Welcome to 2013—a year of change for us all! There were mixed emotions at Roger Myers’ retirement party. Staff and community members applauded his vision, leadership and commitment to the community. We are happy that he will be able to enjoy his free time. We will miss him, but we will all do everything we can to make sure that we continue the mission and vision of the organization he worked so hard to build!

We also said “Happy Retirement” to Mac Miller, the Executive Director of Livingston Community Mental Health Authority and one of our affiliation partners. Mac’s successor is Connie Conklin who is a Livingston native. Prior to joining Livingston as Director, Connie had been working with the Michigan Department of Community Mental Health. Connie brings a special expertise in Children’s Mental Health Services and Wraparound Services to our Affiliation Directors group.

We were saddened by the sudden death of our friend and colleague, Patrick Barrie, early in December. Pat was CEO of the WCHO at the time of his death. But, many of us remember him as an Outpatient Supervisor and Clinical Director at LCMHA. Pat was a good friend to all of us, a visionary in the field of mental health, and an advocate for those receiving mental health services. Our sincerest condolences to Pat’s wife, Mary, and his sons, Phil and Cullen.

The year 2013 will likely be another year of changes. We are looking forward to further integration with primary health care as we expand our relationship with the Family Medical Center. We expect to see groundbreaking on the new Family Medical Center. And, we hope to launch an integrated health care team that includes members of the Family Medical Center staff as well as LCMHA staff. We will continue the integration of Substance Use Disorder Treatment with Mental Health Treatment to better meet the needs of Lenawee County residents.

The New Year will also bring changes at the Affiliation and State level. We will be challenged to form a new Regional PIHP with our existing affiliation partners, (Livingston and Monroe and Washtenaw). The new Regional PIHP is expected to support LCMHA’s local efforts while creating opportunities for efficiencies similar to those the affiliation has already initiated. An outstanding example of administrative efficiencies is our shared Electronic Medical Record. At the State level, we expect to hear more about serving individuals who are dually eligible for Medicare and Medicaid. And, we expect to see discussion of Medicaid Expansion.

It’s a new beginning, built on a strong foundation. I am looking forward to working with you, learning from you, and continuing the tradition of service to Lenawee residents.
For many of us, the combination of a sedentary job, aging and the slowing of metabolism, plus being "too busy to exercise" have conspired to cause a weight problem. Throw in the side-effects of medication, a little stress, a few excuses, and a dab of procrastination and I got the results: sixty pounds of excess weight to carry around all day. No wonder I need a nap when I get home!

Vicki Horn shared with me about her recent 23 pound weight loss. When her doctor told her she was technically obese and needed to take pills for her cholesterol, "it scared the tar out of me!" She immediately started her plan on several fronts. First was exercise (as we all know a very effective anti-depressant). This included lots of walking, joining The Center for swimming, racquetball, the treadmill and elliptical machines at least once a week. In addition, at home she could lift weights, play basketball and jump rope. Vicki feels sweating helps detox the body.

Vicki also cut out red meat, soda, and almost all sweets. She bakes turkey, chicken and fish, eats nothing out of the can and tries to keep her diet as natural as possible. When she is tempted to stray, she thinks it through to the consequences: "I want to stay on the road to recovery."

Stacie Crosier, CMH Case Manager, has been a tremendous inspiration. She started Weight Watchers in April 2010 and has achieved an 86 pound weight loss! “Home was my downfall, I’d do well all day, then my portions were way too large at night.” Besides eating smaller portions of healthier foods, she runs and uses a treadmill in bad weather, or runs in her subdivision or on the Trestle Park Trail, usually three to four times a week. She’s built up gradually to an hour running over six miles. She started out walking before or after work, gradually incorporating music and running, then eventually all running. Stacie says, “As I lost more, it became easier and easier. I couldn’t have done in the beginning what I do now.” Stacie also signed up for 4 or 5 5K runs last year. She will complete 8 5K runs this year.

As for coping with all the temptations here at CMH, Stacie says “It’s hard, sometimes I snag a few!” The thought of gaining back the weight she’s lost keeps her back on track. She also keeps healthy snacks at hand, and doesn’t let herself get too hungry. Sugar free foods, less junk food and more fruits and vegetables are mainstays for her. Her plan for the holidays is to “run more”. Her before and after pictures say it all. Great work Stacie!

