Volume IV, Issue 2 March - April, 2003



Community Mental Health

Save This Date! Richard Prangley, whose story is told in the compelling book by John Schneider, titled "Waiting for Home - A True Story of Strength and Survival" will speak Tuesday, May 6, 2003 at 6:00 p.m. The first

50 participants to arrive will receive an autographed copy of the book.

LCMHA will also be holding their annual community needs assessment. Refreshments will be provided. For more information, call Customer Services at (517) 263 - 8905.

MAY

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Note: The next publication of the <u>Grapevine</u> will focus on issues related to children and their mental health needs. If you have items you would like to contribute or see covered, please contact Gratia Karmes at (517) 263 -8905.

Jessica's Story

ight years ago I
became depressed,
two years ago I was
diagnosed with Major
Depression, and five years ago
I attempted suicide, which
landed me in the ICU. You
may have heard these
statements or something
similar. Even though these
statements are upsetting, they
are rarely surprising. Would it

surprise you to know I'm only eighteen?

e Company

Although many adults have a

mental illness, children and adolescents with mental illnesses are often overlooked. Parents, teachers and other adults often blame symptoms of a mental illness on hormones, or a "phase." Those who are lucky have someone who understands what is happening and can help them.

My problems began after my grandfather died. It's easy to understand why people would blame his death for my depressed mood. What is hard to understand is that it took me two years to get help. I was diagnosed at age twelve after eight days in a psychiatric hospital. The following year I attempted suicide; I remember little, due to the drugs I had overdosed on.

After three long years, my school acknowledged my illness and labeled me Emotionally Impaired. I started eighth grade at the - by Jessica Perez, a member of the Anti-Stigma Speaker's Bureau

Laura Haviland Program for E.I. students. I spent the next three and a half years there, attending off and on. There I met people whose words will forever stay with me.

I've come far in eight years.
Getting there was hard, and many people helped me. A mental illness isn't something you can overcome by yourself.
So with that I offer a few words of wisdom: talk with your children, notice if their personality or school work changes drastically, and don't hesitate to get help. Two years is a long time to wait.

Mental Health Awareness

he Regional Mental Health Awareness Month Committee will hold a conference entitled COMMUNITY MENTAL HEALTH - 40 YEARS OF SERVICE on May 16, from 9:30 a.m. to 12:00 noon, with a repeat from 1:00 - 3:30 p.m. Guest speaker LeRoy Spaniol will talk about recovery for cooccurring disorders. David LaLumia from the Michigan Association of Community Mental Health Boards will provide a history of community mental health, and a panel will discuss mission, history, and services of local clubhouses and drop-in centers. The conference takes place at St. Joseph Educational Center in Ann Arbor. Call Customer Services (517) 263 - 8905 for registration information.

A Word With The **Director**

he financing of community mental health has often been characterized as a theme park thrill ride. Our current state budget and the projected 2003-2004 budget is no exception. Early in our current budget year, we were made aware of the dire financial constraints of the state budget. We were told to expect severe reductions at some point during the year. Not knowing just when to expect those reductions, we held our breath - much like the slow ride to the top of the roller coaster - wondering how steep the drop was going to be on the other side. Meanwhile, we were expected to continue "business as usual". The problem with that approach was that the further into the coaster ride we got, the less time we had to make any necessary financial adjustments. In other words, we knew the financial impact of the reductions would likely exceed the period left in the year to actually put the reductions into effect.

It was the middle of the second quarter that we received word of the *first* Executive Order reduction. For LCMHA it meant \$301,594 on a "full year" basis, and \$185,923 had to be cut immediately. The management team and board considered many options including reductions at the administrative, clinical support and direct service levels. The Executive Order was generally

not specific in terms of where we had to make the reductions,



Executive Director Roger Myers

except for the respite services that were funded by the state from its Tobacco Tax revenue - all community mental health boards across the state were

ordered to reduce their budgets by whatever Tobacco Tax revenue they had previously been awarded. Having already reduced administration to an all time low by flattening our organizational structure (we have almost no mid-level supervisors and boast one of the lowest administrative rates in the state) and with clinical support caseloads at maximum levels, we really had no place from which to take the reductions other than direct services.

