

# Mental Health Resources 2010 Annual Report



*Fostering hope & recovery*

## Mission

*The mission of Mental Health Resources is to foster hope and recovery for those affected by mental illness.*

## Vision

MHR will be an innovator and premier provider of recovery-based, behavioral health services in the metropolitan area. In adapting to the changing environment, MHR and its collaborators will develop innovative approaches to recovery-based services that demonstrate measureable outcomes for improving the lives of those affected by mental illness.

MHR is committed to its staff as the primary resource in delivering high quality service to clients.

## Statement of Philosophy

MHR believes that persons with mental illness can learn to lead full lives in the community. We challenge ourselves and the larger community to address barriers that inhibit their independence, growth and recovery



## Values

### Integrity

in our work with clients, their families, our colleagues and wherever we represent MHR in the community.

### The dignity

of our clients and each other in our work for MHR

### Professional competence

that guides our actions and interactions with clients and others in the community

### Multicultural awareness

and competence that guides our actions and interactions with clients and others in the community

### Compassion

for our clients, our colleagues and ourselves, and we encourage this practice in the broader community

### Innovation

in developing programs and services aligned with our Mission

# Mental Health Resources 2010 Annual Report



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# Dear Friends of Mental Health Resources,



Nationally, 2010 will be remembered as a year with a struggling economy, high unemployment and significant budget cuts for services needed by our most vulnerable populations. Despite these challenges, 2010 was a year full of successes and accomplishments for MHR. We were able to increase the number of people we serve with chronic mental illness by 20%. MHR implemented new service programs and expanded our services to other geographic areas in the state. We increased our Board Membership by 6 members who bring diverse areas of expertise of leadership accompanied by deep personal commitments to the clients MHR serves. In addition, we strengthened and broadened our financial model to ensure these essential services continue to be delivered to persons with serious mental illness. These accomplishments are primarily due to our hardworking staff and their dedication to our clients.

MHR is committed to a holistic approach to our client's recovery process which focuses on mental health treatment, substance abuse treatment, medical care, supportive housing and a sense of community. Our client care staff excel in their ability to engage with our clients and build a trusting relationship with them. This trust allows MHR staff to help clients integrate all areas of their lives into the recovery process.

MHR firmly believes an essential part of our client's recovery includes maintaining good physical health. Research demonstrates persons with serious mental illness in Minnesota die 24 years earlier than the general population. During the past year, our approach to treating the whole person led us to focus on several initiatives including:

- **Medication Therapy Management:** A pilot project was conducted with 20 MHR clients and a Doctor of Pharmacy. Results showed the clients were not receiving the correct therapeutic medications and doses to treat their chronic medical conditions. Written reports with specific recommendations were sent to the clients' primary care doctors to ensure our clients could receive maximum benefit from their prescribed medications.
- **Minnesota 10 x 10 Initiative:** MHR is committed to helping individuals with serious mental illness extend their life expectancy by 10 years over the next 10 years. MHR nurses and case managers focus on these areas of improvement with our clients: maintain a healthy weight through regular exercise and improved nutrition, avoid smoking, maintain a healthy heart, minimize high risk drinking and substance abuse, avoid or manage diabetes, annual visit with primary care physician
- **Preferred Integrated Networks in Dakota County:** MHR works directly with Medica Health Plan and Dakota County to provide an integrated approach to care and services for persons with mental illness. This partnership has encouraged a sense of creativity for improving overall health – such as providing a health club membership as part of the preventive care plan for our clients who could not afford one otherwise.

Thank you from the MHR staff and Board of Directors. Your continued support helps us meet the needs of our clients and the challenges they face in their recovery. We look forward to better fulfilling our mission “to foster hope and recovery for those affected by mental illness” in 2011.

Sincerely,

Michael Trangle, MD  
Board President

Kathy Gregersen  
Executive Director

# Rochelle

2 3 Rochelle is a woman in her mid 40s diagnosed with Bipolar Disorder, Hypothyroidism and Hyperlipidemia. She had prescriptions to help her with all of these conditions but she did not like taking medication and had not been on them for several months. She began exhibiting extreme paranoia and behavior that frightened the people around her and led to her being hospitalized.

