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**MARY A. RACKHAM
INSTITUTE**

**ANNUAL REPORT
2020**

MARI's mission is to strengthen community wellness through individualized, innovative, and results-oriented mental health and language clinical services – educating about mental health, treating clients of all ages and backgrounds, and training the next generation of practitioners.



FROM THE MARI DIRECTOR

Normally we can summarize the recent past with some level of clarity. We can take a look at the ups and downs and apply a few key phrases to give a shape to the data from that year.

Yet, for the past year, you could fill in the blank with any number of words to describe it and still not come close to capturing it. We have ridden out highs and lows, acknowledged our strengths and weaknesses, and leaned on each other while not even being able to be in the same room as each other.

Of course, COVID is the headliner for any year-in-review report at this point. But I don't want it to overshadow the work of the MARI staff and the value we provide to the community. For example, we quickly switched entirely to teletherapy, allowing us to provide continuous care to our clients. And we saw a 12.5% increase in the number of clients served when compared to the previous year.

This second annual MARI report is different than we initially envisioned, but is also a testament to the resilience of our people, including our staff, our stakeholders, our supporters, and, of course, our clients.

- Bruno Giordani, MARI Senior Director

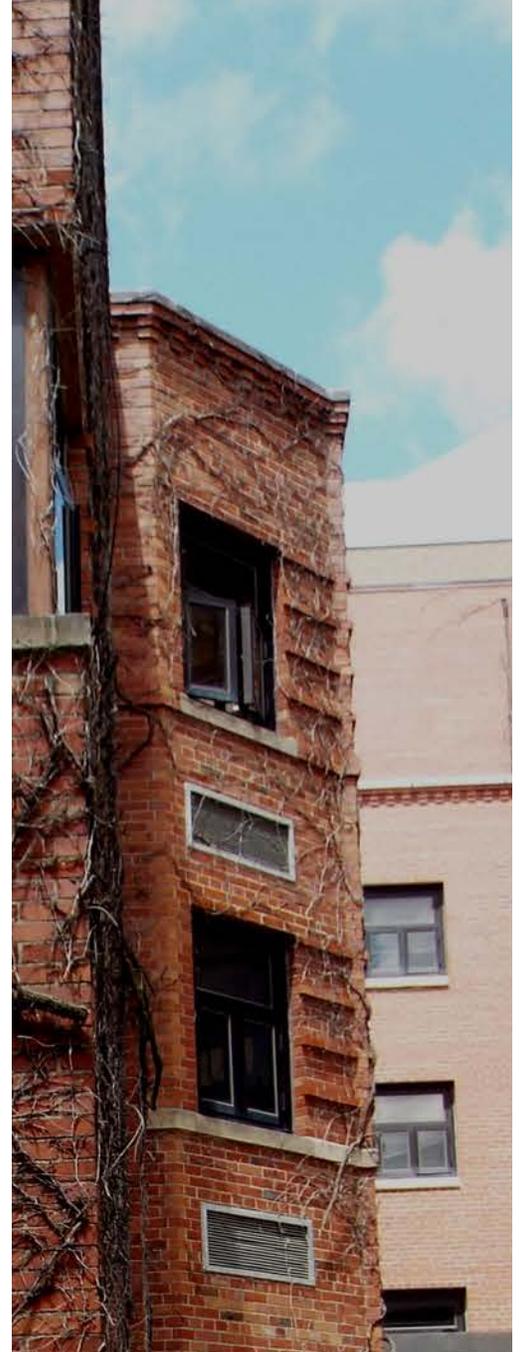


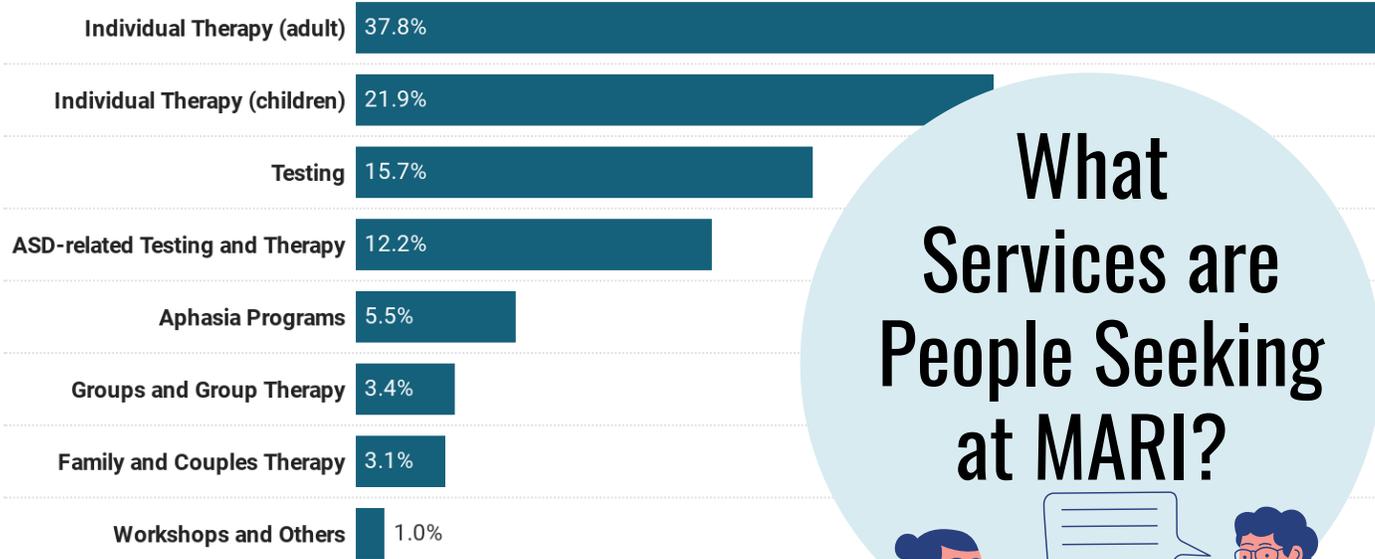
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MARI Services In Demand

When people contacted MARI during the 2020 Fiscal Year, these were the services they were seeking. Points of contact were also made on behalf of someone else, by a family member, doctor, mental health professional or friend.

