new website. All of these projects are in the planning or implementation stages. There have been many meetings with potential funders and partner organizations throughout Maryland. NAMI Maryland is actively looking for new funding opportunities to expand and grow.

National Multicultural Champions

In March 2011, NAMI Maryland was selected from five states across the country to attend the National’s NAMI Multicultural Champions Conference. The goal of the conference was for the selected states to create an action plan that actively engages people of diverse backgrounds and to eliminate disparities in mental health care for these communities. During the conference, the NAMI Maryland delegation created a state

action plan to include multiculturalism throughout Maryland, focusing on the African American community. NAMI Maryland is now in the process of creating a statewide multicultural advisory committee to help guide the implementation of diversity efforts.

National NAMI Standards of Excellence

National NAMI began this process based on the need to be accountable within NAMI and among NAMI Affiliates and State Organizations. Members and leaders asked for more guidance. So the National NAMI board of directors began to identify “Standards of Excellence.” The Standards define the roles and relationships of NAMI, NAMI State Organizations and NAMI Affiliates. In March of 2011, the official launch of the NAMI State Organization chartering process began. National NAMI’s goal is that, by the end of 2012, everyone wanting to use the NAMI name will have signed an affiliation or charter agreement, or at least begun the process for engagement. The NAMI Maryland Board approved the commitment to re-charter by meeting the state organization charter agreement. As it works to meet the Standards for State Organizations, NAMI Maryland will begin the process of helping affiliates across the state with the National agreement for NAMI Affiliates.

State Education Conference



Dr. Lisa Dixon presenting her research.

NAMI Maryland’s 28th Annual Education Conference, “Mental Health: Putting the Pieces Together” was held at the Conference Center at Sheppard Pratt on Thursday, November 4, 2010. People with mental illnesses, their families and friends, health professionals, and others converged at the Conference Center, in Baltimore, seeing old acquaintances, meeting new ones, and listening to presenters on a wide-ranging list of topics, from helping combat veterans to mental-health advocacy.

The all-day conference offered Continuing Education Units and featured presenters such as Dr. Brian Hepburn, Executive Director of the Mental Hygiene Administration of Maryland, Kim Burton, BA, the

Director of Older Adult Programs and the chair of the

Maryland Coalition on Mental Health and Aging and Coalition at the Mental Health Association of Maryland and Dr. Steve Sharfstein, President and Chief Executive Officer of Sheppard Pratt Health System and longtime NAMI Maryland board member.

In addition to the workshops, conference attendees enjoyed two keynote speakers. Dr. Lisa Dixon from the University Of Maryland School Of Medicine presented on her research study of NAMI’s Family-to-Family program as an Evidence Based Practice. This groundbreaking research was done in the state of Maryland with NAMI Maryland affiliates. Dr. Dwight Dickinson from the National Institute of Mental Health presented on cognition and psychosis. Dr. Dickinson discussed cognitive problems in schizophrenia, effective interventions, and strategies for accelerating our progress on this front in the future. Approximately 100 people attended the conference.

Planning for the 29th Annual Education Conference (Friday October 14 through Saturday October 15th at Sheppard Pratt Conference Center in Towson) began during this period. Dr. Joyce Burland, the creator of NAMI’s Family to Family and the Director of NAMI’s Education Department for many years will lead several workshops and be honored. Many practical workshops about mental illness issues were scheduled. There

will also be workshops specifically for current and emerging NAMI advocates, NAMI program and local affiliate leaders

Selected NAMI Program Highlights

In 2010 NAMI Maryland held seven statewide NAMI signature program trainings for NAMI Family-to-Family, Peer-to-Peer, Connection Recovery Support Group, Family Support Group and In Our Own Voice. Over seventy-five graduated from these trainings to facilitate and teach nearly one hundred education programs and over thirty-five support groups to over six hundred class participants across the state of Maryland. The Peer-to-Peer Recovery Program was updated in 2010 to its 3rd edition changing it from a 9-week program to a 10-week program. NAMI Maryland worked with participating affiliates to successfully train all current mentors in the new edition to ensure that every Peer-to-Peer course taught in Maryland is the most current. Ms. Farinholt brings to NAMI Maryland her work on the national NAMI Family Support Group training model and several other programs which she helped develop.