Rochelle's case was re-opened with the Ramsey Targeted Case Management team after she agreed to a voluntary treatment plan with specific conditions called a Stayed Order of Commitment. She would need to satisfy all of the required conditions to avoid full commitment. After she was released from the hospital, Rochelle went to live at an Intensive Residential Treatment (IRTS) facility where she could stabilize before returning to a more independent living situation. During her time at the IRTS, Rochelle understood that "not taking medications made me sick last time."

Amanda, Rochelle's case manager, helped her find independent subsidized housing, understand her benefits and locate resources to go back to school. Rochelle's boyfriend moved nearby and reminded her regularly to take her medications so that she could continue to be successful with her treatment plan and life goals. Because of Rochelle's success at living independently in the community, her commitment was dropped. Amanda talked to Rochelle about graduating from case management services and she agreed that she had made significant progress and was ready to graduate.

Today, Rochelle is attending cosmetology school and provides support to her aging parents. She is successfully managing her illness with the support of her boyfriend and is enjoying life and the bright future waiting for her.



## CLIENT COMMENTS:

“ My case manager has pushed me in a good way and encouraged me. Every time she leaves, I feel better about myself and the situation. I have panic and anxiety a lot and she helps me with planning and setting small goals. She's just awesome. ”

“ Mental illness is not the end. You can recover. ”

# MHR Programs and Services

## Targeted Case Management Teams (TCM)

- Four Ramsey TCM Teams, one Hennepin TCM Team and one Dakota TCM Team
- Help clients gain access to medical, housing, social, educational, financial and vocational services necessary to meet their mental health needs

## Assertive Community Treatment (ACT) Teams

- Three ACT Teams-one each for Ramsey, Hennepin and Dakota counties
- Each team functions as the primary treatment provider for the client's mental health needs
- Teams assist MHR clients with psychiatric evaluations, medication education and monitoring, education about symptom management and recovery, family psycho-education, vocational planning, connections with other healthcare providers and rapid response to client crises

## Adult Rehabilitative Mental Health Services (ARMHS) Program

- Offers clients education and coaching in strengthening basic social and living skills essential to fostering mental health recovery and managing the demands of independent, community-based living

## Independent Living Skills (ILS)

- Teaches, trains and assists individuals in enhancing their living skills to manage the demands of independent community based living

## Mental Health Outreach Clinic

- Psychotherapists provide in-home and office based therapy to individuals and families

## Metro Intensive Treatment Team (MITT)

- The MITT is a mobile, community based, collaborative model of treatment designed to deliver variable levels of service intensity to clients within their communities and their homes
- Services are individualized and comprehensive with short-term strategic interventions intended to stabilize health plan patients and reduce unneeded psychiatric hospitalizations due to experiencing multiple stressors, barriers, and acute psychiatric symptoms
- These services are intensive, short term services (3-6 months)

## Special Needs Basic Care (SNBC)

- MHR staff delivers care coordination for a voluntary managed care program to UCARE and Metropolitan Health Plan (MHP) members between 18 and 64 years old who have a mental health, physical health or developmental disability
- Services offered to clients in Carlton, Hennepin, Isanti, St. Louis and Wright counties

## Seward Community Support Program

- The Seward CSP Team assists clients who suffer from mental illness and who live independently in Hennepin County by assessing their needs and providing or coordinating services to support the client's ability to remain in the community
- The Seward Drop-In Center
  - Provides a wide array of weekly psychosocial groups including Illness Management and Recovery, GLBT Group, Mental Health Peer Support Groups, Women's Group, Men's Group, Spirituality Group, and Journal Group
  - Transports members on monthly daytrips to various activities and events
  - Supplies members daily with healthy snacks and monthly with a "Dinner of the Month"

