Volume VII, Issue 3 May - June 2006



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Community Mental Health

authorit

Save The Date!

ome join the fun at the Walk A Mile In My Shoes Rally at the State Capitol Building in Lansing on Thursday, May 25, 2006! The rally takes place from 10:00 to 11:30 a.m.

Maybe you were wondering why we walk. Here are just a few of the reasons:

- Because May is Mental Health Awareness month
- To enhance public awareness
- Because legislators need to know that Mental Health Matters
- To put an end to the stigma related to mental illness and developmental disabilities
- Because Michigan does not have parity between mental

health and physical health care coverage.

• To promote mental health and wellness.

To get involved, contact LCMHA Member Services at (517) 263 - 8905. ■

Mental Health Month

LCMHA HOLDS ANNUAL CELEBRATION

he annual Lenawee Community Mental Health Authority Mental Health Month Celebration will be held on Wednesday, May 31, 2006

from 8:30 a.m. to 1:00 p.m. at the First Church of the Nazarene, 50 Industrial Drive, Adrian,



Bev Cobain is a Registered Nurse with credentials in psychiatric/mental health nursing. Her own struggle with depression and the suicides of three family members - most recently the 1994 death of her young

Can't Make Lansing?

local Walk A Mile In My Shoes Rally will be held on Tuesday, May 23, 2006. We will organize and leave at 3:00 p.m. from the LCMHA offices at

the Human Services building and walk to the Old Court House where we will hold our rally.

All are welcome to participate. (Why not join us for both?) Call Kay Ross / Member Services for more information; (517) 263 - 8905. ■

cousin, Kurt Cobain, front man for the band Nirvana - ignited a passion in Bev to educate professionals, lay persons, and youth about depression and the significant public health issue of suicide.

Her desire to educate resulted in her writing the acclaimed book "When Nothing Matters Anymore: A Survival Guide for Depressed Teens". She has also developed the Living Matters web site to provide an additional avenue to share her knowledge and experience of youth depression and suicide. There will be time for book signing, and they will be on hand for purchase, courtesy of Walden Books.

The special day will also include a presentation on Dual Diagnosis Recovery and culminate with the presentation of the Fourth Annual Lori Sallows Anti-Stigma Award - developed to honor persons or organizations who have made an outstanding contribution in community education about mental illness and developmental disabilities and the elimination of stigma and the barriers it creates. Nominations close May 12, 2006. A nomination form can be found on Page 7 of this newsletter, or by going to www.lcmha.org.

Lunch will be provided. For more information or to RSVP, call LCMHA Member Services at (517) 263 - 8905. ■



Member Services

ember Services is your link between you, your community mental health system, and your community. Listed below are some of the things Member Services staff can help you with:

- Understanding the Mental Health system
- Questions about your benefits
- Information on how to get and/or pay for services
- Concerns about your care or about staff
- Filing a Grievance if you are not satisfied with your services/ supports
- Your appeal rights
- Your rights as a mental health or substance abuse consumer
- Learning ways to advocate for yourself (Self-Advocacy)
- Information on how the organization runs or is structured
- Making sure you get information in ways you can understand, including a certain language or format
- Learning ways you or your family can have a voice and be a part of how our region does business.

There are many other ways Member Services can be there for you. Please contact us at: **Member Services** 1040 S. Winter St., Suite 1022 Adrian, MI 49221 Phone/TTY: (517) 263 - 8905 Toll Free: (800) 664 - 5005 Fax: (517) 265 - 8237 www.lcmha.org

A Word With The Director

ay is recognized throughout Michigan, and indeed throughout the nation, as "Mental Health Month". Here in Lenawee County, of course, we really take celebrating

seriously! In fact, we have so many events planned, that they spill over into June.



In this issue of the Grapevine, you will see articles inviting you to participate in our local "Walk A Mile In My Shoes" rally, and also a state-wide

event of the same name, a Provider Fair - at which all of our network providers will share their information (and lots of fun stuff), and the big event - the Mental Health Month Celebration on Wednesday, May 31.

We have a wonderful speaker, Beverly Cobain, who will give a presentation on suicide, its prevention, and the impact on family. At that event, we will hear from speakers who have been successful in "Dual Diagnosis" recovery. We will also honor the latest recipient of the Lori Sallows Anti-Stigma Award. Please go to the nomination form on Page 7 and

use it to tell us who YOU think should be recognized.

