



l e n a w e e
**Community
Mental Health**
a u t h o r i t y

GRAPPEVINE

Conversation With A Consumer

- by Kay Ross

Let me take a moment to introduce you to a family who has used LCMHA services . . . a family who has been through many trials, tribulations, turbulence, and turmoil, . . . a family who is allowing their story to be told with the hope of helping others. Come with me and meet the McClain family.

Anthony, age 20, has been coming to LCMHA since the age of seven. He has received many services including Wraparound, Family Preservation, individual and family therapy, and medication services along with other specialized treatments. Currently he is receiving medication and Wraparound services. He attends Jackson Community College and would one day like to be an actor, specifically, a comedian.

"I like to make people laugh . . . when I make people laugh it's the highlight of my day."

Eugenia, his step mom, states that Anthony is a "motivator to his siblings" and Anthony chimes in with "I'm trying to lead them on the right path." He loves to watch Jeopardy and is an ardent Pistons fan.

Leo McClain is Anthony's father. He has been involved with LCMHA through family treatment with Anthony, and also as an individual. Leo tells me that he comes from an abusive family, and that he abused drugs and alcohol himself. He proudly states that he has been in recovery from drugs and alcohol for four years now.

children (4 living in their home), and 2 grandchildren.

Anthony and Leo both like to talk about their experiences with Wraparound. They were Kathryn Szewczuk's first Wraparound family at LCMHA. Wraparound has helped them in many ways over the years, such as helping out financially when Anthony's mom, Lou, became ill from emphysema, an illness that would later take her life. The Wraparound team was there when a fire killed Anthony's brother and destroyed their home.

What is Wraparound? It is not a treatment, but a way of "doing". It incorporates the family as team leader, and mobilizes resources such as mentors,



Leo volunteers at the Serenity House in Adrian, an Alcoholics Anonymous program. He often helps others by giving out pamphlets and information, and has also started a substance abuse support group at his church. Leo and Eugenia will be celebrating their first anniversary later this month. Between them they have 11

therapists, doctors, or whatever is needed in a team approach to help the family to stay together and be a fully functioning entity in the community. Creativity, flexibility, and a "never give up" attitude are basic to the Wraparound approach.

(Continued on Page 3)

Save The Date!

■ COMING IN OCTOBER

An eight week Speechcraft class is scheduled to begin in October. Don't miss out! Call Kay at Customer Services (517) 263 - 8905 for more details!

■ AN INVITATION

All interested persons are invited to a Focus Group / Town Meeting on Thursday, September 30, 2004 at 5:00 p.m. in the River Raisin Room of the Human Services Building, 1040 S. Winter Street, Adrian. Dinner will be provided.

Hear from our guest speaker and tell us your opinions about mental health issues. Call Kay at Customer Services (517) 263 - 8905 for reservations / more details.

■ WRAPAROUND CONFERENCE

Coming September 13 and 14. Call Customer Services (517) 263 - 8905 for Registration details.

■ SHARING HOPE CONFERENCE

The 2004 Sharing Hope Conference is scheduled for Tuesday, October 12, at Eastern Michigan University. Make plans now to attend this exciting and informative event. Registration details available by calling Customer Services (517) 263 - 8905.

A Word With The Director

At a recent meeting of our provider network (agencies who contract with us to provide services), we asked for feedback after our presentation, as we usually do. This time, though, we were very surprised at the number of people who said things like, "What's an affiliation?" and, (quite bluntly) "Why do you have to talk in jargon and acronyms!"



*Executive Director
Roger Myers*

Apparently, it is time to provide a little more explanation. To that end, this issue of the Grapevine will provide information on our partners in the Community Mental Health Partnership of Southeastern Michigan, how and why we work together, and maybe even what we mean when we use those confusing abbreviations.

A lot of the changes we have undergone relate directly or indirectly to "managed care" and specifically to how Michigan's Medicaid program for behavioral healthcare must be administered. Agreements made between the federal Medicaid authority and the Michigan Department of Community Health required Community Mental Health Service Programs (CMHSPs)

to affiliate with each other (or merge) so that they would encompass at least 20,000 "covered lives". The term "covered lives" refers to the total number of persons in our county who are enrolled in Medicaid. At this time, Lenawee County has an estimated 6,000 such people. Obviously, we had to affiliate with someone to meet the requirements which were spelled out in a document issued by the Department of Community Health as a "Request for Proposals" (RFP).