The budget reduction strategy we finally adopted included the Tobacco Tax respite service, a reduction in community integration and job skill training service hours (affecting 138 consumers), a reduction in the number of authorized hours of support for consumers living in apartment settings (affecting 22 consumers), a reduction of the amount of authorized mentor services (affecting 20 consumers) and an across the board reduction in specialized residential services contracts (affecting 98 consumers). With these reductions, we had crested that first big hill of the thrill ride - and as we looked ahead we were told to expect a

second round of Executive Order reductions within a few weeks. As with many roller coaster rides, that news was like the dark tunnel at the bottom of the hill. We had no idea what awaited us.

Based on the assumption that the second round of reductions would be at least as severe as the first and since the coaster ride was still in progress, eating up precious time in which we could effect the reductions once they were announced, the management team and board decided that the closing of one of our specialized residential homes would be the most feasible response. However, much to our surprise and delight, the community mental heal system was spared reductions in the second Executive Order. So. the dark tunnel at the bottom of the first hill was not so dark after all.

The next hill on the budget thrill ride was the 2003-2004 budget. Given the 1.7 billion dollar deficit reported in the state budget, we expected Governor Granholm to propose further reductions in the Department of Community Health appropriation which would trickle down to the community mental health board level. As our thrill ride car dropped over the hill, we discovered that the other side may not be as steep as expected! In fact, Governor Granholm's budget recommendation appears to protect essential services to Medicaid beneficiaries and to persons with physical disabilities, serious mental illnesses and developmental

disabilities. Details will emerge over the next few weeks and months as the budget is debated. Our readers will be kept appraised of the budget picture as quickly as we receive information. Meanwhile, copies of the actual appropriation bills can be accessed on our website, (www.lcmha.org) link to the Michigan Association of Community Mental Health Boards, www.macmhb.org.

I think I'll pass the "opportunities" to spend time at Cedar Point this summer!

Of Interest To Our **Providers**

n March 14, LCMHA Providers (agencies with whom we contract to provide various services to our consumers) gathered for a Provider



Training. They also were treated to a presentation by members of the LCMHA Recovery Panel.

■ A Reminder to Providers of Individual Therapy:

The initial authorization for services covers the development of a treatment plan. Requests for authorization for additional sessions must be accompanied by a Treatment Plan.

Lenawee County FAS Community Project

he Lenawee County FAS/FAE Advisory Committee is very active. So far this year the members have spoken to 15 different audiences about preventing Fetal Alcohol Syndrome / Fetal Alcohol Effects and recognizing the **C** note pads to students every syndrome and its effects in those we serve. Our efforts appear to be paying off. When we approach businesses about posting warn-ings, they already understand the importance of our message.

This year we discovered a new way to spread our prevention message. Middle school and high school students in our area love to pass notes on 'Post-its". We had our symbol "ghosted" on neon post it notes and are handing out Post it chance we get. Every time a student writes a note and passes it on, our message, "Alcohol and Pregnancy Don't Mix", is being passed on as well.

each parent received "All I Can Be: living with Fetal Alcohol Syndrome or Effects" by Liz and Jodee Kulp. This is the most practical book I have found. One teen sat down and started reading it right at the Christmas party. She said "This is my life." The book has been a real hit. If you would like to check it out, visit www.betterendings.org. Our parents say you'll find it very helpful. For more information, contact Jackie Johnson at jjohnson@lcmha.org or (517) **265** - **6976**. ■

Our parenting support group is

small but strong. This year

checking our email for . . .

"NEWS FROM NAMI"

From: enews@maillist.nami.org

Wednesday, March 12, 2003 3:15 PM Sent:

jim@enich.com To:

Subject: NAMI Issues Statement On "Medicaid

Malpractice"

NAMI has issued a statement and press release entitled "Medicaid Malpractice - States Put Patient Recovery At Risk By Restricting Prescription Drugs." The statement expresses strong concerns about policies either being instituted or considered in 45 states to restrict access to psychiatric medications in state Medicaid programs. The statement also describes NAMI's 10 point policy for federal and state action to prevent these "penny wise but pound foolish" restrictions.