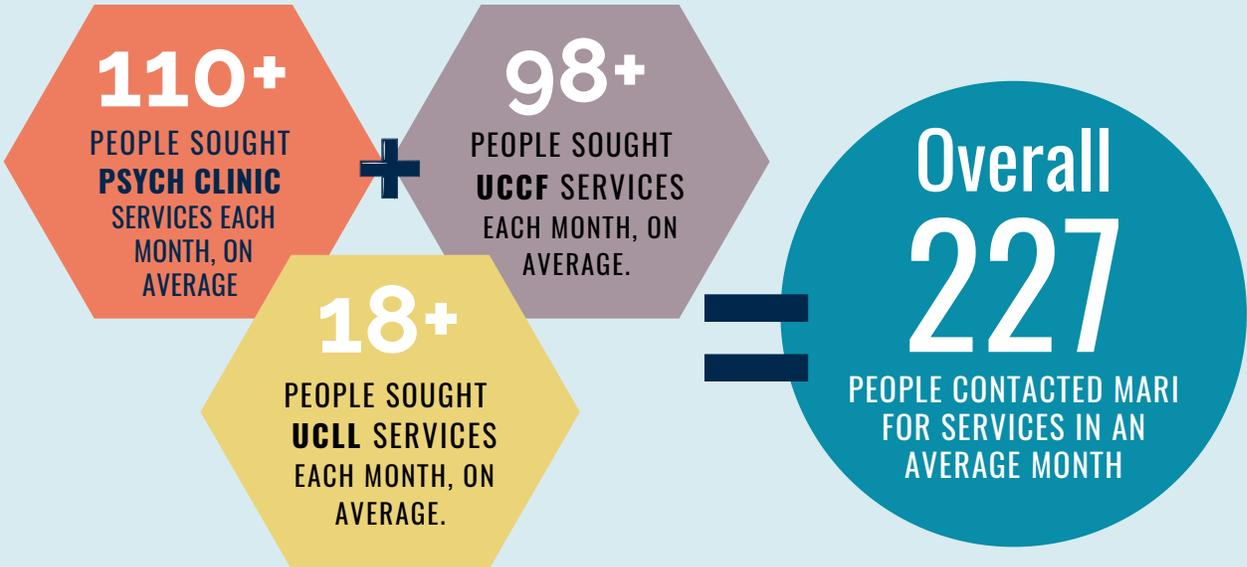


What Services are People Seeking at MARI?



Overall, MARI Received
2760+
 REQUESTS FOR SERVICES DURING FY2020

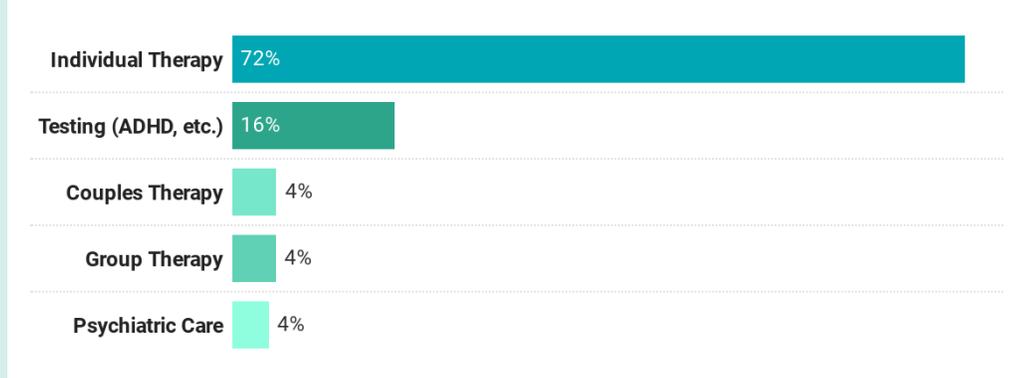
Average Requests per Month at Each MARI Center/Clinic



MARI Services In Demand

Segmented by MARI Clinic and Centers

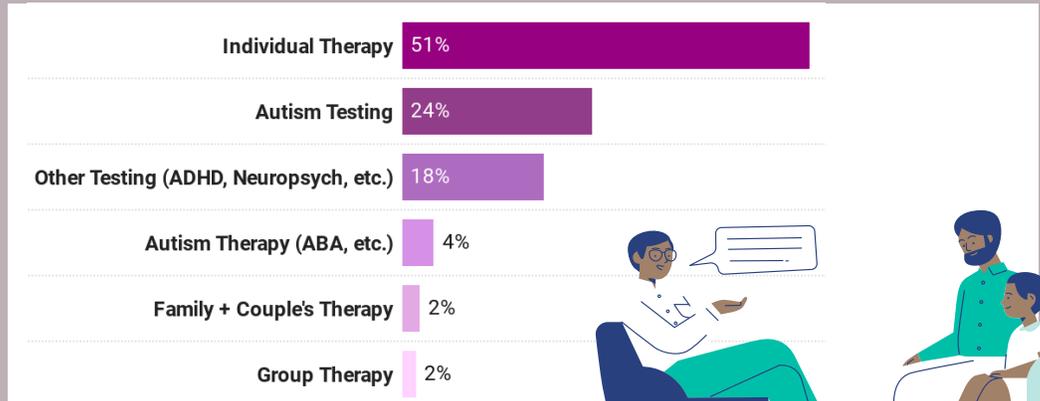
Psych Clinic Services Requested



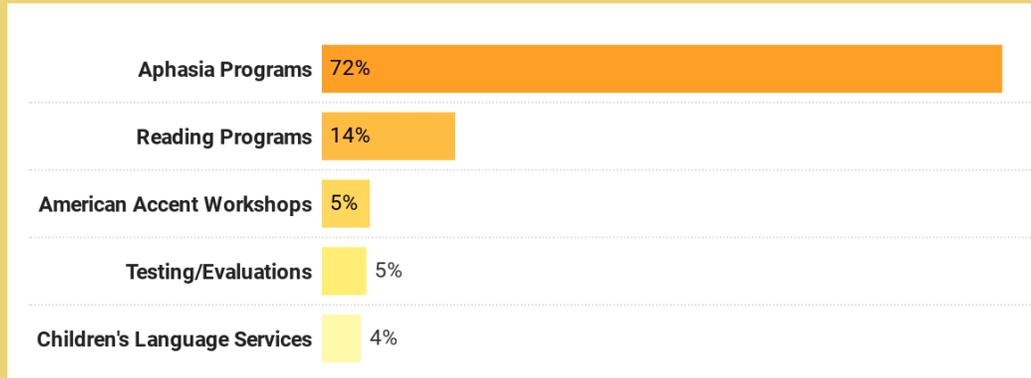
The University Psychological Clinic is a place students, faculty, staff and community members can privately access customized mental health and wellness resources, from mindfulness groups to ADHD testing to individual therapy to address an array of challenges.