## Supportive Housing Programs

- MHR's program helps people diagnosed with mental illness and/or substance abuse disorders find places to live and be successful tenants
  - RAMSEY COUNTY
    - Ramsey Hill Apartments
  - DAKOTA COUNTY
    - Dakota County Supportive Housing
    - Haralson Apartments
    - Project Restore
  - HENNEPIN COUNTY
    - Stevens Supportive Housing Program
    - Trinity on Lake Apartments
  - MULTIPLE COUNTIES
    - Project Homeward

## Housing Voucher Program

- Administers over 750 rental subsidies in the 7-county metro area
- Their goal is to ensure positive housing outcomes by communicating effectively with clients, service providers and property managers to achieve the best possible results



# Medication Therapy Management- Prescription for a Healthy Future

Melinda was skeptical as when she walked into her first Medication Therapy Management (MTM) appointment with Julie Fike, a Clinical Pharmacist with Genoa Pharmacy. Her doctors already knew what medications she was taking for all of her conditions. How could talking about her medications with a pharmacist make a difference?

When Julie met with Melinda, the first thing she noticed was that she came to the appointment with an oxygen tank. Melinda advised that she was recently discharged from the hospital after a bout with pneumonia. Julie also noticed that Melinda was extremely drowsy and Melinda had to stand during the meeting to keep herself from falling asleep. Julie's initial impression was that her medications were making her drowsy and this more than likely contributed to her pneumonia, which could have resulted from aspiration caused by her extreme drowsiness.

During the hour long session, Julie continued to gather information from Melinda regarding her medical and mental health conditions, medications, dosages, adverse drug reactions and side effects. This would help her determine what changes might be in order to make Melinda's medications work better for her.

Julie had her work cut out for her as Melinda's case was complex. She was taking 18 different medications related to 10 different conditions. Melinda suffered from allergic rhinitis, anxiety, bipolar/depression, bursitis, fibromyalgia, gastroesophageal reflux disease, localized edema, migraines, personality disorder and pneumonia. When Julie started looking at the medications and doses prescribed for

these conditions, several drug therapy problems were evident. The dose for Melinda's methadone prescription was too high-this was one of the causes of her extreme drowsiness. More importantly, Melinda advised she was receiving the prescription for her fibromyalgia and Julie noted that methadone is not an effective drug for the treatment of this condition. Julie recommended a reduction of the methadone dose, chronic disease education about fibromyalgia and the new medications available for the condition, and working with the client to set realistic expectations about pain relief. Julie also felt a referral to a pain specialist would help Melinda with her condition.

Melinda was prescribed several medications to treat her bipolar disorder. One of the medications was supposed to help stabilize her mood and keep her from experiencing the manic highs and extreme depression of the disease. Although it helped somewhat, it didn't seem to be working as well as it had in the past. Through Julie's analysis, she was able to determine that the prescribed dose was too low to produce the desired outcomes. Melinda wasn't taking another medication for this condition with food. Julie explained the absorption of the medication was reduced by 50% when not taken





with food and she helped Melinda understand the importance of follow the instructions for all of the different medications she was taking.

When Melinda left the MTM session she felt relieved. Julie was going to send her recommendations to Melinda's doctors and hopefully these changes could make her feel better. She was tired of feeling exhausted and sleepy all the time and was hopeful that some dose adjustments might help manage the effects of her bipolar disorder. She appreciated Julie spending the time really listening to her and trying to understand her medications and conditions.

Julie's work didn't stop with Melinda. As part of an MTM pilot between MHR and Genoa Pharmacy, Julie conducted sessions with 20 MHR client volunteers. The labor intensive process yielded the following results:

- On average the pilot participants were being treated for 8.5 medical conditions
- On average they were prescribed 14 medications per patient
- 86 drug therapy problems were identified and resolved
- More medication adjustments were made to prescriptions for medical conditions than for psychiatric medications
- Common conditions included hypertension, diabetes, asthma, depression, schizophrenia and anxiety

Kathy Gregersen, Executive Director of MHR, believes this pilot program had extensive benefits for our clients:

“This pilot demonstrated MHR's clients have very complex medical problems in addition to their mental illness. It also identified how it is an essential part of MHR's mission to advocate for our clients to receive good medical care. We need to advocate for our clients to: receive on-going care coordination since they average 8.5 medical conditions; obtain persistent medical monitoring of their cardiac and diabetic concerns; receive periodic re-evaluation of the effectiveness and the interaction of all their medications. Improved overall health is an essential part of the recovery process”.