Every CMH in Michigan, except for obvious ones such as Detroit-Wayne, had to find a partner somewhere. We eventually settled into a partnership with Livingston, Monroe, and Washtenaw Counties. We also chose to affiliate, rather than to merge, and to abide by a "Hub and Spoke" agreement. Under those terms, the Washtenaw Community Health Organization (WCHO) subcontracts the Medicaid dollars to its local partners. In other words, the WCHO is the "Hub" and we are one of the spokes. *One confusing detail:* what was formerly known as Washtenaw Community Mental Health is now called Washtenaw Community Services and Treatment Supports (CSTS), which serves as the "spoke" for Washtenaw County.

The question you may be asking now is "Well, was it worth it?" The answer is yes, but perhaps not for the reasons originally intended. We feel, across the affiliation, that our

voice is much stronger, and our services of higher quality, because of our collective administrative and clinical assets and our greater numbers. We find that we work exceptionally well together, as directors, and so do our respective staffs, in spite of more frequent commutes to Ann Arbor.

We are especially excited about the strength of our consumer voice, expressed through the Regional Consumer Advisory Council. We have had wonderful regional consumer and staff training events and conferences, and we are coming closer every day to consistency of service eligibility, treatment practice, and evaluations across all four counties.

Most of all, we have learned from each other, by comparing notes and helping each other to improve. Initiatives such as Self Determination, Anti-Stigma, and Primary Care Coordination are much more effective when implemented regionally. Bottom line: we had no choice. But as we struggle with the dual role of both provider and manager of service, we are growing stronger. Ultimately you, our consumers and partners, are the judge of how well we are doing. As always, we invite your comments and suggestions. ■

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

Community Mental Health Partnership of Southeastern Michigan

"THE AFFILIATION"

The Community Mental Health agencies participating in the Community Mental Health Partnership of Southeastern Michigan are the Lenawee Community Mental Health Authority (LCMHA), Livingston County CMH Authority, Monroe CMH Authority, and the Washtenaw Community Health Organization. Each of these CMH programs is responsible for public mental health and developmental disability services in their respective county. In addition, the Washtenaw Community Health Organization is responsible for public substance abuse services for Livingston and Washtenaw Counties.

Each of the agencies that participate in the Community Mental Health Partnership of Southeastern Michigan has staff assigned to a Customer Service or Member Service Department. The Customer Service / Member Service staff are available to help recipients, family members, and the general public understand how the system works. They can help you with problems that you might have while you are receiving services. Your Case Manager, Supports Services Coordinator, or Primary Therapist is usually the best person to contact with questions. However, if you do not have a Case Manager, Supports Services Coordinator, Primary Therapist, or are not

comfortable talking about certain issues with them; or if you feel you need additional information, we welcome you to contact the Customer Service or Member Services Department of the Community Mental Health (CMH) program where you get your services.

The Customer Service or Member Services Department is also interested in hearing suggestions on how mental health, developmental disability, and substance abuse services we provide can be improved. Customer Satisfaction Surveys are sent out periodically and your input is very important.

The four CMH agencies also have a variety of events that are designed to encourage face-to-face discussions on areas that might need improvement. These include Town Hall Meetings, Public Hearings, and Focus Groups. Please feel free to contact us with any suggestions or comments you have to improve our services.

• Lenawee Community Mental Health Authority (LCMHA) Customer Services Department:

Kay Ross
1040 S. Winter Street
Suite 1022
Adrian, Michigan 49221
(517) 263 - 8905

• Livingston County CMH Authority Member Services Department:

Leslie Hall
2280 E. Grand River
Howell, Michigan 48843
(517) 546 - 4126

• Monroe CMH Authority Customer Services Department:

Bridgitte Gates
P.O. Box 726
1001 Raisinville Road
Monroe, Michigan 48161
(734) 243 - 3371

• Washtenaw Community Health Organization Member Services Department:

Bob Pattullo
555 Towner
Ypsilanti, Michigan 48197
(734) 544 - 3000 ■

Conversation With A Consumer

(Continued from Page 1)

Anthony and Leo talk a lot about giving back to the community, but it's not just talk. They are walking the walk. Both men have presented at a recent BARJ (Balanced and Restorative Justice) conference at the Lenawee Intermediate School District. They are slated as the Keynote Speakers at the annual Wraparound Conference in September, and also plan to be speakers at a BARJ conference in Grand Rapids. Leo says "We want to help out . . . so others don't have to go through the pain and torment we've gone through."

