



Meeting	September	October	November
NSMHA MH Advisory Board	Check <a href="http://nsmha.org/boards.htm">http://nsmha.org/boards.htm</a>	Check <a href="http://nsmha.org/boards.htm">http://nsmha.org/boards.htm</a>	Tues. 11/06, 1:00 PM
NSMHA Board of Directors	Thur. 09/13, 1:30 PM	Thur. 10/11, 1:30 PM	Thur. 11/08, 1:00 PM
Island County MH Advisory Board	Mon. 09/17, 10:00 AM	Mon. 10/15, 10:00 AM	Mon. 11/19, 10:00 AM
San Juan County MH Advisory Board	Mon. 09/17, 11:45 AM	Mon. 10/15, 11:45 AM	Mon. 11/19, 11:45 AM
Skagit County MH Advisory Board	Mon. 09/03, Noon	Mon. 10/01, Noon	Mon. 11/05, Noon
Snohomish County MH Advisory Board	Mon. 09/10, 5:45 PM	Mon. 10/08, 5:45 PM	Mon. 11/12, 5:45 PM
Whatcom County MH Advisory Board	Mon. 09/10, Noon	Mon. 10/08, Noon	Mon. 11/12, Noon

## Around the Sound



by Chuck Benjamin  
NSMHA Executive Director

The NSMHA is busy keeping up with the hectic and exciting changes to the mental health system. The numerous North Sound happenings are:

- Converting the public mental health systems' outpatient services from capitated managed care to modified fee for service.
- Enhancing the Integrated Crisis Response System to include Chemical Dependency and Mental Health and the provision of a Secure Detox Facility.
- Enhancing the Tribal government to government relations through an effective 7.01 Plan and continued Annual Tribal Conferences.
- Issuing a Request for Qualifications in partnership with Children's Administration and Snohomish County for short-term high-intensity services for children.
- Putting out a Request for Proposals on the \$ 983,000 of Federal Block Grant funds, and receiving proposals totaling about \$ 2.5 Million!
- Implementing a Program for Assertive Community Treatment on July 1, 2007 in Snohomish County.
- Skagit County enacting the one-tenth of a percent sales tax to better serve the vulnerable population with chemical dependency and chronic mental illness.
- Continuation of the Annual Recovery and Resiliency Conference.
- Any many more...

I would like to concentrate this article on the first bullet. The NSMHA Board of Directors approved the implementation of the recommendations from the Selection Committee, NSMHA Advisory Board and Planning Committee regarding the Outpatient Mental Health Services Request for Qualifications on May 31st. The new contracts will begin October 1, 2007 and the new system will be phased in over the next year.

This is another major step in a process that started July 2006. There were four major goals in the process; to increase the number of consumers served, to increase the intensity of service to the most severely ill consumers, to give consumers more choice in providers, and to bring the funding system into alignment with Federal and State funding systems.

NSMHA appreciates the wide involvement of consumers, advocates, allied system staff, county staff, CMHA staff, our staff and the invaluable consultation services of Dale Jarvis and Barbara Mauer. The process began with collecting data on our current services being provided and an estimation of projected need for services across all five counties. Then came an intensive month of clinical design to gather ideas on an optimum service delivery system. The next stage was a financial design group to develop a funding system to support the clinical design. In February 2007, the NSMHA with the authorization of its Board of Directors released an RFQ. There were 11 bidders who submitted 41 proposals.

The outcome of this process is summarized as follows:  
• All current mental health providers remain in the system.

- One current provider will be downsizing.
- One current provider will be expanding from Whatcom and Skagit counties into Snohomish for children services.
- Two new providers will be providing mental health services, one in Snohomish and one in Whatcom County.

I am strongly encouraged with the participation of consumers/family members/advocates that have been a very active part of this transformation of the North Sound public mental health system. In addition, I am also very optimistic about this transformation being of minimal impact on people with mental illness due to the constructive and positive participation of all mental health providers.

If you would like to know more about this project, you can either visit the NSMHA website at: <http://nsmha.org>; click on the link down the left side labeled 2007 RFQ; or contact me directly.

NSMHA looks forward to working with everyone in continuing to improve the public mental health services across the North Sound Region.

Respectfully,  
Chuck



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Mount Vernon WA 98273



## PACT in the North Sound Region

by Greg Long, NSMHA Deputy Director

The North Sound Region is pleased to be initiating a Program for Assertive Community Treatment (PACT) in Snohomish County on July 1, 2007. A consortium of providers, led by Compass Health along with bridgeways and Sunrise Services, will be combining their abilities and resources to provide this highly intensive case management service to 90-100 consumers when fully operational. NSMHA is planning for a 50 consumer PACT in Whatcom County operated by Lake Whatcom Treatment Services to begin services in November 2007.