# 2010 Highlights

- ▶ Provided services to 2488 clients in 7 counties, a 20% increase from 2009
- ▶ Increased our revenue over last year by 9.5%
- ▶ Received a \$15,000.00 grant from the St. Paul Foundation's Management Improvement Fund for strategic planning in 2011.
- ▶ Received a holiday contribution from Bremer Bank in the amount of \$10,000.00
- ▶ Added 6 new board members including 1 consumer representative
- ▶ Added a Manager of Continuous Quality Improvement position responsible for monitoring and expanding MHR's Quality Assurance Program
- ▶ Began a collaboration with the Network for Better Futures to help reduce the economic and social costs of high-risk adults with histories of incarceration, substance abuse, mental illness, chronic unemployment and homelessness
- ▶ Partnered with UCARE and MHP to become a preferred provider for their Special Needs Basic Care (SNBC) programs and expanded our service area to include Carlton, Isanti, St. Louis and Wright Counties
- ▶ The Housing Voucher Program began administering a new-long term homeless rental assistance program in conjunction with Minnesota Housing, South Metro Human Services and Anoka County
- ▶ Results of the annual Employee Satisfaction Survey indicate that 87% of MHR employees feel that they are performing meaningful work.
- ▶ Conducted a consumer satisfaction survey for our ACT/ARMHS clients
  - 90.1% of all respondents indicated satisfaction with the services they receive from MHR
  - 90.4 % of respondents indicated their meetings with MHR staff were focused on making progress toward their recovery goals
  - 85.5% of respondents indicated they would recommend MHR to their friends and family
  - Results were compiled into an action plan and MHR staff reviewed the plan with clients to let them know "we heard you and this is what we are going to do about it".

# Open Baskets-A Gift of Kindness

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2010 marked the 5th year of MHR's partnership with Open Baskets and its founder, Colleen Hansen. Her family and volunteers worked diligently to gather donations and put together 1000 holiday gift baskets for MHR clients and their children. Often our clients believe they "do not matter" and these baskets are a wonderful way to brighten their lives during the holiday season.

MHR staff members deliver the baskets to clients and find it to be a very rewarding experience. One of our case managers said, "The clients loved the baskets! How wonderful that Open Baskets provides us with the privilege to give these to our clients. Just seeing the smiles on their face and they know someone cares about them is so rewarding!"

This program has truly touched the lives of many MHR clients and here are some of their comments.

“Wow! Thank you so much!  
This is the only gift I will get this year. How wonderful!”

“My son will love all these little toys and treats. Thank you!”

“After you left I opened the basket, there were over 20 items.  
I can't wait to use the basket as a planter in the spring.  
It was so generous and thoughtful.”

“It is so nice that someone would do this for me.”

Colleen has set a goal of 1400 baskets for the 2011 holiday season.

If you would like to learn more about Open Baskets, please visit their website at [www.openbaskets.org](http://www.openbaskets.org).

# Spotlight on the Seward Community Support Program (CSP) and Drop-In Center



Bill Calmbacher, Senior Director of Operations, has been with MHR for 14 years. During his time with the organization he has been a part of all programs and services offered by MHR. He began his tenure at the Seward CSP/Drop-In Center and he has always valued and respected the resilience and interrelationships of the people who make up the Seward Drop-In Center community. In the interview below, Bill shines a light on what the Seward CSP and Drop-In Center have to offer.

