A Word From Our Director

It’s a beautiful fall. While we have been enjoying the change of weather and onset of Michigan’s fantastic fall color display, we have been busy getting ready for other changes coming to Michigan in the next year.

It’s hard to imagine that anyone has missed the discussion of the changes that will come to us as the Affordable Care Act (Obamacare) is implemented. On October 1st, we saw the roll out of the insurance Market Place. And, in April, 2014 we will see the expansion of Medicaid. As with any new program, there is plenty of confusion and more questions than answers. The good news is that we are here to help. Our Peer Specialists have been trained to assist you with accessing benefits. They are also standing by to connect you with a Navigator who is located at the Family Medical Center. If you need assistance, please call Customer Services at 517-263-8905 and someone will assist you.

The Medicaid Expansion, known as Healthy Michigan, is expected to be ready for implementation on 4/1/14. Many of the details for enrollment are still being discussed. We will keep you advised as information becomes available. In the meantime, please let us know what questions you have and how we can be helpful. The Medicaid Expansion (Healthy Michigan), and the new Market Place promise to be very helpful to many Lenawee residents who have been uninsured.

The Medicaid Expansion (Healthy Michigan) also means that we can look forward to the end of our growing Wait List sometime before the end of this fiscal year. As you may remember, State General Funds for non-Medicaid eligible individuals are targeted to those experiencing a mental health emergency, and those who have the most severe forms of mental illness and/or developmental disabilities. Shrinking state funds over the last few years has made it necessary for us to create a Wait List for those individuals who, while they may have a severe need, are not presenting with a need for emergency intervention. In these situations, we complete an assessment, make any referrals for available services, and assign the person to the Wait List for Mental Health services. Individuals on the Wait List are given information about how to contact us 24 hours a day, 7 days a week if they find themselves experiencing a crisis situation. We also ask our Peer Specialists to make contacts with individuals on the Wait List to offer support and to check on their well-being. Managing resources that are insufficient to meet the needs of people coming for needed services has been very difficult. We are very grateful to the Governor and Michigan lawmakers for their support of this critical source of support for our consumers.

This month Dr. Syed is reducing his scheduled hours here at LCMHA. We are happy that he plans to continue with us for a half day a week as he changes his primary work setting to Allegiance Hospital. Dr. Syed worked with his patients and all of us to make this transition as easy as possible. We know that Allegiance Hospital will be delighted to have Dr. Syed. He has been an asset to our agency.

You may also notice some other changes in the Medication Clinic. We have taken advantage of our newly updated phone system to add a Nurse of the Day line. We are directing callers who have questions for the nurse to leave a message on the Nurse of the Day line. This creates an efficiency for the nurses who will be able to research your questions for the nurse to leave a message on the Nurse of the Day line. This creates an efficiency for the nurses who will be able to research your

/Cont’d over
Do you know around 800,000 to a million people die by suicide every year, making it the 10th leading cause of death worldwide? I know this is a difficult topic to write and talk about. The reason I am writing this letter is to help others understand and prevent suicide.

A few things that may lead to suicide: mental illness, alcohol/drug use, family history, brain chemistry, and many more.

Some warning signs for suicide include dramatic mood swings, sudden personality changes, homelessness, talk about suicide and others.

There are facts about suicide as well as common myths. A suicidal person may not ask for help, but that doesn’t mean that help isn’t wanted. Most people who commit suicide don’t want to die—they just want to stop hurting. If you think a friend or family member is considering suicide, you might be afraid to bring up the subject. But talking openly about suicidal thoughts and feelings directly can save a life.

Give emotional support by listening to him or her, show that you take the persons feelings seriously and want to help. Also inform them that there is help and support, and stay close until professional help is available.

You can encourage positive action by improving the home life, keeping busy, getting away for a while, exercising and talking to someone.

Many people who say they are going to attempt suicide are asking for help. 90% of people who die by suicide have a diagnosis and treatable psychiatric disorder at the time of their death. There is more knowledge to be gained from understanding what underlies suicidal thinking. I personally have been in this situation. I got help and now doing the best I can to keep living. No matter what problems you are dealing with, people want to help you find a reason to keep living! I hope this letter can save lives, and if this letter will help one individual that would be awesome!

Scott Marvin, Diversity Outreach Coordinator, Lenawee Disability Coalition

Enjoy this beautiful season!
Congratulations go to
Suzanne—a member of the
Tobacco Cessation Support
Group that meets at
Interconnections—seen at
right receiving a certificate for
three months of being tobacco
free! The smoking cessation
support group meets on
Tuesdays at 11am. There is a
movement class at 1:30pm
every Tuesday, and a
Diabetes/Healthy Eating class
on Thursdays at 1:30pm.

INTERCONNECTIONS DROP-IN CENTER

Angela Pooley Completes Triathlon!