PACT is an evidence-based practice which was originally developed in Wisconsin in the late 1960s and has been successfully implemented around the nation and world. PACT is an intensive team approach that serves people with very serious mental illnesses such as schizophrenia and bi-polar disorder who have not been able to live successfully in the community. The Men-

tal Health Division of the State of Washington is initiating these programs as an alternative to hospitalization. It costs about \$12,000 per participant per year to be in PACT.

PACT has strict fidelity standards which research has proven leads to successful outcomes. These standards include the following:

- A 10 to 1 maximum patient to staff ratio
- A .8 FTE (full-time equivalent) psychiatrist or ARNP
- 3 FTE RNs
- 1 FTE substance abuse specialist
- 1 FTE employment specialist
- 1.5 FTE peer counselors
- 75% of services must be delivered in community settings (not in provider offices)
- Staff from this team are available to consumers 24 hours a day, 7 days a week
- Staff have team meetings on a daily basis to coordinate services
- A community advisory board comprised of at least 51% consumers and family members

Steve Reinig, former NSMHA Executive Director, has been named the team leader of the program. The team is now undergoing training which includes visiting a fully operational program in Oklahoma and ongoing consultation with national experts. All of the North Sound mental health community wish both programs success as key additions to our continuum of care for people with the most serious mental illnesses.

New consumers desiring PACT should contact centralized Access at 1-888-693-7200 and request PACT. The consumer will receive the standard assessment for mental health services that all new referrals receive and if a less intensive service is not adequate, a referral will be made to the PACT Screening Committee. For consumers already in services in the Region, their case managers can simply send a completed PACT referral form to the PACT Screening Committee. Referral form is available on the NSMHA website at <http://nsmha.org/forms>. For further information on PACT contact Steve Reinig at 1 (800) 457.9303.

### INVITATION TO SUBMIT ENTRIES!

NSMHA'S 2007 POSTER AND POEM CONTEST:



THEME: "BREAKING THE BARRIERS OF STIGMA"

It is time to submit your entries to NSMHA's 2007 Poster and Poem Contest. Posters and poems will be judged by NSMHA Board of Directors. To enter the contest you must be a present and/or past recipient of public mental health services in the North Sound Region. Prizes will be awarded! To obtain an entry form, call 360.416.7013 / 1.800.684.3555 or download a form from: [http://nsmha.org/News/Poster\\_Contest.htm](http://nsmha.org/News/Poster_Contest.htm)



## The Parent Network

By Barb Andrews, Director of T.R.I.P.  
(Training Resources In Partnership)

TRIP (Training Resources In Partnership) has been a dream come true, for me. About seven years ago, life completely unravelled with the three kids that I had adopted, and I had never felt so terrified, alone, and exhausted. Resources were scarce (at best) and it felt as if no one understood what life was like with these three kids. We had motion detectors, alarms on doors/windows, knives locked up...our home had become a prison.

When we had finally made it through the worst of it, I promised myself that I would do my best to bring resources to my community (wherever that may be). TRIP now has two parent support/resource groups (and one coming soon in Bellingham) and upcoming trainings on Wraparound, IEP's (Individualized Education Programs) special education laws, financial planning for parents with special needs children, and a prison speak out where near release inmates from Monroe Correctional Facility come and talk to parents and youth about life on the inside and consequences when poor choices are made.

TRIP is about supporting the parents and caregivers of children and youth with emotional, behavioral, and mental health needs, through mentoring, networking, and training. It's about listening, being heard, and building a support system. For more information, please contact Barbara Andrews and 360-298-2796, 1-877-819-3901, or email at [onedaytime2001@msn.com](mailto:onedaytime2001@msn.com).

The Oak Harbor support group meets on the first and third Wednesday of the month, from 6:30-8:30 p.m. at Oak Harbor Lutheran Church.

The Anacortes support group meets on the second and fourth Tuesday of the month, from 11:30 a.m.-1:00 p.m. (this may be changing to an evening meeting in the near future) in Room D of the Anacortes Library.

### DETAILS ON UPCOMING TRAININGS:

**Washington PAVE (Parents Are Vital in Education) and TRIP present:**

A workshop on understanding the IEP (Individualized Education Program) process, to be held August 18th at Oak Harbor Lutheran Church (address above) from 9-4 p.m. Learn about working with school districts, discipline, communication, and more! Childcare is available and lunch will be served. To reserve your spot, call Danae Ware at 360.270.1415 or email [danaeware@verizon.net](mailto:danaeware@verizon.net). There is a \$15 fee for this class.