We hope you will plan to join us. Space is limited, so call Member Services at (517) 263 - 8905 and let us know you are attending.

The Mental Health Month Celebration and the other events being planned all add up to our yearly effort to recognize the hard work of our staff and partners, and most of all the wonderful stories, accomplishments, and messages of hope we hear from our consumers.

LCMHA Presents . . .

DR. SCOTT SHEPERD. Ph.D.

wonderful treat is in store for those who attend a special presentation on June 16, 2006 from 1:00 - 3:00 p.m. The presentation by Dr. Scott Sheperd will take place in the River Raisin Room at the Lenawee Human Services Building, 1040 S. Winter Street, Adrian.

Dr. Sheperd uses a humorous, nontraditional approach to focus on stress. He challenges people to accept responsibility for their own lives, and gives them strategies to improve their quality of life. Drawing on his experience of over twenty-five years of working with people in difficult situations, ranging from terminal illness to highpressure jobs, Dr. Sheperd says; "I feel my job as a speaker is to give the audience something they can use, and give it to them in a way they will enjoy."



Dr. Sheperd is the author of:

- Who's In Charge? -Attacking the Stress Myth
- What Do You

Think Of You? - on self-esteem for young people and their parents

• The Survival Handbook for the Newly Recovering - a focus on substance abuse.

Space is limited. There is a \$10.00 charge and prior registration is a must. Checks should be made payable to: Lenawee Community Mental Health Authority and sent to ATTN: Kay Ross, Member Services, 1040 S. Winter Street. Suite 1022. Adrian, MI 49221. ■

> Priends ... lift our spirits, keep us honest, stick with us when times are tough, and make mundane tasks enjoyable. No wonder we want to make friends.

> > - Em Griffin

Your Personal Health Information

FIVE THINGS YOU SHOULD KNOW

our personal health information is a valuable resource to you, your family, and the doctors, nurses, and other healthcare professionals who provide your treatment and care. This year, to observe **Health Information Privacy** and Security Week in April, the health information management (HIM) professionals at Lenawee Community Mental Health Authority have outlined five things you need to know about your personal health information.

- 1. Each of your healthcare providers compiles a separate medical record on you. This means your complete history probably cannot be found in any one place. By keeping your own personal health record (PHR), you can provide your doctors with valuable information that can improve the quality of care you receive. A PHR can help reduce or eliminate duplicate tests and allow you to receive faster, safer treatment and care in an emergency.
- 2. Federal laws are in place to protect the privacy of and to give you access rights to your health information. Under the Health Insurance Portability and Accountability Act (HIPAA), you can view, request changes to, and obtain copies of health information documents collected and kept about you.
- 3. Your information can only be seen by those who need it in order to provide your treatment, to facilitate payment

for healthcare services, and to make sure quality care is being received. Your information may also be used for research and as a legal document in cases where evidence of care is needed. Anyone else who wants to use it for any other purpose needs your permission first.

- 4. The healthcare industry and the federal government are working to improve healthcare through the use of information technology. This is done through the use of electronic health records (EHR) and a secure system that would allow EHRs to be shared across healthcare systems and providers to allow you greater access to your health information. Currently, most healthcare providers still manage medical records in a paper format.
- 5. At healthcare organizations across the nation, health information management professionals are working to maintain your health record. These professionals are responsible for ensuring your health record is accurate,

complete, confidential, and available when you, your doctor, and other healthcare professionals need access to the information.

AHIMA is the premier association of HIM professionals. AHIMA's 50,000 members are dedicated to the effective management of personal health information needed to deliver quality healthcare to the public. Founded in 1928 to improve the quality of medical records, AHIMA is committed to advancing the HIM profession in an increasingly electronic and global environment through leadership in advocacy, education, certification, and lifelong learning. For information about the association, visit www.ahima. org.

For questions regarding your personal health information, contact: Melinda Perez, RN, Medical Records Supervisor, or Darcy Niblack, CCA, Medical Records Supervisor at (517) 263 - 8905.

Welcome

aula Lozano-Jones is our newest employee.

Paula began work in January as a Supports Coordinator Assistant. In the past she has



done employee training for migrant and seasonal farm workers. She is married, has three children and three grandchildren.

Welcome aboard, Paula! ■

Community Food Drive

aturday, May 12, 2006
is the day set for the
New Focus Clubhouse
Third Annual Community Food
Drive. Nonperishable food and
cash donations will be collected
at Country Market, 1535 W.
Maumee Street, Adrian between
9:00 a.m. and 1:00 p.m. All
items collected will be given to

WLEN will be doing a remote live broadcast on-site. We thank the following sponsors for making this possible:

• Carter Rehabilitation Clinic

local food pantries.