UCCF Services Requested

The University Center for the Child and Family (UCCF) offers services for those under 18 and their families, including individual and group therapies, testing, UM-ACTs program and more.



UCLL Services Requested



UCLL specializes in speech language therapy for adults and children. That includes the U-M Aphasia Program (UMAP), language development programs for children, reading interventions, neuropsych assessments, and workshops for non-native English speakers.

Spotlight: MARI's Expanded Testing Services

During the past fiscal year, MARI expanded neuropsychological testing services — hiring two new testing specialists. **Testing (excluding ASD testing) was the third-most requested service at MARI during FY2020.**

Neuropsychological tests are standardized measures used to assess a person's cognitive functioning and abilities. They are also sometimes called assessments, screenings, or evaluations. Neuropsych tests are used to explore the link between the brain and behavior.

These tests can help professionals understand a person's brain function related to medical, neurological, psychological, or genetic factors. They can help determine if a person has experienced changes in their thinking abilities, including changes in things like memory, language, perception, reasoning, impulse control, and personality.

The testing services were paused in March because they could not be translated into a telehealth format. Resuming in-person testing was prioritized as soon as it was deemed safe to return to campus. MARI began offering in-person appointments again in June with COVID prevention measures in place.

When is Testing Recommended?

Common referral scenarios include:

- A child having difficulty in school is assessed for a learning or behavioral disorder, language development issues, or autism spectrum disorder (ASD).
- A teen who has difficulty reading gets a learning disability evaluation.
- An athlete receives an assessment following a concussion.
- An adult struggling at work and home gets evaluated for ADHD.
- An older adult receives a cognitive assessment to gauge if changes in their memory are from normal aging or something else.

What Happens During Testing?

Testing can consist of a brief screening or a more comprehensive, full evaluation. Neuropsychologists, clinical psychologists, and psychometrists have specialized training that enables them to determine which tests and modules to use to gain a comprehensive understanding of an individual's cognition.

The approach depends on concerns, the type of cognitive issues under investigation, and your individual situation. A brief screening may include only a few tests and can be performed relatively quickly. If a more thorough evaluation is called for, it may take several hours of multiple tasks and activities that look at the different processes of a person's cognition in more depth.

All of this information is integrated together to provide diagnostic impressions as well as recommendations for treatment and strategies.



MARI Testing Services

MARI offers a variety of testing services and employs licensed neuropsychologists, clinical psychologists, psychometrists, and technicians.

MARI offers tests related to:

- Neuropsychological testing for all age groups
- Psychological assessments
- Educational testing
- Language evaluations
- Literacy and reading assessments
- Autism spectrum disorder assessments

Make a Referral:

If you are a professional who would like to refer a client for testing, you can do so via:

PHONE: (734) 615-7853 to connect with our call center.

ONLINE: mari.umich.edu/contact-us to access the referral form page (click button to open the form).

FAX: (734) 647-2489

To learn more about our testing services, call (734) 615-7853 or visit mari.umich.edu/testing

MARI Services In Demand

During Fiscal Year 2020, MARI Provided:

17,984

Appointments, with a no-show rate under 14%.

3,985+

Hours of teletherapy and telehealth appointments

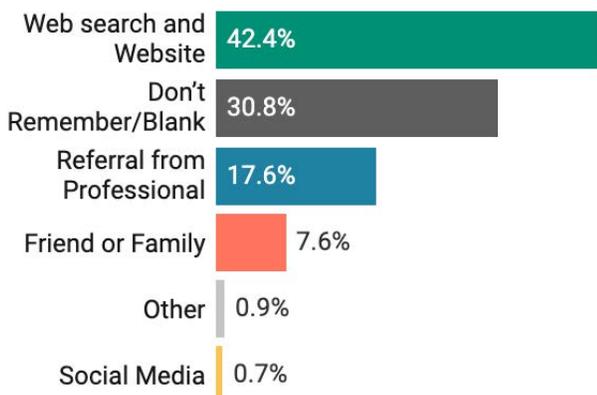
23.4%

of appointments were via teletherapy, with nearly 100% moving to telehealth by April.

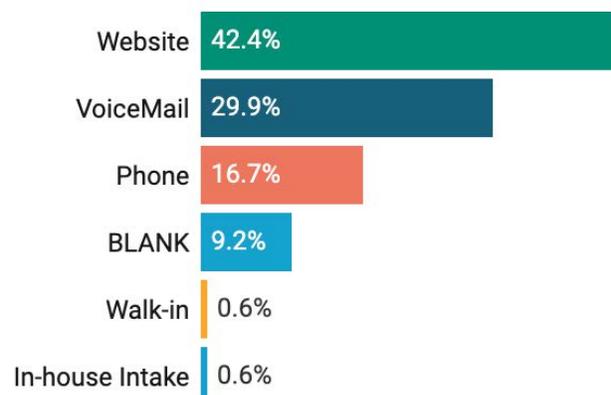


Finding and Contacting MARI

How Heard About MARI



How Contacted MARI



What Happens with those Points of Contact?

When you contact MARI, you are asked what service you are seeking as well as basic questions, insurance coverage, and other related information. *Then what happens?*

The service you are seeking:

is available now or soon for scheduling and MARI accepts your insurance — or the out-of-pocket expense is acceptable.

We will then set you up with the next steps! Depending on the service, you may be asked to fill out in-depth forms, to set up a screening appointment, or to speak with a specialist for an initial consultation.

is available at MARI, but there is a substantial wait list, for example, autism testing.

We let you know what the expected wait list time is and will add your name. As appointments become available, we will contact you to see if you are still interested and will begin the insurance verification process (if necessary).

is not available at MARI or it seems you might be better served by another provider (for example, they accept your insurance).

We provide contact information for a better service fit, when possible. Our goal is to make sure each person who contacts us has an action to take following the contact, even if that means seeking services through another provider.



Why Someone didn't Become a Client

Nearly 24% of those who first contacted MARI did not respond to our multiple follow up attempts. An additional 36% of the points of contact were blank in our system and 10% were labeled "other," meaning we have no consistent data for them. For the 30% of contacts who did not become clients, they listed insurance not accepted, wait times (particularly for ASD services, which typically have long wait times across the industry), the cost out-of-pocket, and simply not the right service for what they needed.