**NSMHA presents:**

A free three day training on eating disorders, covering topics from assessment to treatment for adults and children. Presenters will be Elise Curry, Psy.D, program manager of the Intensive Outpatient Eating Disorder Program at the University of California, and Terry Schwartz, M.D., Medical Director of the Intensive Outpatient Eating Disorders Program at the University of California. The training will be held Sept. 5-7, 9:30-4:30 p.m. at the Skagit Station in Mount Vernon. On Sept. 5, training is open to NSMHA providers, consumers and family members, and other community stakeholders. On Sept. 6-7, training focuses on treatment of eating disorders in a mental health setting, preference will be given to NSMHA provider clinicians. Snacks provided, lunch on your own. To register, contact Christin Haymond at 360.416.7013 or [christin\\_haymond@nsmha.org](mailto:christin_haymond@nsmha.org).

**NSMHA is happy to present:**

Free intensive Wraparound training, held in August and September. Training dates vary depending on attendee (family member, provider, community stakeholder, etc. Free CEU's will be given dependent on the classes you attend. A Wraparound training brochure is available on the NSMHA website at <http://nsmha.org/news>. If you have questions on how to register, please contact either Julie de Losada or Rebecca Pate at 360.416.7013.



## 2007 TRIBAL MENTAL HEALTH CONFERENCE UPDATE

The seventh annual NSMHA Tribal Mental Health Conference, "Remembering Our Past & Moving Into Our Future" was held on May 2nd and 3rd at the Skagit Resort in Bow.



A special thanks to Kevin Paul of the Swinomish Indian Tribal Community for granting us permission to use his beautiful artwork for the conference brochure and poster. This carving, displayed in La Conner, is entitled "Spirit Wheel".

This year the keynote speakers were Jane Middleton-Moz, Swil Kanim, and Dr. Ron Horn. Additional breakout sessions were given by Diane and Rudy Vendiola, Rosemary Gibbons and Gerry Oleman, Ken Stark, Dr. Joseph Trimble, and Michael Vendiola, and Rudy Vendiola again did an excellent job as the conference MC. Registration was at an all time high this year, attributing credit to the quality of presenters we were blessed with this year. Conference attendees were particularly appreciative of keynote speaker Jane Middleton-Moz, who gave the keynote addresses "From Legacy to Choice" and "Honoring the Strength", on healing the generational trauma and its effects on individuals, families, and communities.

This was the first year we had a raffle\* at the conference, with special thanks to the Samish Tribe for donating the grand prize, a beautiful Pendleton blanket. It went so well we will be sure to have one again next year! We raise our hands in thanks to all who participated in the planning and presentation of this enjoyable and enlightening event.

\* all raffle profits were used for conference implementation costs.

## Legislative News

by Margaret Rojas, NSMHA Legislative Liaison



This year's legislative session was a good one for mental health! Please thank your legislator for their work in securing additional funding, working toward improving the delivery of children's mental health services, passing consumer friendly bills, ensuring safety for mental health workers, increasing wages for mental health direct service and direct service support staff and setting the precedence for treating consumers in their community of choice! Here are a few highlights from this legislative session that we would like to bring to your attention:

**Substitute Senate Bill 1088** is intended to improve children's mental health services, placing emphasis on early identification, intervention, and prevention with greater reliance on evidence-based/promising practices. The goal is to create a children's mental health system with the following elements: a continuum of services from early identification and intervention through crisis intervention; equity in access to services; developmentally appropriate, high-quality, culturally competent services; treatment of children within the context of their families and other supports; a sufficient supply of qualified, culturally competent providers to respond to children from families whose primary language is not English; use of developmentally appropriate evidence-based/research-based practices; and integrated, flexible services to meet the needs of children at-risk. We believe this bill is a step in the right direction, creating a system proactive in treating children in the mental health system.

**House Bill 1456** requires that no

Designated Mental Health Professional or crisis outreach worker be required to conduct home visits/investigations alone. Employers will equip these workers with a communication device. When dispatched on crisis outreach visits, they will have prompt access to any history of dangerousness or potential dangerousness on the client they are investigating. All community mental health workers who work directly with clients will be provided with annual training on safety and violence prevention. This is an important piece of legislation keeping safety in the forefront of consumer contact in community outreach and investigations.