Research has demonstrated that people living with severe psychiatric conditions may have an increased risk of heart disease, diabetes, and related conditions. *Healthy Hearts and Minds* is a workshop that educates consumers, their families, and the community on the connection between mental and physical health. The program intends to provide effective strategies for living a healthy lifestyle and education for those wanting to discover the possibilities of health and wellness for their loved one. Attendees become more aware of the connection between mental health and physical wellbeing and the value of exercise and how to make healthy lifestyle choices.

In 2010, NAMI Maryland trained eight individuals to teach the workshop throughout the state to diverse audiences and events such as: mental health agency staff and consumers, wellness programs, health fairs, drop-in centers, mental health support groups and NAMI Education Meetings. *Healthy Hearts and Minds* presentations have been successfully delivered to individuals living with mental illnesses, their family members and mental health professionals in Howard, Prince George's, Harford, Baltimore, St. Mary's and Worcester Counties. Recently, additional presenters have been trained and a review of possible improvements is in the planning stages.

Smarts for Advocacy

This NAMI program trains individuals with mental illness, as well as family members, the basics about grassroots advocacy and helps them develop their "elevator speech" and their personal story to impact lawmakers. A state-wide "train the trainer" training was offered to affiliates in 2009, and several participating affiliates have offered it to their peer stakeholders since then. An assessment of the basic program and additional possible modules was started during this past year.

NAMI Maryland Board Members that served in FY 2011

Watchen Harris Bruce
Michelle Carras
Marjorie Sue Diehl
Janet Edelman
Chris Griffin
Suzanne Harvey
Renee Y. McDaniel
Remo Molino

Royal Riddick
Sandra F. Rogers
Steven S. Sharfstein, MD
Donald T. Slater
Johanna Snyder
Raymond Clive Watson
Connie Walker

Selected Financial Highlights Fiscal Year Ending March 31, 2011

The financial information presented here is **UNAUDITED**.

- After FY09, the fiscal year was changed from July 1 to June 30 to April 1 to March 31.
- Total income was \$441,949 which exceeded the FY11 budget of \$437,000.
- Grant income of \$306,170 comprised 69% of the total income. In FY11, grant funding was primarily received from the State of Maryland Mental Hygiene Administration paid through Baltimore Mental Health Systems and Washington County Mental Health Authority.
- For the 2010 Walk, NAMI affiliates received 55% of the gross revenues raised by their Walk participants for each Walk. NAMI Maryland received 45% of the gross revenues raised for each Walk, and from the 45%, NAMI Maryland paid for ALL Walk expenses including an online fee of 2% and a NAMI National fee of 10% of the gross revenues. For NAMI Maryland, the 2010 Walk generated income **NET** of expenses of \$58,977.
- Total expenses were \$392,981. Due to vacant staff positions, the expenses were only 90% of the FY11 budget of \$436,600.
- Salaries and benefits of \$142,366 and contractual services of \$90,483 comprised 59% of the total expenses.
- Overall, the fiscal year ended with **UNAUDITED** “net income” of \$48,968 which will be added to the unrestricted net assets of the organization.
- The ending balance of the funds designated for the Affiliate Fund Grants was \$48,324.
- Total assets were \$410,351 which included cash, investments, receivables, prepaid expenses and fixed assets.
- Total liabilities were \$49,909 which included payables and deferred revenue.
- Total unrestricted net assets were \$360,442.
- Starting in the last quarter of FY11, we began implementing many changes to the financial processes. The improvements have been made to enhance internal controls, to improve the process for recording and documenting financial transactions, to provide more detailed financial reporting and to improve the accounting and reporting for the annual Walk. We believe that transparency and accuracy are essential in all aspects of the organization.