Only six months after
delivering baby boy Brennan,
Angela Pooley, while working
full time as a Case Manager on
the MI Team at LCMHA,
completed a Triathlon held at
Waterloo Park in Grass Lake,
MI.
The Triathlon consisted of a
half-mile swim, followed by a
10.7 mile bike ride, and
ending with a 3.1 mile run
(whew!) Over 430 people
participated in the June 22nd
event, and Angela came in
sixth in her age group: ages 25
to 29 years old.

Angela also has a two and a
half year old son, Bryson. The
kids “are my priority”. So how
was she able to train with her
busy schedule? Girlfriend and
neighbor, Danielle, was a
college roommate and Angela
also competed with her in high
school sports. Both wanted to
lose the baby weight since
Danielle just had her second
daughter four months ago, and
also has a two and a half year
old daughter. The girls would
get up at 5am to bike to the
Christian Centre, where they
would swim laps, run around
the track and be home “to get
the kids off and ready for the
day” by 6:45am. “I only work
out when my kids are
sleeping. I’d feel guilty after
being gone all day at work if I
didn’t spend time with them
when I got home.”

What does Angela’s husband
of six years, Justin, think of
her achievements? Justin is
very proud of me and knows I
am capable of accomplishing
anything I put my mind to” she
says. Talk about setting an
example of healthy priorities
and fitness—Angela is an
inspiration for all of us.

Amy Mansfield—New Employee

Welcome to Amy
Mansfield—she joined the MI
Case Management Team at the
beginning of October. Born in
Colorado Springs, but raised,
and living in Adrian, she
graduated from Adrian High
School. Amy received a
Bachelors in Psychology from
Siena Heights University, and
has an Associates Degree in
Child Development. She is
currently pursuing her Masters
Degree in Social Work from
Eastern Michigan University
with a concentration in mental
health and clinical
dependence. She will graduate
in May 2014.

Amy’s work background to
date has mostly been in foster
care—a private foster care
agency and then in July 2012
she worked at Monroe CMH
in their foster care program.
Amy still plans on practicing
PMTO, in fact she just
finished training, and is
completing her internship in
the Children’s Dept. at
LCMHA.

Amy is very much looking
forward to working with a
different population. She said
that everyone has been very
welcoming and helpful, and
she can’t wait to “get her feet
wet!”

Amy has been married to
Chris for four years. He is a
teacher and football coach at
Morenci Schools. She is very
much a sports fanatic, but
when she is not watching
football or playing golf, she
enjoys traveling to exotic
locations (she just got back
from a six day cruise). Family
and friends, and her two dogs
are very important to her. She
is very close to her younger
brother, Ryan, who is an MSU
grad. A lot of the summer
time is spent on their pontoon
boat at Clark Lake.

Welcome—Amy!
EIGHTH ANNUAL TRAINING & RECOGNITION FORUM FOR DIRECT SUPPORT PROFESSIONALS

Thanks to Bill and Barb Ross, this year’s Forum was a great success. The day, which is dedicated to staff who work directly with consumers with developmental disabilities and mental illness, saw presentations which included:

- Sensitivity Training—the Hope Center; a history of the Brenda Ross Fund;
- Sign Language demonstration, Christine Seager; How to Stretch your Income, Julie Laughlin; videos and discussion by Michael Bray (DDI Wayne State University);
- the Brain Gym—Bonnie Tuckerman, LISD Occupational Therapist;
- Grandmother’s Rules by Frank Dick.

The 2013 Scholarship Award went to Marcus Perez (top left); Exemplary Service Award went to Sue Wanke—Special Education Teacher (middle left) and the Compassionate Leadership Award was presented to Mary Ahearn, Christ Centered Homes (bottom left).

Outstanding Direct Support Professional Awards were presented to Pam Dillard (Renaissance Community Homes) (top right), Sharon Spooner (Goodwill) middle right, and Jennifer Elam (Christ Centered Homes) bottom right. Congratulations to all those who received awards, and those who did not—who work tirelessly, with great compassion every day to make the lives of so many be worthwhile and enjoyable.

LCMHA SUICIDE PREVENTION INITIATIVE

“Suicide has no boundaries. Individuals everywhere—of all ages, ethnic groups, incomes, and sexual orientation—attempt and die by suicide. Some populations, however, have higher rates of suicidal behavior than others.” Suicide Prevention Resource Center.

If you work in corrections, juvenile justice, the military or a veterans organization, if you are part of a faith based organization, programs that serve older adults, EMS or firefighters, schools or youth serving organizations, the Suicide Prevention Resource Center (SPRC) has toolkits and other resources available with information specific to your population for addressing suicide prevention. There is even information specific to the workplace. These resources can be found at www.sprc.org in the section “For Professionals”.