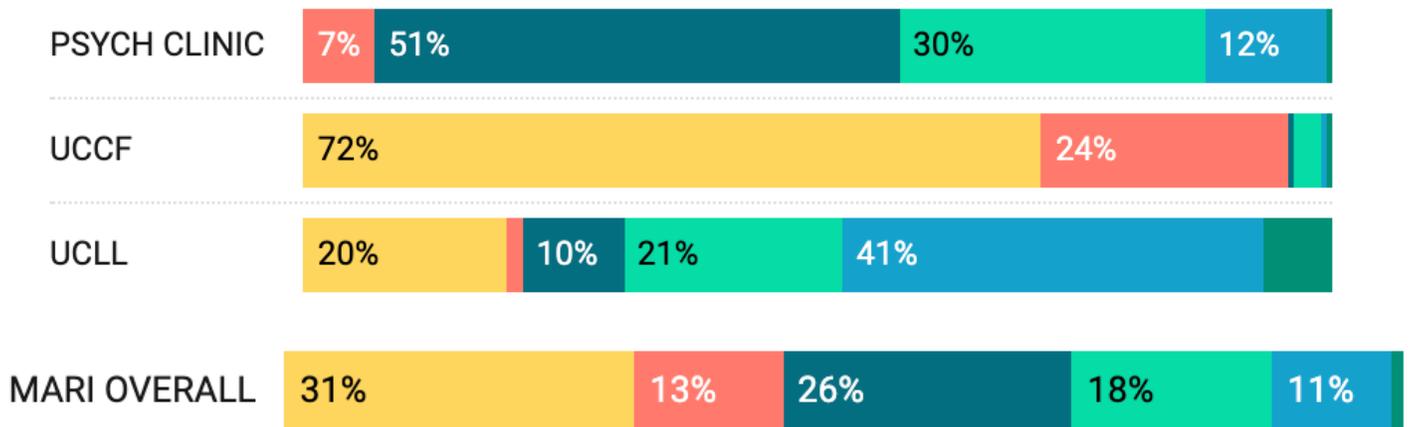
MARI Client Snapshot

Who does MARI help?

MARI services address a wide array of needs, serving people from all backgrounds, socio-economic statuses, races and ethnicities, ages, and life stages. The following data visualizations give a general overview of the MARI client population.

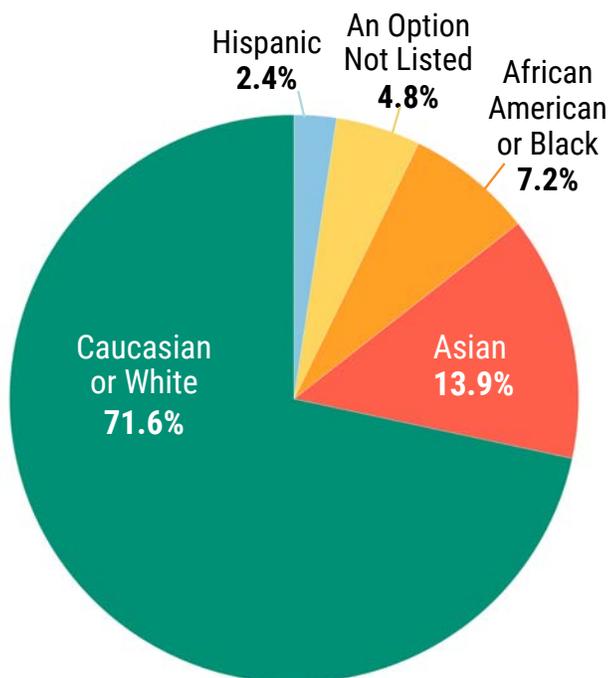
MARI Client Ages

0-12 Years 13-18 Years 19-30 Years 31-50 Years 51+ Years No Data



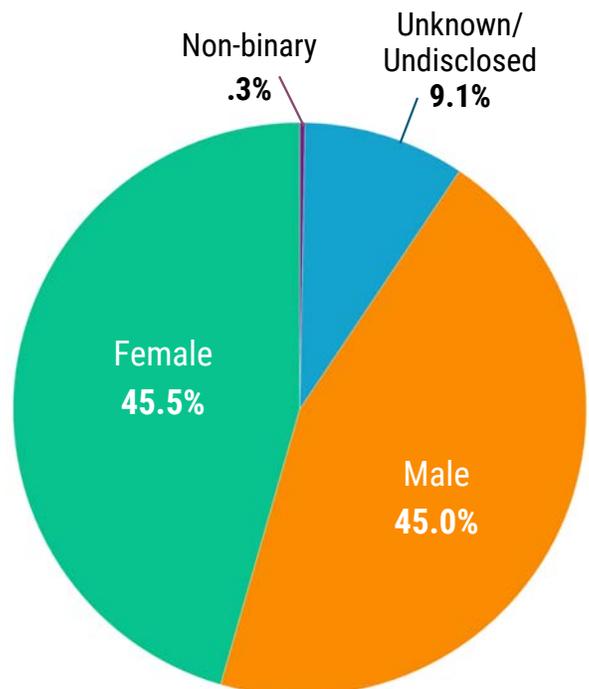
Racial and Ethnic Identity

MARI began collecting race and ethnicity data in 2019. We have data for 22% of our clients. This chart reflects the race and ethnicity identity of those for which we have data.



Gender Identity

Gender is the cultural understanding of sex, traditionally presented on a limited scale of female to male. However, as our understanding of gender grows, our collection of data will continue to be more nuanced.



Spotlight: Mindfulness-Based Approaches at MARI



The MARI mindfulness program is expanding access to mind/body interventions for U-M students, faculty, and the Ann Arbor community through groups, workshops, clinical research, and professional training.

Mindfulness, a relatively new mode of research-based treatment for mental health, has been practiced for thousands of years across cultures and geographies. While sometimes linked to religious practice — it has been in secular practice for nearly as long.

More than 30 years of clinical research supports mindfulness as an effective approach to helping treat mental health and in building resilience. It is effective in treating depression, anxiety, focus and attention, and other mental health challenges.

When we say mindfulness, we mean an approach that includes guided meditation practice that intentionally focuses on thoughts, feelings and sensations in the moment, in a nonjudgemental way.

What Exactly are Mindfulness-Based Interventions?

Mindfulness interventions encompass a number of practices that subscribe to a common foundational concept of intentionally focusing attention to moment-by-moment experiences, so we can recognize the health benefits of the “being mind” rather than the treadmill activity of the “doing mind.”