## What is the Seward CSP/Drop-In Center?

The Seward CSP consists of a team of mental health practitioners that work with adults diagnosed with serious and persistent mental illness (SPMI) residing independently in the community. The team assesses needs and provides or coordinates services to meet those needs to increase symptom stability and to support the member's ability to remain in the community. They also provide psychosocial rehabilitation at the Drop-In Center which is the process of improving community functioning and the well-being of an individual diagnosed with SPMI.

*Bill Calmbacher*

## How many individuals are served by the CSP?

2010 was a busy year for all MHR programs and the Seward CSP and Drop-In Center were no exception. The CSP served 357 individuals suffering from SPMI residing independently in the community. The services offered by the program can be provided in our Seward Drop-In Center or in the member's home. In addition, 40-45 members visit the Seward Drop-In Center on a daily basis for a variety of activities and to interact and bond with other individuals.

## What type of support groups take place at the Drop-In Center?

The Seward Drop-In Center offers a wide variety of support groups that members find extremely beneficial. The goals of these groups are to foster social support, prevent isolation and promote recovery. These groups also support the members by allowing them to share common experiences and gain strength from each other. The various groups include Illness Management and Recovery, GLBT Group, Mental Health Peer Support Groups, Women's Group, Men's Group, Spirituality Group, Journal Group and Book Group. Most groups are facilitated by MHR staff and clients with the exception of the Journaling and Book groups which are led only by the clients.

## What else does the Seward Drop-In Center do for the Members?

Well I think people generally have three basic needs in life; a purpose, people to care about and who care about them and a safe, decent place to live. The CSP is able to meet two of these needs on-site and provides assistance in obtaining the third. Many members have reported feeling a sense purpose by taking on important roles within the Drop-In Center. Some of these roles include volunteering to work the front desk to check in members and visitors, giving tours of the building to visitors and assisting with the inventory of food shelf items and tracking deliveries. The Drop-In Center is also a place to meet new people and build the caring relationships that we all need in our lives. Finally, staff provide all the services necessary to find, secure and support members in safe, decent and affordable housing.

## What does a day look like on at the Seward Drop-In Center?

On any given day you will find individuals relaxing and listening to music in the “music corner,” playing board and card games at the tables, using their creative energy in the Arts and Crafts room or checking their email, surfing the web in the Computer Room or playing pool in the back. They also attend various groups that take place each day or work with staff on a one to one basis to address personal issues.

Not all activities take place at the Drop-In Center. MHR funds several activities like trips to museums, parks, the State Fair, baseball games and even camping trips. Members of the Drop-In Center sign up for scheduled activities and MHR staff provide transportation to the events. These events give individuals the opportunity to enjoy public outings and build their confidence when interacting with others in the community.

## You mentioned that members can fulfill their need for a purpose by volunteering at the Drop-In Center. Can you tell us more about the volunteer opportunities for members?

Members are encouraged to volunteer for various duties such as answering the phones, covering the front desk, giving tours and helping to put away food shelf deliveries. They sign up for shifts and their volunteer hours are recorded. Once members have accrued a certain number of volunteer hours MHR provides them with a gift card to grocery and retail stores. The members really enjoy giving back to the Drop-In Center community by volunteering and they really appreciate the opportunity to earn gift cards. Randy frequently volunteers to cover the front desk and Eson, a member for over 20 years, often volunteers for tour guide duty and shows visitors all the Drop-In Center has to offer.



*Eson, long term member and volunteer of the Drop-in Center*

## Tell us about the MHR staff that work in the Seward CSP/Drop-In Center.

The MHR staff are the cornerstones of the CSP/Drop-In Center. Their hard work and dedication to this program and their commitment to client engagement keep the members involved with services and coming back to the Drop-In Center. They begin their day meeting clients in their homes, taking them to food shelves, assisting with attaining and maintaining health benefits, finding and maintaining housing and employment, conducting outreach and wellness checks, picking up food shelf deliveries and shopping to prepare for activities for the week. Once the Drop-In Center's doors open, our staff meet with clients on site to address their mental and physical health needs and to help identify and access community resources for things like job counseling and housing support. The Seward CSP building also houses the Hennepin Assertive Community Treatment team, the Seward Targeted Case Management team and the Seward Drop-In Center staff.