At the end of August there will be a party to celebrate the closing of Anthony's Wraparound Team. "You've come a long way baby . . ." certainly applies to this family.

Thank you Anthony and Leo for telling your story. It takes real courage to share your problems. You are true stigma busters! ■

A Tip

FROM THE OFFICE OF RECIPIENT RIGHTS

It's that time when political parties and their candidates are appealing to all of us for our vote in the upcoming elections.

Remember that all persons who are protected under the Michigan Mental Health Code also have the right to vote, and should be assisted in registering and getting to the

polls should they wish to participate in this important process.



This right is not limitable; if the individual has an opinion, is registered, and expresses their wish to vote, please do all you can do to assist them. Best Wishes for Election 2004! ■

Livingston County

COMMUNITY MENTAL HEALTH SERVICES - "A SPOKE"

■ ORGANIZATIONAL

PURPOSE: To build resilience, facilitate recovery, and enhance self-reliance.

VISION: A more rewarding life in the community for everyone.

■ GUIDING VALUES AND PRINCIPLES:

• **Dignity and Respect:** All individuals with whom we come in contact will be treated with dignity and respect.

• **Easy Access to Services:** Access to emergency, assessment, referral, treatment and support services will be timely, efficient and respectful of the individual and/or family.

• **Person-Centered Planning:** We utilize a person centered and directed planning process in which service providers, supports and outcomes are chosen by the individual and/or family. Opportunities to disagree and appeal any aspect of service provision are provided throughout the service delivery process.

• **Collaboration:** We develop and maintain collaborative relationships as a means to improve access to services and enhance outcomes for people.

• **Responsive:** By responding to the priorities of individuals, guardians, families, advocates, community agencies, elected officials and others, we increase the breadth of community benefit.

• **Support Networks:** People profit from an individualized network of resources, supports and helpers, often including family, friends, coworkers, and community members.

• **Resource Management:** We ethically and economically manage all resources entrusted to us.

• **Community Integration:** The most rewarding outcomes occur when people are served in a community setting tailored to

their needs, orientation, cultural background and chosen way of life.

• **Continuous Improvement:** Continuous growth and improvement, both organizational and personal, provides a foundation on which to build the highest quality service management and provision.

Since becoming one of the four "spokes" in the Community Mental Health Partnership of Southeastern Michigan, CMHSLC has benefited in

many ways. Involvement in affiliation committees, workgroups, and conferences, with their emphasis on sharing information about local mental health program practices, has enhanced our own programs and increased our ability to deliver effective "best practices". Additionally, Livingston consumers, in meeting and sharing their experiences with other affiliation consumers, have gained interesting perspectives on the delivery of mental health services and given useful input to local CMH staff. ■

Lenawee Community Mental Health Authority

- "A SPOKE"

■ **MISSION:** To promote positive outcomes through quality mental health services.

■ **VISION:** Lenawee Community Mental Health Authority is committed to being recognized for quality in managed care innovation and consumer satisfaction.

■ VALUES:

• Ensuring that priority is given to individuals with the most severe forms of mental illness / emotional disturbance or developmental disabilities.

• Ensuring a comprehensive array of services.

• Being accountable to consumers, funding sources, regulatory bodies, and the general citizenry.

• Being a prudent steward of our funds.

• Prevention, community education, and collaborative services.

• Conducting ourselves with integrity, respect, and in an ethical manner. ■

WCHO

Washtenaw Community Health Organization - "THE HUB"

The Washtenaw Community Health Organization (WCHO) was formed in 2000 as a result of the trend to privatize human services. The WCHO became the administrative body and Community Support and Treatment Services (CSTS) became the direct service operator of Community Mental Health services for Washtenaw County. This was accomplished through a partnering between Washtenaw County and the University of Michigan. The WCHO is governed by a board of directors where half of its membership consists of Washtenaw County citizens and the other half are representatives of the University of Michigan.

As a human services organization, the WCHO is the
(Continued on Page 5)

Washtenaw County

COMMUNITY SUPPORT AND TREATMENT SERVICES (WCCSTS) - "A SPOKE"

■ STAKEHOLDERS:

- Consumer / Family
- Team / Employees
- Community

■ VALUES:

- Hope
- Freedom
- Integrity
- Excellence

■ **THE MISSION:** Our mission is to support the people we serve in leading lives rich in community membership and personal fulfillment.