Inter-Connections’ new Mindful Eating Group, along with the other new “Health Initiative” groups there, is available to help change some of our unhealthy habits. Other ideas might be to use birthdays as occasions for celebrating in other ways besides eating, such as starting another CMH weight-loss support group.

By focusing on total wellness for ourselves and our peers, we are changing the figures that forecast a 25 year shorter lifespan on average for those of us in the mental health system. As Vicki and Stacie have shown, a multi-faceted approach can be very effective with the complex problem of over-eating.

In November the agency said a “fond farewell” to its Compliance Officer—Melinda Perez. Melinda had served Lenawee Community Mental Health for 28 years in various capacities, starting out as a nurse. We wish you luck in all you do in the future!
In an effort to encourage a healthier way of life some new groups have been established:

Movement Group—they meet every Tuesday at 1:30 pm, this group will help you keep motivated toward a goal of becoming healthier.

Mindful Eating Group—meets every Friday from 2:30 pm—3:30 pm to talk about eating in a healthier way, good habits, and monthly healthy cooking classes.

Walking Group—this group started on December 4th, and meets weekly on Tuesdays at 1:30 pm. Get motivation and support from fellow walkers. Everyone who signs up will receive a free pedometer to track steps/miles.

There is also a Smoking Cessation Support Group which meets on Tuesdays at 11:00 am, and a Diabetes Support Group—every Thursday at 1:30—2:30 pm.

Many congratulations to the Drop In Center Director, Jen Schall, on the birth of her baby girl (Arielle, 7lbs 8oz) on December 10th. Mother and baby are doing fine.

The HOPE Hoopsters basketball team is back for 2013! The team, which is made up of HOPE members, practices twice a week, and competes in exhibition games against different businesses and organizations in Lenawee County. The team also competes in Special Olympic competition, and placed 3rd in the State tournament in 2011. There are many new recruits this year, so much so that we’ve had to add a new team to the program. Players will now be divided, based on ability level, into two HOPE Hoopsters teams: varsity & junior varsity. Both teams will play together in exhibition games, and play separately in Special Olympic completion. We will be hosting two exhibition games a month, all of which are open to the public. We encourage everyone to come out, and cheer on these exceptional athletes!

House Team Game Schedule:
Friday, January 11th @ 7:00 PM – Jimmy Johns
Friday, January 25th @ 7:00 PM – LISD
Friday, February 15th @ 7:00 PM – Theta Chi
Wednesday, February 22nd @ 7:00 PM – Adrian Kiwanis
Friday, March 8th @ 7:00 PM – Lenawee United Way
Friday, March 22nd @ 7:00 PM – Sand Lake Fire Dept.
Friday, April 12th @ 7:00 PM – The Centre

Friday, April 26th @ 6:00 PM – The Boys & Girls Club
Friday, May 10th @ 7:00 PM – Goodwill
Friday, May 17th @ 7:00 PM – HOPE Staff
Saturday, June 1st @ 11:00 AM – Hoopsters Invitational Tournament
Friday, June 21st @ 5:00 PM – Hoopsters Banquet

You may contact The Joint Commission via the following mechanisms:

E-Mail: complaint@jointcommission.org
Fax: Office of Quality Monitoring, (630) 792-5636
Mail: Office of Quality Monitoring, The Joint Commission, One Renaissance Boulevard, Oakbrook Terrace, IL 60181
WHAT IS A RECOVERY COACH?

A very different mix of folks showed up for the recent five-day training in Waterford, MI. While the Peer Training also involved people in recovery from substance use, this training involved few Certified Peer Specialists and everyone there was focused on chemical dependency. Many of these new “Recovery Coaches” were unemployed (Peers must be employed prior to certification), part time and underfunded.

This was surprising because the Peer Movement follows many years of tradition using one alcoholic to help another. My own treatment thirty years ago for alcohol and marijuana dependency was done at an agency entirely staffed by recovering people, from the director to the kitchen staff. When I went back for my internship seven years later, certification was in place for Substance Abuse Counselors. Several years later, due to insurance demands for Registered Social Workers, recovering people were involved as volunteers for the most part.