- Lenawee Community Mental Health Authority
- TLC Community Credit
- Shamrock Development Corp. Please consider volunteering for this event or making a donation. Contact Carol W. or Bob W. if you have questions (517) 263 3577. Let's make this our best food drive yet!

Your Opinion Counts

onsumer Surveys were sent out on March 31, 2006. If you did not receive one, please call Jackie Johnson at (517) 263 - 8905 or stop by the LCMHA front desk to pick one up.

We truly appreciate your input, and value your opinion.

NOTE: If you have moved recently, please contact us with your current address.

Mental Illness And Stigma

COPING WITH THE RIDICULE

ou've probably heard the words tossed out loosely, without a care - words like "psycho", "schizo" and "wacko." Or you've seen the jokes on television about "loony bins" and characters in straightjackets. You might even have read about the government official who quipped that a congressman must be "off his meds and out of therapy."

But if you or a loved one has a mental illness, you know that these words and gimmicks aren't just harmless fun. Rather, they perpetuate the stigma attached to mental illness. Stigma is painful and shaming, but you can both cope with it and combat it.

Stigmatizing mental illness begins with a label

Stigma is a mark of disgrace or shame. It has four components:

- Labeling someone with a condition
- Stereotyping people with that condition
- Creating a division a superior "us" group and a devalued "them" group, resulting in loss of status in the community
- · Discriminating against someone on the basis of their label

Labels aren't always negative, though. In health, for instance, a diagnosis is, in essence, a label. A label can offer

reassurance that your condition has a medical cause, and it can help steer you toward appropriate treatment. Labels don't always trigger stigma. In fact, many illnesses are gaining broad acceptance, with survivors and advocates taking part in fundraising events or proudly wearing ribbons or wristbands to show their support. Breast cancer is a shining example. Survivors are no longer stigmatized, but rather celebrated and honored.

But some illnesses remain on the social fringe - shunned, mocked, disrespected and discredited. For many people, being diagnosed with a mental illness is akin to wearing a scarlet letter, an invitation for scorn and disdain.

Stigma fuels inaccurate perceptions of mental illness

Why do mental illnesses continue to be stigmatized? For one thing, the term "mental illness" itself implies a distinction from "physical" illness, although the two are intimately entwined. In fact, neuroimaging studies show physical changes in the brain associated with mental disorders, suggesting a biological basis. Some mental health advocates propose switching to less stigmatized terms, such as behavioral health or brain disorders or brain illnesses.

To some, "mental" suggests not a legitimate medical condition but rather something that results from your own doing and your own choices. People may blame you and think

your condition is "all in your head." They may think that mental illness is an indication of weakness or laziness - that you're a "moral failure" or simply "can't cut it" - that you should just "get over it."

Some people also believe that if you have a mental illness, you must be dangerous and unpredictable. This perception is often inflamed by media accounts of crime, although statistics don't bear out a connection between mental illness and violence. Some people also believe that those with mental illness are less competent, unable to work, should be institutionalized or will never get better.

As a result of such stigma, mental illnesses remain the butt of jokes in popular culture. Negative portrayals of people with mental illnesses fuel fear and mistrust and reinforce distorted perceptions leading to even more stigma.

Celebrities help erase the stigma of mental illness

Not all the news is bad, though. Today, the stigma surrounding some mental illnesses is slowly eroding. That's due in part to greater public understanding of mental disorders and the biological basis that many of them have.

Celebrities who openly discuss their mental illnesses or write books about their experiences increase public awareness and help make it easier for others to reveal their struggles with mental illness.

Don't let stigma create selfdoubt and shame

In the face of insensitive comments or crude advertising gimmicks, it may be difficult to feel good about yourself. Remember that you have a medical condition, that it's not your fault and that effective treatments are available. Try not to feel shamed, embarrassed or humiliated if someone knowingly or unknowingly ridicules your illness. Therapy may help you gain self-esteem and put less stock into what others think of vou.

And if you're comfortable enough to speak up, you may be able to help educate people about the hurt that can result from stigmatizing mental illnesses. The tide is slowly turning.

- excerpted from msn.com "Health and Fitness" 3/20/06

It is uniqueness that gives freshness and vitality to a relationship.