Mindfulness approaches typically fall into one of the following categories:

- **Mindfulness-Based Cognitive Therapy (MBCT)**, which combines mindfulness techniques and traditional cognitive therapy to treat mood difficulties and emotional distress
- **Mindfulness-Based Stress Reduction (MBSR)** that addresses the management of stress and anxiety experienced in daily life.
- **Mindful Self-Compassion (MSC)** provides participants to experience a kind and compassionate disposition toward the self.

Mindfulness Groups at MARI

Groups are offered several times a year by MARI’s licensed mental health professionals, who have advanced training in mindfulness-based practices.

Groups are typically eight weeks long, with weekly two-hour sessions. Our website hosts free audio files for several guided meditations that can be used as part of the group members’ home practice or for relapse-prevention and review.

By the Numbers in FY2020

- U-M and community participants in mindfulness groups = 43
- Research participants recruited = 116
- Clinicians trained in mindfulness-based methods = 32
- Total research funding = \$370,800

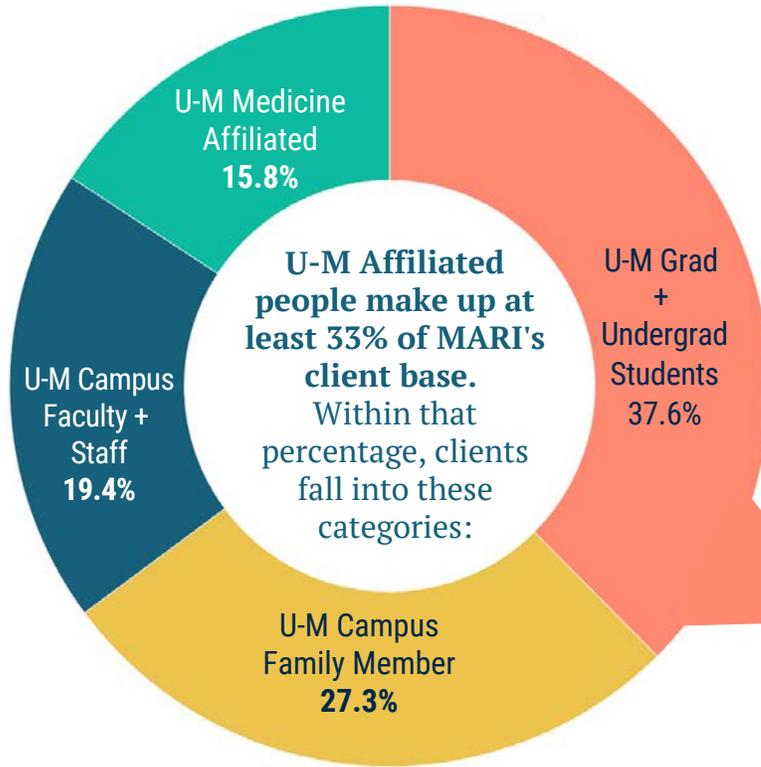
Mindfulness Research at MARI

Our clinicians also conduct clinical outcome research involving these mindfulness-based methods exploring the impact of mindfulness of symptoms of trauma, chronic pain and the impact of COVID-19 on communities in Southeastern Michigan, hard hit by the pandemic. Look for updates in the FY2021 annual report!

To learn more about Mindfulness at MARI, call (734) 615-7853 or visit mari.umich.edu

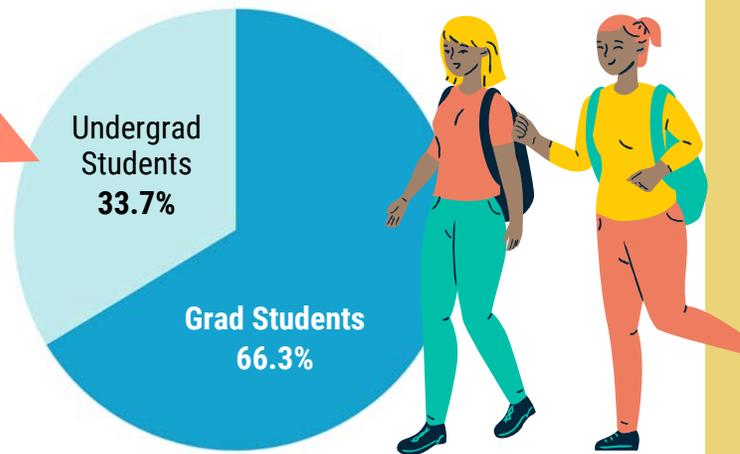
MARI Client Snapshot

How Many MARI Clients are Affiliated with the University?



MARI services are open to anyone in the community, whether they are affiliated with the University or not. However, MARI offers unique value to those who are U-M affiliated. For example, MARI hosts its own electronic health records — meaning our client files are not part of the Michigan Medicine system, for those concerned about confidentiality. MARI accepts the major insurances available to students, staff, and faculty provided through U-M, including the newest option, launching in 2021.

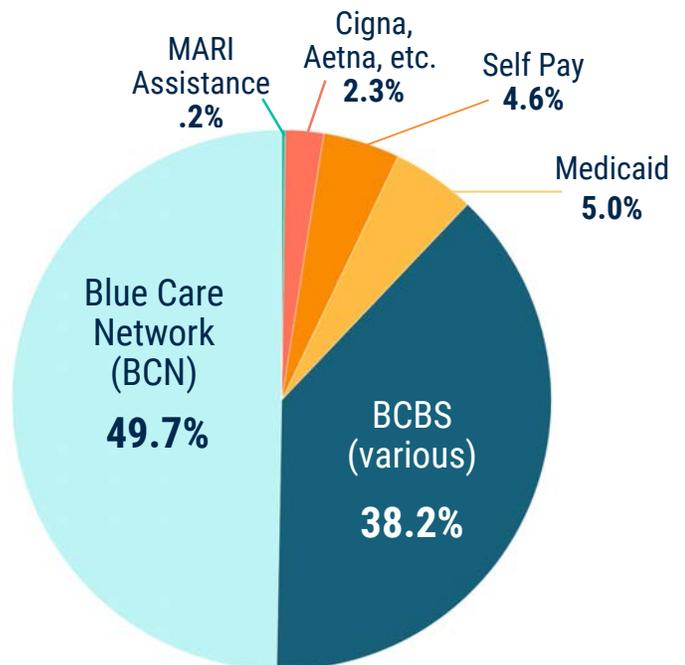
In 2019, we began asking if a client has a U-M affiliation to better serve our client base and to demonstrate the value MARI offers the campus communities.



How did MARI Clients Pay for Various Services?

Each MARI clinic, center, and sometimes service (i.e., testing, UMAP, ABA, etc.) accepts different forms of payments. The majority of UCLL services are paid out-of-pocket, for example.