## The Drop-In Center had some major renovations in 2010. What work was done?

Beginning in December, the upstairs of Drop-In Center was renovated allowing us to move more staff upstairs and providing more space on the lower level for Drop-In members to use. Three team rooms for staff were built to house current staff and to accommodate future growth. Offices on the upper and lower levels were also updated. The renovations created a really functional and beautiful space for staff and Drop-In Center members.

In addition, we totally remodeled our kitchen on the lower level. MHR made several changes to improve its look and functionality since the kitchen is used every day by members. The updates help accommodate the preparation of the daily beverages and snacks offered to members as well as the monthly dinner that is attended by 60-70 Drop-In Center members.



*Newly remodeled CSP Kitchen*



*TCM Team Room Before*



*TCM Team Room After*



The Seward CSP and Drop-In Center offer a wide array of activities and services to help individuals suffering from mental illness and gives them motivation to leave their homes. Mental illness is an isolating disease but by providing individuals with a safe environment to socialize, learn new skills and interact with our skilled MHR staff, we give our clients another tool to help them advance in their quest to live full lives in the community.

The Seward Drop-In Center is located at  
2105 Minnehaha Avenue, Minneapolis, MN 55404.  
Hours are Mondays, Fridays and Saturdays 12 p.m. to 5 p.m.  
and Tuesdays and Thursdays 12 p.m. to 7 p.m.

Mental Health Consumers residing in Hennepin County looking to learn from others  
and enrich their live can contact the Seward CSP at 612-333-0331.



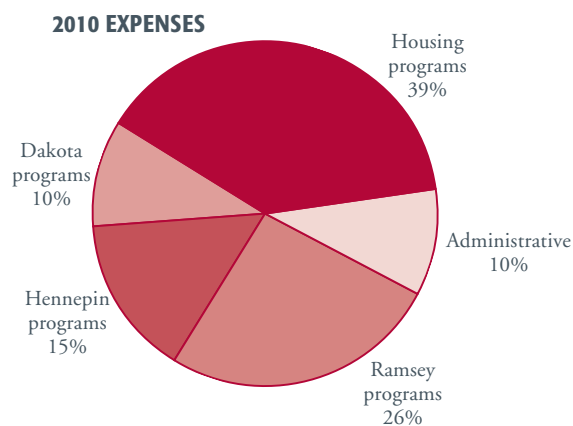
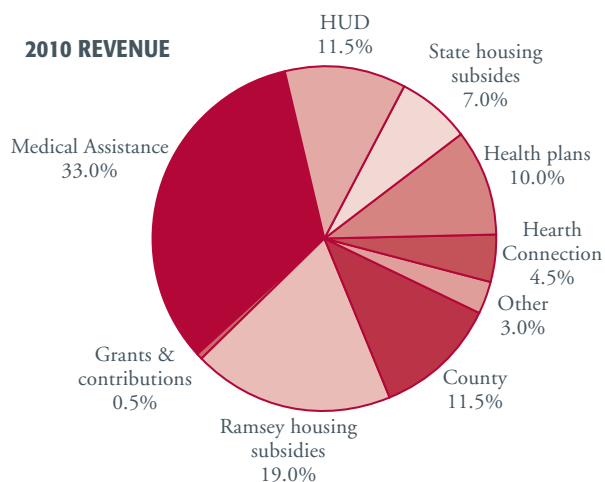
# Financials