- James Dobson



Contest Winner

n the March-April 2006 issue of the Grapevine, we held a contest to gather ideas on ways to encourage consumers to call ahead if they cannot make their appointment with the Doctor, or ways to help people remember appointments, to make rescheduling easier,

and to use the time that comes up when people don't show for appointments or have to reschedule.

Congratulations go to David Orozco, who won a \$25.00 gift certificate to Meijers. You will see his idea at left.

From time to time we like to include contests in our newsletter and give away prizes. If you have an idea for a contest or a prize, contact Member Services with your suggestion.

Be sure to do the puzzle below and send it in to Member Services, ATTN: Kay Ross. You too could be a winner!

N	Q	P	Н	E	A	L	T	н	Y	K	L
A	L	E	E	W	A	N	E	L	U	С	P
E	В	M	0	L	A	В	S	E	E	0	E
V	Т	M	X	L	N	Z	L	P	F	N	0
ı	P	N	V	U	W	U	Т	Н	K	S	P
Т	0	G	R	Z	D	I	P	0	L	U	L
ı	D	S	D	E	M	Z	P	N	A	M	E
S	Е	S	Н	E	G	V	A	E	R	E	W
0	Y	С	U	M	Н	Q	M	I	P	R	Q
P	S	0	N	D	M	P	K	L	L	S	A
Z	M	E	D		С	A	T		0	N	S

- by David Orozco

PHONE APPT	_ LENAWEE RIGHT MED
PEOPLE LABS	HEALTHY RIGHT DOSE
NURSE MEDICATION	BE ON TIME RIGHT AMOUNT
TIME SCHEDULE	_ WHAT TIME IS IT ALLERGIES
POSITIVE CONSUMERS	_ RIGHT TIME
DR CMH	_ RIGHT ROUTE

All I Ever Needed To

Know

I LEARNED FROM MY DOG

- Sometimes, a bark is worse than a
- bite. • Run, romp, and play every day.
- Don't be afraid to snuggle **up** to someone you love.
- Never pretend to be something you're not.
- When loved ones come home, always run to greet them.
- If what you want lies buried, dig until you find it.
- When someone is having a bad day, be silent, sit close by, and nuzzle them gently.
- Never pass up the opportunity to go for a joy ride.
- Let others know when they've invaded your territory.
- Don't mess with anyone bigger than you.
- Kisses are good . . . even wet ones.
- Play nicely with others, and they'll play nicely with you.
- Stop and smell the roses. .. and dirt, and grass, and fire hydrants, and trees.

- Unknown

Joint Commission 2006 National Patient Safety GoalsFOR BEHAVIORAL HEALTH CARE

■ GOAL 1: Improve the accuracy of patient identification

Requirement 1A: Use at least two patient identifiers (neither to be the patient's room number) whenever administering medications, taking blood samples and other specimens for clinical testing, or providing any other procedures.

■ GOAL 2: Improve the effectiveness of communication among caregivers

Requirement 2A: For verbal or telephone orders or for telephonic reporting of critical test results, verify the complete order or test result by having the person receiving the order or test result "read back" the complete order or test result.

Requirement 2B: Standardize a list of abbreviations. acronyms and symbols that are not to be used throughout the organization.

Requirement 2C: Measure, asses, and, if appropriate, take action to improve the timeliness of reporting, the timeliness of receipt by the responsible licensed caregiver, of critical test results and values.

Requirement 2E: Implement a standardized approach to "hands off" communications, including an opportunity to ask and respond to questions.

■ GOAL 3: Improve the safety of using medications

Requirement 3B: Standardize and limit the number of drug concentrations available in the organization.

Requirement 3C: Identify and, at a minimum, annually review a list of look-alike/ sound-alike drugs used in the organization, and take action to prevent errors involving the interchange of these drugs.

■ GOAL 7: Reduce the risk of health careassociated infections

Requirement 7A: Comply with current Centers for Disease Control and Prevention (CDC) hand hygiene guidelines when providing services to a high-risk population, or administering physical care.

Requirement 7B: Manage as sentinel events all identified cases of unanticipated death or major permanent loss of function associated with a health care-associated infection.

■ GOAL 8: Accurately and completely reconcile medications across the continuum of care

Requirement 8A: Implement a process for obtaining and documenting a complete list of the patient's current medications upon the patient's entry to the organization and with the involvement of the patient. This process includes a comparison of the medications the organization provides to those on the list.