MARI offers a financial assistance policy, which is especially helpful for U-M Aphasia Program clients.



Spotlight: University of Michigan Aphasia Program

When you are affected by aphasia, the world can be a lonely place. Things that were once familiar are foreign. Something that once came easily to you, like answering a yes-or-no question or making a phone call, can be overwhelming and frustrating. After nearly a century of working with those with aphasia, we understand that. Our program does more than just focus on the effects of aphasia — and it sets us apart. We focus on the whole person, helping each client build their confidence as well as their communication skills.

This outcome data is gathered from U-M Aphasia Program clients who completed their first, full-time UMAP session (typically 4 weeks long) from 2011-2019. Data represents various types of aphasia, severity, and time-since-onset. Results may vary for individual clients.

"It quickly became clear to us that each therapist on the team is highly skilled and completely invested in the individual progress of the clients. After just a few days in the program we began seeing strong improvements in reading, writing, and the first connected speech in seven months."

- CLIENT CARE PARTNER

100%



of clients and care partners said they would recommend UMAP to someone with aphasia.

Is intensive, individualized aphasia therapy at UMAP effective?

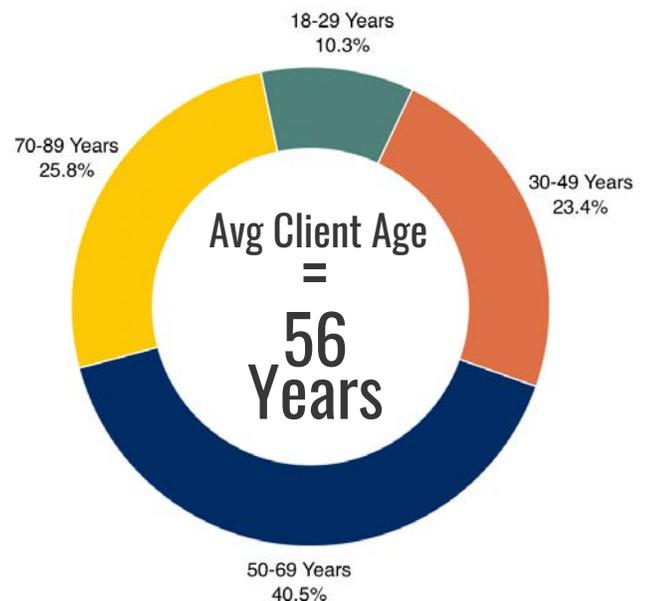
Clients saw an average increase of 10.8 points on the WAB-R following just one month-long session. A *clinically significant* improvement in WAB-R scores is 5 points. Averaged **UMAP client scores were more than double** the clinically significant benchmark.



Who attends the U-M Aphasia Program?

We see people across all adult age ranges, all genders, ethnicities, races and backgrounds, with only one thing in common: they have some form of aphasia. Many clients are from Michigan (37%), but the majority (63%) come from out-of-state and other countries. Following Michigan, the top client states are Ohio, California, New York, Florida, Georgia and Colorado, respectively.

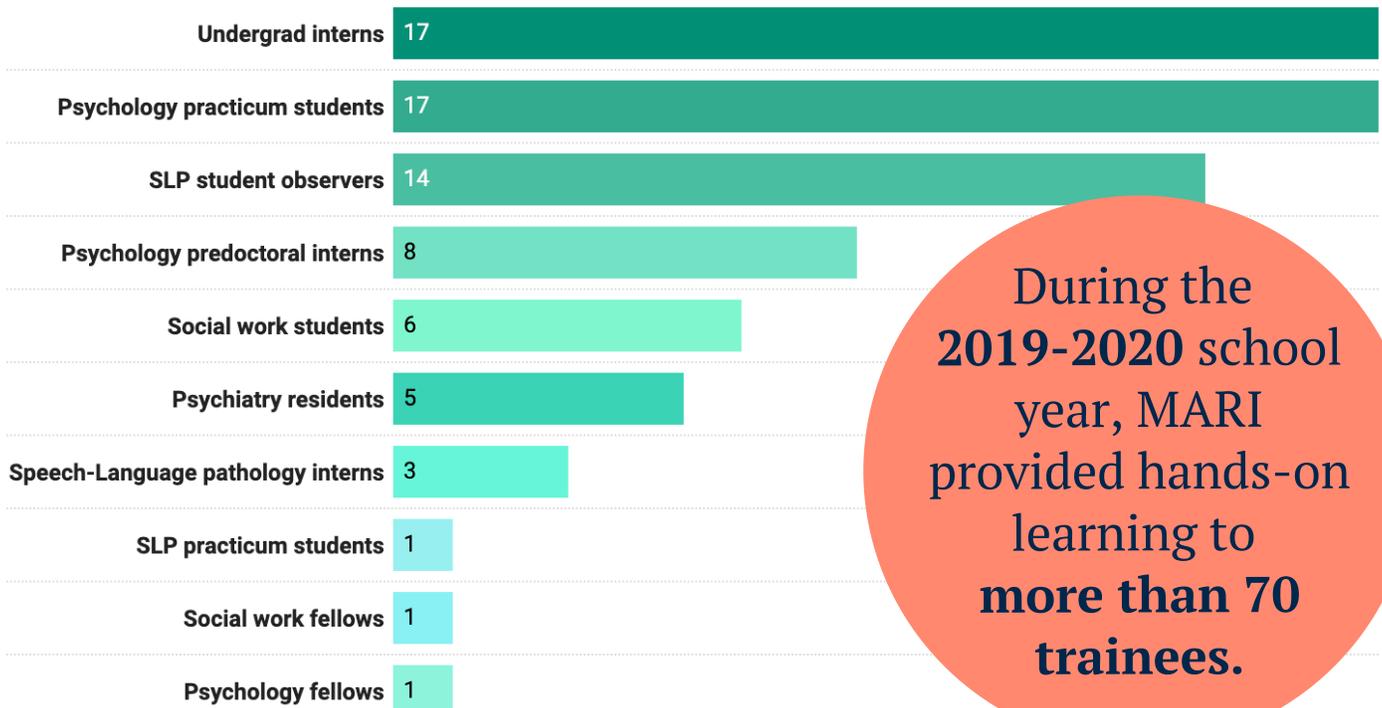
Client Home States



What Does Training Look Like at MARI?

MARI training opportunities offer benefits for all involved — the trainees receive hands-on, real world experience, MARI clinicians can pass along best practices and mentorship, and MARI clients receive care from not only their primary clinician, but also supervising clinicians.