## STATEMENTS OF FINANCIAL POSITION

	2010	2009
<b>ASSETS</b>		
Cash and cash equivalents	\$2,824,102	\$1,989,491
Accounts receivable and prepaid expenses	1,876,936	1,702,476
Total property, vehicles and equipment, net	505,628	432,446
<b>Total assets</b>	<b>5,206,666</b>	<b>4,124,413</b>
<b>LIABILITIES</b>		
Accounts payable	32,100	72,630
Accrued expenses	517,743	343,651
Contract advances	275,000	316,364
Deferred revenue	1,397,557	927,134
<b>Total liabilities</b>	<b>2,222,400</b>	<b>1,659,779</b>
<b>NET ASSETS</b>		
Unrestricted	2,909,047	2,379,823
Temporarily restricted	75,219	84,811
<b>Total net assets</b>	<b>2,984,266</b>	<b>2,464,634</b>
<b>Total liabilities and net assets</b>	<b>5,206,666</b>	<b>4,124,413</b>

## STATEMENTS OF ACTIVITIES

	2010	2009
<b>REVENUES AND SUPPORT</b>		
Government contracts and service contracts	\$6,089,321	\$4,832,045
Medical assistance	5,122,955	5,790,596
Grants and contributions	74,766	57,596
Lease income	4,165,366	3,422,958
Client fees, investment income and miscellaneous	92,338	96,563
<b>Total revenues and support</b>	<b>15,544,746</b>	<b>14,199,758</b>
<b>EXPENSES</b>		
Program services	13,540,317	12,600,909
Administration	1,418,553	1,121,723
Fundraising	66,244	8,495
<b>Total expenses</b>	<b>15,025,114</b>	<b>13,731,127</b>
Change in net assets	519,632	468,631
Net assets, beginning of year	2,464,634	1,996,003
<b>Net assets, end of year</b>	<b>2,984,266</b>	<b>2,464,634</b>



# The Board of Directors

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## Officers *(pictured left to right)*



**President:** Michael Trangle, MD | *Health Partners Medical Group and Regions Hospital*

**Vice President:** James Wyman | *Consultant*

**Secretary:** Bev Lamb | *Retired Psychiatric Nurse*

**Treasurer:** Jeffrey Hugget | *Dominium Management*

## Board Members *(pictured left to right)*



Stephanie Battle | *YMCA of St. Paul*

Sara Boeshans | *Attorney, Minnesota Attorney General's Office*

William Brown | *Elder Law Attorney, WL Brown Law Offices*

Bret Byfield | *Access Unit*

Dave Chapman | *The Chapman Group*

Jon Christianson | *Division of Health Services and Policy, University of Minnesota Public Health*

Wendy Dickerson | *Owner, Shine Computer Consulting*

Marybeth Dorn | *Judge, Second Judicial District Ramsey County*

Chris Holm | *DKC Properties*

John Kvamme | *Associated Bank*

Elaine Love | *Farmers Insurance Group*

## Senior Staff

Kathy Gregersen | *Executive Director*

Robert Berg | *Sr. Director of Finance*

Bill Calmbacher | *Sr. Director of Operations*

Ann Henderson | *Sr. Director of Dakota County Services and ACT*

Tanya Anderson | *CQI Manager and Corporate Compliance Officer*

Barbara Tisdle | *Director of Targeted Case Management*



*Above (left to right)*

*Robert Berg, Ann Henderson, Tanya Anderson,  
Barbara Tisdle, Kathy Gregersen, Bill Calmbacher*

# 2010 MHR HONOR ROLL

Each time you support Mental Health Resources, you touch the life of someone living with mental illness. Our clients, staff members and board members are grateful for your involvement. While we are able to bill for most of the services we offer, the additional funds we receive from our donors help clients with financial emergencies, find meaningful work and furnish their apartments. Your gifts also help develop more supportive housing, provide activities at the Seward Community Support Program and develop new programs.