We accomplish our purpose through:

- Excellence in service to individuals and families
- Advocacy and Education
- Partnerships and Alliances with others who share our vision

Our talented and committed staff light a path to an inclusive future.

■ THE GOALS:

1. Consumers belong to and participate in a community they choose.
2. Families maintain their relationship with their loved ones.
3. CSTS Staff are a team of valued, qualified employees committed to excellence in service.
4. Washtenaw County is an inclusive community that offers a high quality of life to all. ■

WCHO - Washtenaw Community Health

Organization - "THE HUB" (Continued)

administrative body that receives Medicaid dollars from the Michigan Department of Community Health (MDCH). The Medicaid money is then subcontracted with the four counties within the Community Mental Health Partnership of Southeastern Michigan (CMHPSM) to provide services for consumers. The counties involved in the CMHPSM are Lenawee, Livingston, Monroe and Washtenaw. Each county receives their own General Fund dollars that are not funneled and sub-contracted through the WCHO.

as Network Management, Recipient Rights, Claims, Information Systems, etc. to ensure that contracted services being provided for consumers are done in a fashion that is consistent with national and WCHO standards.

For more information about the WCHO, visit <http://wcho.ewashtenaw.org> or call (734) 544 - 3000. For information regarding the affiliation of the CMHPSM, visit <http://cmhpsm.ewashtenaw.org> or call (734) 544 - 3000. ■

In addition to providing mental health services, the WCHO is also the coordinating agency (CA) for substance abuse services for Livingston and Washtenaw Counties. The WCHO provides many administrative functions, such



Monroe Community

MENTAL HEALTH AUTHORITY - "A SPOKE"

■ MISSION

STATEMENT: The mission of Monroe Community Mental Health Authority is to provide quality mental health care in partnership with consumers and our community to enrich lives and promote wellness.

■ VISION STATEMENT:

Recognition as a leader in behavioral healthcare that empowers consumers and is valued as a community resource dedicated to quality services.

■ SERVICE VALUES:

- **Consumerism** - We adhere to the principles of person centered planning, self-determination, inclusion, and consumer satisfaction to guide our decision making.
- **Diversity** - We respect that strength comes from

embracing and building on the unique qualities of individuals in our community.

- **Community** - We believe that by working together we can build an excellent system of care which strengthens our community.

- **Accountability** - We answer to our community and to our customers for our actions and results.

- **Access to Care** - We are committed to providing services that are available and easily accessible.

- **Quality** - We pursue excellence by using nationally recognized standards to improve our performance.

- **Leadership** - We are committed to providing leadership through cooperative partnerships. ■

Service Honorees

Our entire organization, Lenawee Community Mental Health Authority, is pleased to recognize several staff members who have recently completed service anniversaries. A very special thanks to each of them for their part in "promoting positive outcomes through quality mental health services." ■



Bertha Lopez
Access Clinician

*(shown with board member, Linda Feeney),
5 years of service*



Gratia Karmes
Community Services Outreach Coordinator

*(shown with board member, Nathan Smith),
25 years of service*



Brian Pearson
Access Clinician
20 years of service



Virginia McKown
Medical Records Coordinator
15 years of service



Shar Dunbar
Fiscal Services Representative
15 years of service



Peggy Ryder
Access Clinician
15 years of service



John Berridge
Access Clinician
20 years of service



Dawn Ehret
Mentally Impaired (MI) Child
Supports Coordinator
15 years of service



Robyn McKenzie
Mentally Impaired (MI) Adult
Supports Coordinator
5 years of service



Mary Poore
Developmentally Disabled (DD)
Supports Coordinator
15 years of service

Staff Spotlight

- by Kay Ross

This month we spotlight Sharon Smith who has been an employee of Lenawee Community Mental Health Authority for nine years. Sharon started as a part time secretary on the Wraparound team. Currently, she is the Quality Improvement Data Coordinator, having recently taken on this position along with her other duties. She is a member of the Community Services department, which everyone says is the best department to be a part of (*OK . . . I say it anyway!*)

Sharon graduated from Siena Heights University with a degree in Business



Administration. She is married and has one daughter who graduated from Adrian High School this year and plans to attend Alma College this fall. Mom has been busy helping her daughter get ready for college. Those of us who know Sharon, know that she has always been a very involved parent in the Adrian Public Schools.