Now the effectiveness of one person in recovery helping the newcomer is being rediscovered. Soon Recovery Coaches will also be certified in Michigan, but their role like that of Peers, is seen as primarily an entry level position with little prospect of advancement. One handout used in the training contrasts the work of a counselor with the work of the Recovery Coach. Differences focused mostly on the extent of documentation needed, a focus on past versus present, community advocacy, and, of course, educational levels.

Instead of calling folks in treatment “peers” this training called them “recoverees”. There were participants in the training who volunteers at MARS programs: “Medicated Assisted Recovery” meaning people who are being maintained on Methadone or Seboxzone, not just being detoxed on these meds. They were examples of the thrust of the training: there are many paths to recovery. AA/The Twelve Steps and abstinence, MARS, harm reduction were some of the paths discussed, along with other countries’ focus on controlled use, and the 65% of those who quit or moderate without any type of treatment at all.

There was little information on co-occurring treatment, which was surprising considering the fact that the majority of those with substance use disorders also have some form of mental illness. So there is still a gap between Recovering Coach Training and Peer Training that will be addressed soon.

To sum it up, Peers and Recovery Coaches are primarily the same animal. I’d like to see one neutral title that addresses both roles, a title that doesn’t brand a young person as mentally ill or a substance abuser. How about Wellness Coach or Support Staff? Any Ideas?

Ni Gordon,
Peer Support Specialist

WHAT IS AN ENGAGEMENT GROUP?

The Engagement Group here at LCMHA is for those of us with both mental illness and substance use issues, to explore the pros and cons of both prescribed and non-prescribed drugs, including alcohol.

As Supervisor, Judy Warren put it, this is “Substance Use 101”.

The format is primarily educational. Since everyone who comes has extensive experience, each person has an opportunity to share (or not) on the topics.

Every Tuesday, from 1:30 to 2:30 pm, and Fridays from 10:30 am—11:30 am, Ni and a Case Worker will look at these issues from a variety of angles. The main topics are: Short-term vs long-term effects, What is recovery? Varieties of support, Relaxation training and personal plans. The interaction is flexible and laid-back.

Each person’s path to recovery is unique, so each session is different. Attendance so far has been small but growing. This service is provided free of charge.

An additional bonus is that when a person is at a stage of change and wants individual therapy for their substance use disorder (SUD) this will be available. On the other hand, if anyone wants to continue in the Engagement Group, they are welcome.
Michael is a new Peer Support Specialist who will be working on Mondays, Wednesdays and Thursdays.

Born in Iowa, but living in Adrian since the age of 3, Michael dropped out of High School due to his anxiety and depression issues. But, he is very pleased to say that he is now well into recovery. He recently completed his High School diploma and an Associates Degree in Clinical Psychology from JCC, at practically the same time. He is now planning on attending Siena Heights University to continue his education. “I would like to get a PhD or PsyD in Clinical Psychology, and teach and practice one day.”

Michael credits the staff at CMH, Catholic Charities and Family Counseling & Children’s Services for the treatment and support he has received to get to where he is today. “At my lowest point, I could not function. I could not leave the house!” Michael looks forward to sharing his story with others to help them understand that a diagnosis is not the end...it is just the beginning and he is living proof that you can recover from a mental illness.

Michael is a voracious reader, and it has helped him greatly to learn all about his illness in his college classes, he said that “30% of the population experiences anxiety at some point in life” knowing this made him feel a lot less isolated.

When Michael is not reading, he plays computer and video games, and he is in the process of moving into his own new apartment.

“I am looking forward to being able to help others, as I have been helped.” He also said that he was always shown the warmest reception whenever he came to CMH—having Barb greet him by name and with a smile at the front desk, and other staff ask how he is doing always made him feel valued “you cannot replace that personal connection. Staff have been so friendly and welcoming I am going to love working at CMH!”

**Say Hello to Michelle Doerfler—MI Supports Coordinator!**

Michelle graduated from Lake Superior State with a Bachelors degree in Psychology. She joins CMH with 10 years experience working with the mental health population at Macomb County Jail.