As part of our suicide prevention strategic plan, LCMHA is promoting awareness throughout the community. Additionally, we are providing training for members of the community to recognize the warning signs, encourage help seeking and even equip them with the skills needed to intervene. Our hope is that this information/training is accessed throughout the whole community and particularly the populations referenced above. If you are interested in getting involved or learning more contact Customer Services at LCMHA—263-8905. We will have more information in future Grapevines.
UPCOMING EVENTS—HOPE AT THE CROSWELL

On Saturday, October 26th consider attending the Not-So Late Show at the Croswell. This is a benefit for the HOPE Community Center. The Not-So Late Show highlights the gifts and talents of people with disabilities alongside other community performers in music, art, drama, comedy, dancing and more. This year’s guest host is Stephanie Jass, who is a 7-time champion record holder on the TV show Jeopardy! Performances include a rapid calculation and memory whiz with savant skills who challenges our Jeopardy Champion to a quiz game, a trumpet player with one arm, and a live host band with internationally known musician and producer Ben Gowell (with HOPE’s Executive Director on drums). Check out these videos: http://youtu.be/ TNeq8H2n4r8, http:// www.youtube.com/watch?v=ppOpC04Brw&feature=youtube To purchase tickets go to www.croswell.org.

Tony Checks Something Off His Bucket List!

Tony Louden is living proof that living with a disability does not have to limit activities in any way!

After a visit to Skydive Tecumseh and a subsequent check on their Facebook page, he saw a video contest to win a skydiving experience. Immediately Brian, Travis and Will (Goodwill) set about making a video to submit for the contest. After two weeks of voting, with the help of many friends, acquaintances and family members, Tony won the contest with about 1200 votes! Skydive Tecumseh actually ended up changing the rules, and the top 3 vote getters won a 14,000’ skydive.

When the “big day” came Tony was disappointed that it was raining, and his jump was postponed. But Saturday September 21st was bright and sunny and preparations began, and he took to the air at about 3:30pm in a PAC750 twin-engine plane. Even though he was terrified and exhilarated at the same time, it helped that he was strapped to Dave—a professional skydiving instructor. The jump lasted about 20 minutes and all went smoothly with a gentle landing. Even though he had parasailed before, he said that this was a lot scarier! Asked if he would do it again—he said, “time will tell!”

As an added bonus, Tony’s mom (Kathy) went with him and jumped too. She wasn’t going to, but got talked into it at the last minute.

You can see Tony’s skydive in its entirety at: http:// www.youtube.com/ watch?v=sn7euOhOljk&feature= ..., overview&list=UUdyHI0r -M8E_Od8vueQjOXg

Family Medical Center—
GROUNDBREAKING EVENT

On Thursday, September 26th there was a groundbreaking ceremony (old Clubhouse site) for the new Family Medical Center, which will be due for completion in 11 months. Pictured at right are members of the Family Medical Center Board along with Greg DuMars, Mayor of Adrian, and Burt Fenby of Community Action Agency.
**Influenza (“flu”) is a contagious disease that spreads around the United States every winter, usually between October and May.**

Flu is caused by the influenza virus, and can be spread by coughing, sneezing, and close contact.

Anyone can get the flu, but the risk of getting flu is highest among children. Symptoms come on suddenly and may last several days. They can include:

- Fever/chills
- Sore throat
- Muscle aches
- Fatigue
- Cough
- Runny or stuffy nose

Some people can get much sicker than others. These include young children, people 65 and older, pregnant women and people with certain health conditions—such as heart, lung or kidney disease, or a weakened immune system. Flu vaccine is especially important for these people, and anyone in close contact with them.

Flu can lead to pneumonia, and make existing medical conditions worse. It can cause diarrhea and seizures in children. The flu vaccine is the best protection we have from flu and its complications. It also helps prevent spreading flu from person to person.

There are two types of influenza vaccine:

- **Inactivated**—which does not contain any live influenza virus. It is given by injection with a needle, and often called the “flu shot”.
- **Live, attenuated**—(weakened) influenza vaccine is sprayed into the nostrils.

The vaccine is recommended every year. Children 6 months thru 8 years should get two doses the first year they get vaccinated. Flu viruses are always changing, and each year’s vaccine is made to protect from viruses that are most likely to cause disease that year. While flu vaccine cannot prevent all cases of flu, it is the best defense against the disease. It takes about 2 weeks for protection to develop after the vaccination, and protection lasts several months to a year. A “high dose” vaccine is available for people 65 years of age and older.

You should not get the vaccine:

- If you have any severe (life-threatening) allergies. If you ever had a life-threatening allergic reaction after a dose of flu vaccine, or have a severe allergy to any part of this vaccine, you may be advised not to get a dose. Most, but not all, types of flu vaccine contain a small amount of egg.
- If you have ever had Guillain-Barre syndrome (a severe paralyzing illness, also called GBS). Some people with a history of GBS should not get this vaccine. This should be discussed with your doctor.
- If you are not feeling well. They might suggest waiting until you feel better. But you should come back.