## WE WANT TO SINCERELY THANK THE FOLLOWING PEOPLE AND CORPORATIONS WHO HAVE HELPED MHR...

*“Make a Difference in the lives of People with Mental Illness”*

### INDIVIDUAL:

Susan Abderholden & Lee Keller  
Glen & Jennifer Andis  
Jeffrey & Rebecca Arendt  
Richard Bartel  
Jane Birks  
Charlie & Denise Bisanz  
David Chapman & Catherine Donovan  
Jon Christianson  
Dianne M. Currie  
Marybeth Dorn & Robert Behrens  
Barb Fenton  
Theresa Gilland  
Kathy & Jerry Gregersen  
Bruce & Kathleen Hermansen  
Chris Holm  
Brenda Hovander & Christine Ruzin  
Jeffrey Huggett  
Beverly Lamb  
Charles & Kristi Lamb  
L.G. Lindsay  
Beverly Luther  
Kathleen M. Muench  
Mary & Kenneth Newton  
Steve Pincus & Michelle Strangis  
Ryan & Amy Shoemaker  
Elizabeth Streich  
Dr. Michael Trangle  
Rolf Westgard  
Suzanne Weinstein  
James & Kathlyn Wyman  
Dr. Ronald Young

### OPEN BASKETS PROJECTS:

Michael & Jennifer Anderson  
Anonymous donors  
Mylee Bishop  
Sharon Blais  
John Brentnall  
Best Buy  
Valerie Charger  
John Check  
Dawn Clarin  
Brent Conlow  
Dakota Electric Association – Susan May  
Laura Dent  
Dollar Tree - Apple Valley  
Erin Ayn Duncan  
Brent Erler  
Jocelyn Gaffney  
Tammy Gold  
Patricia Grigorian  
Mary Gordon  
Laura Guggenberger  
Adele Grundmeyer  
Colleen & Phillip Hansen  
Dave & Marilyn Hansen  
Marilyn & Nancy Hansen  
Hills and Valleys Service Unit – Frog & Princess  
Inella Jack  
Jane Jageron  
Andrew Mark Jensen  
Sarah Jansen  
Kowalski's Market - Eagan  
Kowalski's Markets - Woodbury  
Sue Kpowulu  
Nancy Kraulik  
Cynthia Lillemo  
Daivd & Karna Lyell

Minnesota Twins Baseball Club  
Jim & Shyrlene Moore  
Andrea Munson  
North Woods Deck Company LLC  
Janice Olson  
Patricia Ongstad  
Rick Raasch  
Michelle Savik  
Sam's Club - Apple Valley  
Sam's Club - Eagan  
South Cross Community Church  
Subway - Burnsville  
Sue Stillman  
Barbara Stiyer  
Target - Apple Valley  
University of St. Thomas MSW Student Association  
Mary Urbanek  
Michelle Way  
Kim Woods  
Margaret Van Wyngarden  
Peg Van Wyngarden  
Walgreens in Burnsville  
Wal-Mart - Eagan  
Wal-Mart – West St. Paul  
Wells Fargo Bank

### CORPORATE:

Bremer Bank – Chad Faul  
Blue Cross & Blue Shield of Minnesota  
Genoa Healthcare  
Greater St. Paul Area North Star Chorus – Dennis Jacobson  
Lutheran Social Service of Minnesota

NAMI – Hennepin County Affiliate  
Minnesota State Fair  
Indoff – Dennis Peterson

Foundation:  
Wyman Family Charitable Foundation

### IN MEMORY:

Contribution made in memory of Ijain Meltzer  
William A. Calmbacher in memory of Mary T. Calmbacher  
Elise Hanson in memory of Michelle Tuman  
Rebecca Hirdman in memory of Paul Otis Lee  
Joseph & Dorothy Trepanier in memory of Tom Trepanier  
Contribution made to the MHR Dental Initiative Fund in memory of Virginia Hollins by Jerry and Kathy Hollins Gregersen

### IN HONOR:

Jill Marks in honor of Dr. Michael Trangle



Our MHR East Office (Administrative Office, and Ramsey Programs)  
has moved to a new location a few blocks away.  
Our new address, effective August 29, 2011 is:

**[ 762 TRANSFER ROAD  
SUITE 21  
ST. PAUL, MN 55114 ]**

Our phone number will remain the same (651-659-2900).



## Mental Health Resources, Inc.

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