"These ten points call for Federal and state action," said Michael Fitzpatrick, director of NAMI's Policy Research Institute (NPRI). "In too many cases, current state initiatives to control drug costs are penny wise, but pound foolish. Too many times in the past, people with mental illnesses have been neglected or abandoned - at a terrible cost. As a society, we know how to treat mental illnesses, but too often, the investment is too little, too late."

For the complete text of this press release, contact jim@enich.com ■

Employees Honored

wo LCMHA employees were honored recently at the February Lenawee Community

Mental Health **Authority Board** Meeting. Sally Dickson, who is our fiscal services manager, was

honored for 26 1/2 years of



service to the community mental health organization; and Deb

Strayer, our accounting manager, was honored for 25 years of service.

Reminder

nvone interested in becoming a facilitator or if you would like to learn how to facilitate your own PCP, sign up for the April training by calling Customer Services, (517) 263 - 8905.

Support Groups

- Stop Smoking Support **Group:** LCMHA now has a Stop Smoking Support Group which meets every Thursday morning from 10:00 to 11:30 a.m. We are here to give you support while you are trying to quit smoking and to help you stay smoke free. Tell your friends about this group!
- Military Family **Support Group:** This group is available to anyone who has a family member in the Armed Forces. We meet at the American Red Cross on Toledo Street every Tuesday from 5:30 to 6:30 p.m. Pass the word along to anyone you know that could benefit from this group.
- Each Thursday afternoon, our support group for **Persons with Anxiety** (1:00 p.m.) and our support group for **Persons with Depression** (3:30 p.m.) continue to meet at the Human Services Building.

If you have an issue or concern that you would like to see addressed in a Support Group, please contact Customer Services (517) 263 - 8905.

If you do not wish to have future newsletters mailed to your home, please notify:

> **Customer Service** 1-800-664-5005

Update

he current Speechcrafter class is a wonderful, diverse group of individuals who are coming together to learn the best way to give presentations so they can go out into the community and help FIGHT STIGMA! A total of 9 participants are working very hard on their speeches each week. This group will be graduating on April 11. Watch the next newsletter for their graduation stories.

We have been asked to do a presentation at the Michigan Community Mental Health Board Association Conference in May. If you would like to participate in a class, call Customer Services (517) 263 - 8905 for details.

Staff Spotlight

- by Kay Ross

lmost a year ago, Sandy Geyer, ACSW, ORR, came to LCMHA. Sandy is the full time Recipient Rights Officer

for LCMHA. Employed by the "Hub" (WCHO), her permanent office is in our building.



Sandy has had a long history in the mental health field. She was inspired by her cousin to first attend college to become a Speech and Hearing therapist, but changed her major to Social Work while in school.

Sandy has worked at many different positions which have given her a good perspective on the work she now does as a Recipient Rights Officer. She is a clinical social worker, and at one time maintained a private practice working with abused and delinquent girls. She has worked in group homes with MI/DD children and adults, has done crisis intervention for a Crisis Hotline, and has worked as a clinical coordinator and therapist in an inpatient psychiatric unit. She was the supervisor of Washtenaw Access Services before taking her current position.

Sandy has interesting hobbies. She grows meal worms to feed bluebirds and also does worm composting. She loves movies and books, with science fiction and mysteries being her favorites. Her loves also include Piper, a Cairn "Terror" (oops . . . Terrier), and Ivy, a miniature schnauzer. Both puppies are 6 months old and Sandy always has a smile when she talks about them.

Sandy says the Recipient Rights position is "very different from what I've done . . . my clinical background helps me in this job. I like having contact with staff and recipients and being able to do a lot of informal problem solving." Her least favorite thing is dealing with rules and regulations.

Sandy is a welcome addition to the LCMHA staff. If you ever have questions, she is always glad to talk with you.



Community

Mental Health

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