Trainees by role and placement:



During the 2019-2020 school year, MARI provided hands-on learning to more than 70 trainees.

Note: Because the training year aligns to the school year, the data represented here is from a different time frame than the data throughout this report. The trainees were with MARI during the 2019-2020 school year.

MARI Trainees:

Provided
5805+
hours
of clinical care.

Served
680+
faculty, staff,
students & public.

Received
4450+
hours
of guidance.



Spotlight: MARI Training Programs

In their words - recent trainees on what they learned and what was different about MARI's Training Programs

Peter Aston, Psy.D.



- **Doctoral Program:** PGSP-Stanford PsyD Consortium
- **MARI Internship Year:** 2019
- **Fellowship:** Stanford University School of Medicine
- **Current Position:** Clinical Instructor, Faculty Member, Stanford University School of Medicine
- **Duties:** Individual therapist, OCD/Anxiety disorders specialist, running depression groups, supervising practicum students, possibly teaching/supervising medical residents.

What is special about the MARI training program?

"I loved getting specialized anxiety supervision and training learning CBASP, a treatment I use often with patients now and find highly effective. My experience at MARI made me a very well-rounded, integrative clinician and helped me prepare for success after internship."

What is special about the MARI training program?

"MARI is filled with genuinely kind humans who provide strong clinical training and supervision. As an intern, I was able to find space to build out a space to develop professionally, clinically, and in leadership."



Allison Meyer, Ph.D.

- **Doctoral Program:** Duke University
- **MARI Internship Year:** 2020
- **Fellowship:** Michigan Medicine, Dept. of Psychiatry
- **Current Position:** Postdoctoral Fellow
- **Duties:** Engage in dissemination and implementation research with TRAILS (trailstowellness.org) and provide individual and family therapy in an academic medical center.

Yi Tak (Daisy) Tsang, Ph.D.



- **Doctoral Program:** Wayne State University
- **MARI Internship Year:** 2020
- **Fellowship:** U-M, Department of Pediatrics
- **Current Position:** Pediatric Psychology Fellow, C.S. Mott Children's Hospital
- **Duties:** Inpatient C/L, outpatient psychotherapy for medically related issues, research on trauma-informed care in healthcare settings.

What is special about the MARI training program?

"Diversity in supervisor's theoretical orientation and expertise, genuine interest in helping interns reach our unique training goals, incredibly kind and intelligent supervisors and trainees that I would definitely stay in touch with."

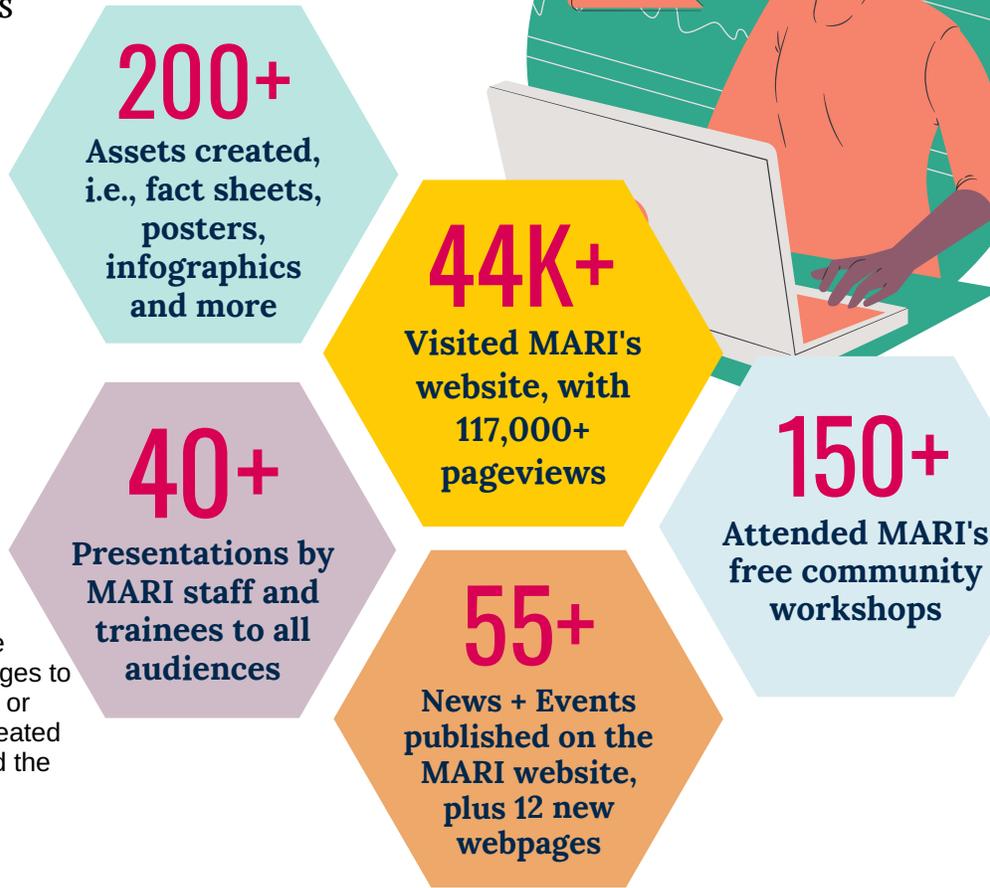
MARI Outreach and Resources

The year brought major changes to the way we do business at MARI — mainly in the form of taking things virtual and converting pen-and-paper processes to digital.

During FY2020, MARI asked clients to register and log-on to the MARI client portal if they hadn't already. The portal allows clients to view upcoming and past appointments, review billing statements, and contact their clinicians directly.