Michelle lives in Tecumseh, is newly married and has a 5 year old daughter, Julia.

Michelle is the lead vocalist and guitarist of the band *Irresistible Americans*, along with her husband (he plays bass guitar). They are on hiatus at the moment, but she hopes to start playing again soon. She loves classic rock, especially The Beatles. Michelle’s husband owns a construction company, and they are both currently working on huge renovations to their home! She also loves to knit and cross-stitch.

**CMH Welcomes Jen Mohler—Access Clinician**

Jen Mohler is no stranger to CMH, as she has done two internships at the agency during her college years. Completing her undergrad at Adrian College, and her Masters in Social Work from U of M.

Jen grew up in Adrian and attended Madison School, her family still lives in the area, although she now lives in Tecumseh with her boyfriend, two dogs and a cat! She loves to spend spare time with family and friends, shopping or doing Zumba. She has a sister at MSU and a brother and sister (twins) at Madison School. Vacationing in Vegas is her favorite thing to do.

Jen gained some valuable experience prior to CMH working at the Zeff Center in Toledo, in their Crisis Department. She is very excited to be working at CMH where everyone is friendly and helpful—“it is a very relaxed atmosphere,” she said. It is also nice to have her evenings and weekends free as she has been able to give up her bartending job in Tecumseh!
NEW MICRO-ENTERPRISES AT GOODWILL

Tracy Huston has been a long time member at Goodwill, but has only recently started painting pots. She loves to decorate them herself using paint and stickers. Tracy buys the pots and paint at Lowes. Once the pots are dry she decorates them. The pots can be used in all kinds of ways—for candy, pot pourri, flowers etc. They can sit on a shelf or on the floor. The pots are starting to sell in the Goodwill store for $10 or $12.

Tracy is a very independent young lady—she has her own apartment in Adrian. She attends the HOPE Community Center on Thursdays and Fridays and is proud to be a member of St. Stephens Church.

Tracy has several hobbies. Besides painting pots, she loves to read, plays the piano and sings in the choir. She also volunteers by stocking shelves at the food pantry.

Miranda Hagemeyer crochets potholders and Christmas ornaments, among other things. Miranda has been crocheting every day for 3 years and loves to be able to sell her wares at Goodwill.

She lives in a group home in Morenci, but having her own business gives her plenty to do—especially something she enjoys.

Miranda also plays the flute, the piano and organ. She enjoys attending the LINC program at Goodwill. Her favorite thing to do is swimming at the YMCA and exercising in the workout center on Fridays.

Ruth Fick also loves to crochet...but she also knits, and paints. Her grandmother used to make rag rugs and she would help her tie them together, so one day she would like to make them too.

Ruth has made some wonderful creations—soap on a rope, washcloths, hats and scarves. She has also made a dolls cradle and blanket, which turns inside out to become a purse!

Ruth has been working at Goodwill for about 13 years, but just recently starting making things to sell in the store. She goes to the microenterprise program every Friday afternoon. Ruth is very independent, she lives in her own apartment. When she is not crocheting, she loves to read magazines and watch TV.

Derek Carpenter is a very skillful young man. Not only has he got a basement full of model airplanes and tanks that he has put together at his home. He is now bringing those skills to Goodwill.

Derek has a lifelong love of everything to do with model airplanes, World War I and II and anything medieval. He also hand paints the model soldiers (and they are tiny!) it takes some really good fine motor skills to accomplish this.

Derek is a lifelong Tecumseh resident, where he went to school and lives with his parents. When he is not putting models together he likes to play any video games that are related to war or medieval times, and he likes to watch old war movies or documentaries. Derek has worked at Goodwill for a couple of years, but has only just started his own microenterprise selling his models in the store.
A CALL FOR TREATMENT

Like many of those reading this, I don’t think I will ever forget where I was when I first heard the news related to the tragic event that occurred in Newtown, CT. I was driving on the Ohio turnpike on my way to pick up my four-year-old daughter, who had been visiting her grandparents in Pittsburgh. I was so disturbed by the news that I had to pull the car over and compose myself before I could continue driving. All I could think was ‘How could this happen?’ and ‘Who is responsible for this?’