That is Sharon Smith. She is a dedicated worker and very involved with LCMHA. She is a member of the Anti Stigma Committee, Data Management Committee, Quality Improvement Committee, and staff to the Quality Assurance Committee of the LCMHA Board. She also helps out on many community committees,

such as the Multi-Purpose Collaborative Body, Strong Families / Safe Children, Family Support Task Force, and Financial Planning Committee for Wraparound.

Sharon is a very "behind the scenes" person because she is most comfortable there, but if there is something happening at LCMHA, she will probably be an unsung hero, helping out with the many details that are involved. Her organizational skills are much sought after by her peers, and Sharon is always available to help you out with a computer question or a computer fix if needed.

Here are some quotes from fellow LCMHA workers:

- "personally, I think she has the hardest job in the agency, as she has to keep track of Kathryn and Gratia . . ."

- "what strikes you about Sharon is that she is quiet . . . but when she makes a point, it hits home."

- "She's the linchpin of our unit . . . if she doesn't know the answer, she will find it."

Sharon's hobbies include genealogy, photography, computers, sewing, and crafts of many kinds. Lately, she has been interested in rubber stamping and card making.

I could go on and on about Sharon and all the things she does for LCMHA, and her coworkers, but I'm told I only have so much space for this article. Suffice it to say that she is a very valued part of the LCMHA team, and I (along with the rest of us), feel very fortunate to be working with her! ■

Advanced Air Bags

HOW SHOULD PARENTS AND OTHER CAREGIVERS RESPOND TO AABs?

- Children should continue to ride in the back seat whenever possible. There is a 33-percent lower risk of injury to a child in the back seat, regardless of whether the vehicle has air bags.
- Anyone riding in the front seat should always buckle up and sit properly (upright and centered, with feet on the floor).
- Drivers should read their vehicle owner's manual to understand the kinds of air bags installed in their vehicle.
- If a child is placed in front, whether in a restraint or seat belt, or even unrestrained, the AAB should detect this condition and adjust to it. However, AABs are not able to detect a child riding on another passenger's lap.
- If parents have no other option than to transport a forward-facing child in a front passenger seat with an AAB, follow the same regimen as with an AB. Make sure the child is properly restrained, the vehicle seat is moved as far rearward as possible, and the

child does not lean forward. If there is a status light, check to make sure the AAB is off. (However, some systems may reduce power rather than turning off the AAB completely.) In a small pickup or sports car, use the AB on/off switch.

- In pickups and sports cars with LATCH anchors in the front seat, the AAB system may not turn off if the child and the restraint are relatively heavy and the CR is installed tightly using the LATCH anchors. The system cannot sense tension on LATCH straps separate from child and CR weight, as it can with seat belts. The system might

"think" that there is an unbelted heavier occupant seated there, so it would stay on. To assure that the AAB is off when using LATCH in front, the driver should manually turn off the AB. ■

- excerpts by permission from Summer 2004 issue of *TECH Update*, published by the National Safe Kids Campaign. Questions regarding AABs may be directed to Kay Ross at Customer Service (517) 263 - 8905. Kay is a certified Child Passenger Safety Technician.

The good thing about repeating mistakes is you know just when to cringe.

- author unknown

Student Intern **AMY LIEBLER**

- by Gratia Karmes

Amy joined LCMHA as an intern during the last week of April. She is very involved with our agency, putting in at least two days a week. She became interested in working here when her "Theories of Psychotherapy" class at Adrian College watched a video on Dialectical Behavior Therapy. Amy asked her instructor, Dr. Judith Hammerle, to help her make



connections with someone practicing this treatment modality in our community, and she was put in contact with Bertha Lopez (LCMHA Access Clinician) who promptly signed her up!

Amy's primary duties are working with the DBT groups run by our agency. At this time, there are two such groups for our consumers (referred by their supports coordinators). There are about 7 - 8 persons in each group. (DBT groups teach coping skills for persons who have difficulty regulating their emotions.)



Amy brings a unique approach to this group. She has studied Tai Chi, Chi Gong, and Kung Fu for many years, including several at the Shao Lin temple in Florida. All of these martial arts techniques include specific breathing patterns which are intended to help calm the mind.

Amy combined these breathing techniques with "art therapy" . . . making bracelets and then using the bracelets to practice slow, calm breathing by counting the beads. Amy reports that participants have greatly enjoyed both making

the bracelets and using them to focus their minds and relax.

Amy graduated from Savannah College of Art and Design in August 1990. She has worked as a photographer, an account manager, and is currently accepted into two Art Therapy programs for this fall. ■

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I e n a w e e

**Community
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