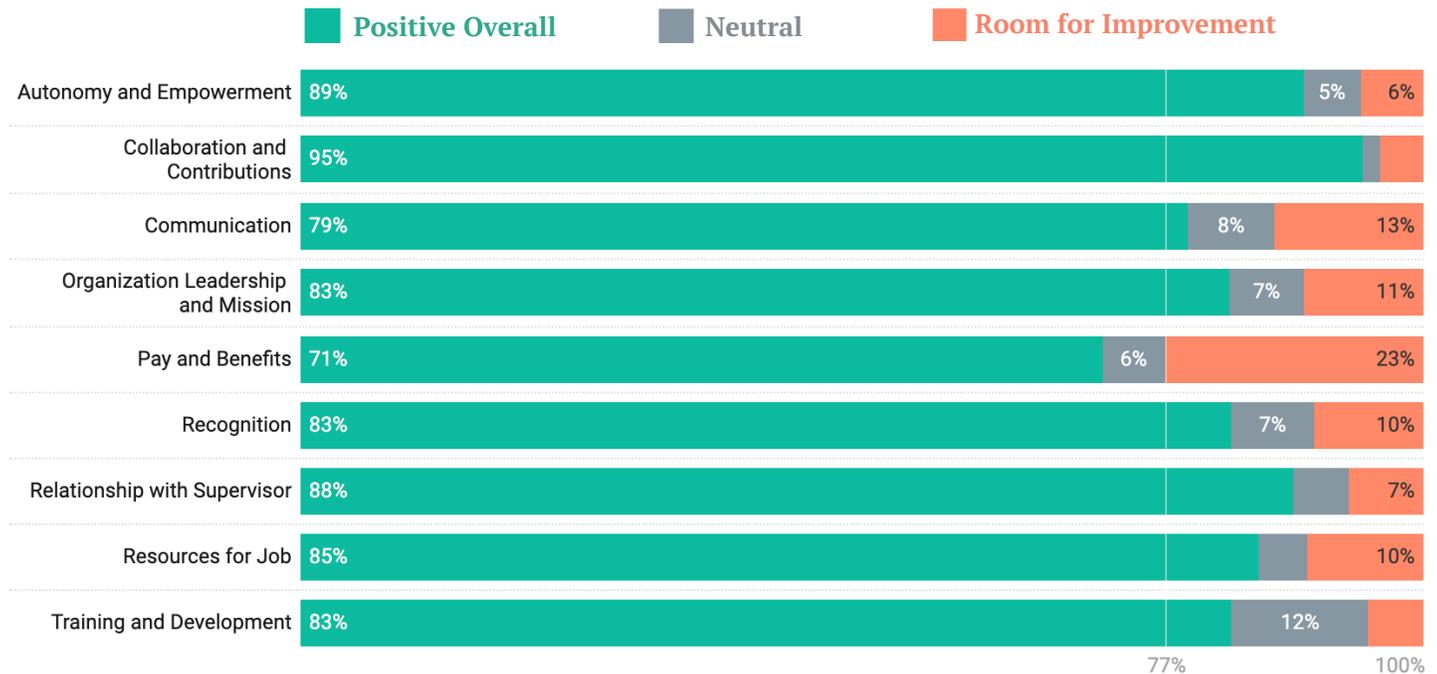
While the MARI patient portal has been available for years, the move to remote work and the shift to a telehealth delivery made the patient portal a central piece of the digital puzzle.

The patient portal, now a required part of the MARI client experience, can present challenges to people who may not have access to internet or may not have tech skills. In response, we created several resources specifically to help — and the MARI Call Center is available to walk clients through challenges when they arise.



MARI Staff Engagement

The overall sentiment in employee engagement categories remained positive, with **Collaborations and Contributions**, **Autonomy**, **Relationship with Supervisor**, and **Training and Development** leading the way in the 2019 staff survey.



Spotlight: Adjusting to a New World

How Mari Used Tech Tools to Meet the Needs of Clients and Staff in a Time of Coronavirus

If organizations are learning one thing during coronavirus, it's that necessity remains the mother of not just invention but also innovation. MARI was quick to adopt technological tools amidst the pandemic, putting technology to use for clients and their internal teams.

"We knew it was crucial to pivot," said Dr. Bruno Giordani, senior director of MARI. "Considering the uncertainty, anxiety, and stress inherent in a pandemic, we knew it was very important to continue to offer access to mental health and speech-language therapy services for our clients. We also recognized the importance of keeping our staff and trainees engaged and able to do what they do best: help people."

Preparation and Fast Adoption

Within two weeks of the stay-at-home orders, MARI transitioned all therapy clients to telehealth. While the University of Michigan Aphasia Program (UMAP) has offered teletherapy for several years, it was really the only MARI service offered through telehealth until the pandemic. Other services, like individual, group and family therapies, had been exploring different technological options to reach various patient groups, but had to be nimble in adopting clinic-wide measures. The clinicians, central administration, and clients teamed up to make it seamless and successful.

Some services, such as testing and ABA therapy, were not necessarily adaptable to telehealth. For example, neuropsychological testing measures typically used in a full evaluation had not been vetted for use in remote scenarios. MARI had to strike a balance between meeting the needs of clients, while also maintaining the integrity of the approaches and tools at hand.

Protecting Client Information in a Decentralized Environment

Part of the new challenge was making sure MARI was responsive, but also strategic and safe when transitioning to new tools, particularly with Personal Health Information (PHI) involved. Everything from answering the main phone lines, to talking with insurance companies, to hosting team meetings, and administering therapy was affected. MARI ordered new equipment, sourced tools, created documentation, and got everyone up to speed on the *what* and *how* of accessing and sharing potentially sensitive information.

Keeping Staff Prioritized and Informed

MARI also prioritized internal communications, using alternative ways to keep connected. The team has had to get creative to avoid email fatigue and to make sure information continues to reach everyone. MARI began hosting all-staff virtual town hall meetings. More than 65% of staff tuned in live for the first town hall, and more accessed the video recording afterward.

"The changes we have made are a credit to our leaders, staff, trainees, and clients who have demonstrated what resilience and compassion are in a time of unprecedented crisis," said Dr. Giordani.



"Embracing technology for providing clinical care and communications has been part of our strategic plan for some time. However this situation has — depending on how you see it, either forced our hand or given us the opportunity — to leap years ahead. In three weeks, we accomplished what would have normally taken years."

— Dr. Bruno Giordani, MARI Director



MARI Looking to the Future

MARI developed a new, short-term strategic plan during 2020 and starting in 2021. These are the goals we will be focusing on in the next three years and reporting on in following annual reports:

- **Goal 1:** Strengthen fiscal sustainability and resilience across the Institute.
- **Goal 2:** Increase recognition of MARI and the value the Institute provides the University and community.
- **Goal 3:** Create a MARI where diversity (in all of its forms) is central to client services, training, and general operations.
- **Goal 4:** Office of the Future - Position MARI to remain relevant in and responsive to a changing environment now and in the future.
- **Goal 5:** A progressive, informed, evidence-based MARI training model to continue to remain robust now and in the future.

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University Psychological Clinic

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University Center for the Child and Family

(734) 764-9466 | umuccf@umich.edu | mari.umich.edu/uccf

University Center for Language and Literacy

(734) 764-8440 | ucll@umich.edu | Languageexperts.org



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