As the Executive Director of Community Mental Health of Ottawa County, I wondered if the individual responsible for this unspeakable tragedy would have been found to have been recovering from a mental illness. I then reminded myself of a simple truth: **Individuals who are in active recovery and treatment for a mental illness are not more likely to commit violent crimes than anyone else!**

As we’ve learned more about the individual who committed this horrible tragedy, it is unclear if he was indeed coping with a mental illness. What is clear is that he was not engaged in active mental health treatment. This fact reminded me of a second simple truth: **Having a mental illness does not add an additional predictor of violence unless the individual coping from a mental illness is not engaged in treatment.** In fact, many researchers agree that there are two major predictors of who will commit a violent crime: a past history of violence and/or current drug or alcohol abuse. While untreated mental illness can be associated with violent crime, it is not a major predictor.

Ensuring access to adequate treatment options for those who suffer from a mental illness and/or a substance use disorder will lead to healthier communities. Treatment however does come with a cost. Currently 90% of mental health funding in our community comes from the State Medicaid Program. This leaves 10% of the current revenue to fund the treatment of uninsured individuals. Funding for mental health and substance use disorder treatment for non-Medicaid Ottawa County residents simply needs to increase.

Community Mental Health of Ottawa County currently has several individuals who have been diagnosed with a mental illness but have not been found eligible for Medicaid benefits. Those individuals have been placed on a waiting list for services. Without increased financial support from our local community the number of untreated individuals will only continue to grow.

I have the honor of interacting daily with individuals living in our community who are in active recovery from mental illness. I am proud to know these individuals strive to be full participants in our communities. Mental health treatment provides a vehicle for that goal to be obtained. Communities invested in funding adequate mental health treatment are making a statement that individuals suffering from mental illness are vital and valued members of the community. In short… it is up to us, as a local community, to ensure there are adequate resources available to fund mental health treatment.

Mike Brashears, Executive Director, Ottawa County CMH

OTHER RESOURCES FOR PARENTS TO HELP YOUNG CHILDREN COPE WITH VIOLENT TRAGEDIES

http://www.cmhnetwork.org/media-center/morning-zen/tips-for-talking-with-kids
http://disasterdistress.samhsa.gov/disaster Distress Helpline—Immediate Crisis Counseling, Call 1-800-985-5990 or test TalkWithUs to 667476.TTY for Deaf/Hearing Impaired: 1-800-846-8517.
http://terror_general.aspx
http://sswaa.org/displaycommon.cfm?an=1&subarticlenbr=500

Help is available 24 hours a day by calling the Lenawee Community Mental Health Authority at 800-664-5005.

To learn more about how to access services and the services available in Lenawee County call (517) 263-8905 and ask for Customer Services or email customerserv@lcmh.org

Listen to WLEN’s Party Line Now on January 12th at 9am. Sandy Keener will be addressing various issues involving mental health services.

Here are some guidelines for talking to young children about violent tragedies:

- Don’t assume the child knows nothing
- Ask—“what do you know?”, “what did you hear?”
- Tell the truth in an age appropriate manner, do not give all the details "A bad person hurt some people”
- Be honest—share that bad things happened, but it has been taken care of
- Focus on the Positives—the people helping etc.
USEFUL WEBSITES:

www.jointcommission.org—The Joint Commission

www.macmhb.org—Michigan Association of Mental Health Boards

www.orgsites.com/mi/lc/lenaweericc/—Lenawee RICC

http://www.michigan.gov/mdch/0,1607,7-132-2941_4868_32708-253138--00.html—Disability Benefits

Lenawee Community Mental Health is accredited by The Joint Commission on Accreditation of Healthcare Organizations

If you do not wish to have future newsletters mailed to your home, please notify: Customer Service at 1-800-664-5005

If you would also like The Grapevine to be sent directly to your email, please provide Customer Services (ssmith@lcmha.org) with your email address.

Congratulations to Sharon Robb (left)—Administrative Manager, who was presented with an award for 25 years service at the November Board meeting, by Board Chair, Deb Bills.