**NAMI Maryland
Statement of Financial Position
March 31, 2011
(Unaudited)**

ASSETS

| | |
|--------------------------------|------------------|
| Cash | \$69,655 |
| Grants & Contracts Receivables | 38,065 |
| Other Receivables | 6,750 |
| Prepaid Expenses | 18,724 |
| Deposits | 2,791 |
| Total Current Assets | \$135,985 |

Investment, at fair value 271,127

Fixed Assets, net of depreciation 650
Total Assets \$407,762

LIABILITIES & NET ASSETS

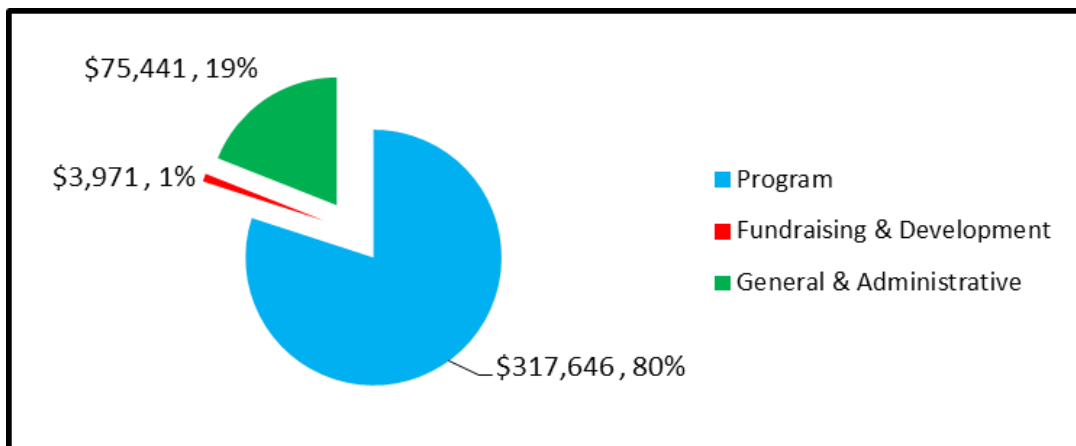
| | |
|-------------------------------------|-----------------|
| Accounts Payable | \$19,741 |
| Other Payables | 2,150 |
| Accrued Salaries & P/R Withholdings | 7,299 |
| Deferred Revenue - Walk | 22,119 |
| Total Current Liabilities | \$51,309 |

Net Assets:

Unrestricted \$311,471
 Net Income/(Loss) 44,982

Total Net Assets \$356,453
Total Liabilities & Net Assets \$407,762

EXPENSE ALLOCATIONS



NAMI Maryland
Statement of Activities
For the twelve months ending March 31, 2011
(Unaudited)

| | YTD | FY 2011 | % Actuals |
|---|------------------|------------------|------------------|
| | Actuals | Budget | to Budget |
| Income | | | |
| Contributions | \$39,108 | \$35,000 | 112% |
| Combined Charities | 15,347 | 15,000 | 102% |
| Membership Dues | 7,980 | 15,000 | 53% |
| Grants & Contracts | 306,170 | 316,000 | 97% |
| Special Events: | | | |
| Walk Income | \$162,634 | \$75,000 | 217% |
| Less: Walk Expenses | (103,729) | (30,000) | 346% |
| Total Net - Special Event | \$58,905 | \$45,000 | 131% |
| Program Events & Devel. | \$7,495 | 10,000 | 75% |
| Fees for Service | 420 | 0 | N/A |
| Investment Income | 942 | 1,000 | 94% |
| Unrealized Gain/Loss | 5,633 | 0 | N/A |
| Miscellaneous Income | 39 | 0 | N/A |
| Total Income | \$442,039 | \$437,000 | 101% |
| Expenses | | | |
| Salaries & Benefits | \$142,898 | 229,400 | 62% |
| Contractual Services | \$90,522 | 35,500 | 255% |
| Training & Meeting Exp | 59,611 | 75,000 | 79% |
| Printing | 19,814 | 25,000 | 79% |
| Program Events & Devel | 744 | 0 | N/A |
| Furniture & Equip Purc | | | |
| /Lease/Rental/Maint | 15,145 | 10,000 | 151% |
| Office Supplies/Postage | 5,025 | 8,000 | 63% |
| Travel | 4,499 | 9,000 | 50% |
| General & Administrative | 3,935 | 3,000 | 131% |
| Occupancy (rent, utilities, maintenance) | 44,073 | 39,500 | 112% |
| Insurance | 1,791 | 2,200 | 81% |
| Grants - Affiliate Fund* | 9,000 | 0 | N/A |
| Total Expenses | \$397,057 | \$436,600 | 91% |
| Net Income/(Loss) | \$44,982 | \$400 | 11246% |
| LESS: Reserve | \$0 | \$400 | 0% |
| Net After Reserve | \$44,982 | \$0 | N/A |