There is a chance with any vaccine or medicine, of side effects. They are usually mild and go away on their own. However, if there is a serious reaction such as hives, swelling of the face and throat, difficulty breathing, a fast heartbeat, dizziness or weakness, call 9-1-1 or get the person to the nearest hospital.

US Dept of Health & Human Services (CDC) Vaccine Information Statement 7/26/13 42 U.S.C § 300aa-26

Vaccines are available at local pharmacies and primary health care providers

The Health Department has clinics scheduled for:

- October 11 from 1pm—4:30
- November 8 from 8am—11:45am
- November 22 from 1pm—4pm

Cost is $30 (can bill Medicaid and most Medicare plans)
Expectations Determine Results

“The counselor, doctor, or teacher also holds beliefs about a person’s ability to change, and these beliefs can become self-fulfilling prophecies. In one study conducted in three different alcohol treatment programs patients identified to staff as having a high potential for recovery (but who in fact had been chosen at random) were significantly more likely to be sober and working a year after discharge. Perceived prognosis influences real outcomes. Motivational Interviewing, 2nd Ed. Miller & Rollnick 2002, p.6

In the old maintenance model of mental health, the expectation was that a person would be on medication for life, and that recovery would not be possible, especially for certain forms of mental disorders. There was a narrow definition of “recovery”. Now we know that all people can learn and grow. We acknowledge the limitations and barriers but we also have hope that all who come to CMH for services can be helped in some ways to meet their goals if they also have hope and willingness.

In the Substance Use Disorder world, dramatic and complete recovery is commonplace, consisting of steady improvement in all areas of life, especially in the first two years as the brain heals. In fact the Big Book of AA says, “rarely have we seen a person fail who has thoroughly followed our path. There are those, too who suffer from grave emotional and mental disorders, but many of them do recover if they have the capacity to be honest.” Alcoholics Anonymous, 2nd Ed. P.58

For the approximately 70% of our people who are co-occurring, meaning having both mental illness and substance use disorder, if they stop using drugs and/or alcohol with their medications, they can also expect significant recovery. Medication will be more effective. We know that alcohol and other drugs can actually cause depression, anxiety, mood swings and hallucinations. When these drugs are taken out of the picture, some of these symptoms may subside enough that the psychotropic medications may be reduced or become unnecessary. (These measures should always be discussed with your doctor).

Dependence on “the system” fears of success and/or failure, negative relationships, lack of support, and complacency can be significant barriers, but no barrier is greater than the absence of hope.

In the presence of hope, one can use dissatisfaction as a motivational tool. For example, the person who is caught in the legal system can use their resentment at “being forced into treatment” as energy directed toward positive action. They can use this energy to overcome the barriers and take steps that will lead them to more independence and freedom of choice in their lives.

A person’s goals, hopes and dreams take root when there is hope. An invitation, a challenge, a positive expectation is not the same as ignoring reality. It is the opening of the door to the possibility and the creative influence of power greater than us. It is the celebration of small achievements based on wishes for a better life.

In closing, here is another great quote from Motivational Interviewing, p.3: “There is one elementary truth, the ignorance of which ills countless ideas and plans; that the moment one definitely commits oneself, then providence moves too. All sorts of things occur to help one that would never otherwise have occurred. A whole stream of events issues from the decision” Johann Wolfgang von Goethe.

Nilaine Gordon is a Peer Support Specialist at LCMHA

Diana Webster Retires from LCMHA

We said “goodbye” to a long-time employee on July 19th.

Diana Webster retired from CMH after 33 years. During her tenure she had many different administrative duties and also served in many different locations over the years.

Staff celebrated with a lunchtime farewell party. We all join to wish her a long and happy retirement.
Mission statement:
To promote positive outcomes by creating a path to resilience, recovery, wellness and self-determination

Lenawee Community Mental Health Authority is a member of the CMHSP of SE Michigan

USEFUL WEBSITES:
www.braingym.org—enhancing the science of movement
www.redcross.org—disaster and emergency preparedness
www.suicide.org—Suicide Prevention and help
www.sprc.org—Suicide Prevention Materials
http://www.hopecenterlenawee.org/fundraisers.html—Hope Center
http://www.cdc.gov/vaccines/-CDC

Congratulations to Kay Ross—Customer Service Representative, who was presented with an award for 25 years service at CMH by Vice Chair, Judy Ackley at the September Board Meeting.

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

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www.sprc.org—Suicide Prevention Materials
http://www.hopecenterlenawee.org/fundraisers.html—Hope Center
http://www.cdc.gov/vaccines/-CDC

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