Requirement 8B: A

complete list of the patient's medications is communicated to the next provider of service when a patient is referred or transferred to another setting, service, practitioner, or level of care within or outside the organization.

Note: You might notice that some goals and requirements appear to be misnumbered or missing from the numerical sequence. This is not a typographical error. Some goals do not apply to behavioral health care and therefore have not been included in this article.

It is important that all LCMHA staff understand and be familiar with these goals.

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

Member Services 1-800-664-5005

New Additions To The LCMHA Library

n this column, we plan to update our readers on the new books, tapes, videos, and other materials available for loan. Anyone (staff, consumer, community partner) may borrow these materials at any time.

Currently, we are using the "honor system" (take what you want, but do bring it back!)
If that doesn't work, we will implement a more formal system to check out items.



Lincoln's Melancholy

How Depression Challenged

a President and Evoled His

a President and Fueled His Greatness

By Joshua Wolf Shenk

Reviewed by Gratia Karmes

The Presidency of Abraham Lincoln has always fascinated me. I remember learning the Gettysburg Address as a very young child, and in fact, I can still recite it word for word, if anyone asks. During the Civil Rights movement, the words in this brilliant speech took on great meaning, and I began to really think about the depth of sacrifice of civil war soldiers,

on both sides, the seeming hopelessness of the war itself, and the leadership of President Lincoln during this terrible time.

This book explores not only the darkness of the time, but of the mood and internal experiences of Abraham Lincoln. It is a fascinating look at mental illness, especially depression, as perhaps an asset rather than a disability; in the mid 1800's, "Melancholy" was romanticized, idealized, and poeticized. Did his tendency toward mood swings, his two major "breakdowns", and the treatments he endured

help shift Lincoln's thinking from a search for "personal contentment" to a search for the greater good for humanity? Did this disability actually endear him to the population, and help him get elected?

This book is what I call a "good read". Lincoln's humor, his complicated personal life, and his wonderful words, both written and spoken, are well chronicled here. This and other new works can be found in the LCMHA resource library. Please call Member Services (517) 263 - 8905 for more information.

NOMINATION FORM • Fourth Annual Lori Sallows Anti Stigma Award

The LCMHA Anti Stigma Committee developed the Lori Sallows Anti Stigma Award as a way to honor persons or organizations who have shown an outstanding contribution in community education about mental illness and developmental disabilities, and the elimination of stigma and the barriers it creates.

If you would like to nominate someone for this award, please fill out the form below and return it to Member Services no later than May 12, 2006. Any nominations received after this date will not be considered. For answers to questions, contact Member Services at (517) 263 - 8905. You may also fill out this form online at www.lcmha.org under "Upcoming Events". Please put "nomination form" in the subject line before emailing

Your Name:	Your Phone Number:	Date:				
Person you are nominating:						
Tell why you feel this person/organization deserves the Anti Stigma award.						
You may attach an additional sheet if more space is needed.						

Lenawee Human Services Council presents . . .

Pattie Reynolds

OT

KOLT Communications

"Increasing
Financial Stability
For Your Non-Profit
Organization"

Thursday, May 11, 2006

8:00 a.m. - Noon

Weber Center Adrian, MI

Call Sue Hammersmith (517) 423 - 1729 to register

(Space is limited)

Children's Bill of Rights

- 1.) The right to be **treated** as **important** human beings, with unique feelings, ideas and desires, and not as a source of argument between parents.
- 2.) The right to a continuing relationship with **both parents** and the freedom to receive love from and express love for both.
- 3.) The right to **express love and affection** for each parent without having to stifle that love because of fear of disapproval by the other parent.
- 4.) The right to know that their parents' decision to divorce is **not their responsibility** and

- that they will continue to be loved by both parents.
- 5.) The right to continuing care and **guidance from both** parents.
- 6.) The right to **honest** answers to questions about the changing family relationships.
- 7.) The right to know and appreciate **what is good** in each parent without one parent degrading the other.
- 8.) The right to have a relaxed, secure relationship with both parents without being placed in a position to manipulate one parent against the other.

- 9.) The right to have both parents not undermine the other parent's time with the children by suggesting tempting alternatives or by **threatening** to withhold parental contact as a punishment for the children's wrongdoing.
- 10.) The right to experience regular and **consistent contact** with both parents and to be protected from parental disputes or disagreements.
- from <u>Start Making It Livable</u> <u>For Everybody</u> (a program for divorcing couples). For more information, call the MSU Extension Service at (517) 264 5315. ■



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