**Engrossed House Bill 1460** ensures that all insurance policies issued for all individuals, groups, and the Washington State Health Insurance Pool after January 1, 2008 are required to include coverage for mental health services equal to coverage for other medical and surgical services. This parity bill is one of the best in the nation!

**Substitute Senate Bill 5340** restored the definition of "disability" to protect those with sensory, mental, or physical impairment. In 2006, a majority of the Washington Supreme Court adopted a definition of "disability" that would have diminished the protections for people with mental illness. Fortunately and thanks to the many advocates, including our very own Marie Jubie, the Legislature found that this decision failed to recognize that Washington's antidiscrimination law which provides protections independent of federal law. To all of you who worked on this bill, well done!

**Senate Bill 6018** amended the non-emergent detention to allow a summons for probable cause in the initial detention process. The Integrated Crisis Response Secure Detox Pilot program combines the initial detention process of adults with chemical dependency and mental disorders through the use of a Designated Crisis Responder with authority to initiate civil commitment proceedings. The pilot also includes a secure detoxification facility for detention. We would like to thank Senator Brandland for sponsoring this important piece of legislation, directly benefiting the pilot.

**Substitute Senate Bill 5533** finds that there are disproportionate numbers of individuals with mental illness in jail, whose needs (as well as public safety) are better served when they are provided an opportunity to obtain treatment. If a police officer now has cause to believe that the individual has committed a non-felony crime and the individual is known to suffer from a mental disorder, he or she may either take the individual to a crisis stabilization unit; refer the individual to a mental health professional for evaluation for initial detention; or release the individual upon agreement to voluntary participation in outpatient treatment. We support this important step in diverting people with mental illness from incarceration. We have a long way to go in de-criminalizing mental illness, but we can take this piece of legislation as good step forward.

For more information on these bills and others passed this legislative session go to: <http://www1.leg.wa.gov/>.

Thanks to all of you for advocacy and persistence in fighting the good fight! See you next session.

### Register Now!

NSMHA's 7th Annual Resiliency & Recovery Conference

"EMPOWERING YOUTH & FAMILY"

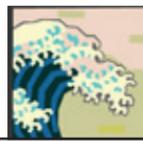
Wednesday September 26th, 2007, McIntyre Hall, Mount Vernon

Featuring MTV celebrity and internationally renowned youth motivational speaker, Jeff Yalden, will be the keynote speaker of this year's conference that we hope to be a defining moment for youth in our region. Jeff Yalden has spoken to more than 3,000 youth audiences in 50 states. He has spent the last twelve years touring the world, coaching and motivating youth and parents to make better life and family choices. Jeff has written six books and contributed to A Cup of Chicken Soup for the Soul.

**Conference is designed for youth 13 years of age and up and their parents/caregivers/significant adults in their life. All children with adult supervision are welcome!**

Register for the conference online at <http://nsmha.org/news> or by calling 360.416.7013/1.800.684.3555.

For more information on Jeff Yalden: [www.JeffYalden.com](http://www.JeffYalden.com).



**Waving Hello:**

**Christin Haymond, Receptionist**



Christin's friendly smile has been brightening our days since she started at NSMHA. Welcome to the team Christin!

**Terry McDonough, Quality Specialist**



Terry has been a Mental Health Specialist at Snohomish County for over 15 years, but is a new NSMHA employee, and we're glad to have him!

**Barbara Jacobson, Secretary**



Barb's friendliness, industriousness and adaptability have made her an indispensable part of the NSMHA team, and a genuine pleasure to work with!

**A Special Introduction...**

*from Vaughn Bonnett, Western State Hospital Liaison*

"Hello to all of you, It is truly my pleasure to be working for NSMHA. I have worked in the mental health field for many years, specifically with the homeless population in Colorado. I relocated to the Northwest four years ago and became employed as a psychiatric social worker at Western State Hospital. Throughout my career I have provided clinical case management and supervision to social workers and interns, helped develop shelter and housing and was a designated mental health professional. I very much look forward to working with all of you through the joys, trials and tribulations that we encounter with the fragile folks that we serve. And so for now, farewell and peace, Vaughn."

**Waving Goodbye...**

**Debra Jaccard, NSMHA Quality Manager**

We tried to talk her out of it, but sadly, we couldn't stop Debra from leaving us for the warmer climes of New Mexico. Debra did a wonderful job as Quality Manager at NSMHA and will be sorely missed. We wish her all the best!



**Creating Positive Energy!**  
by Chuck Davis, North Sound Regional Ombuds

I was reading in a running magazine recently about a clinic in San Diego that specializes in something called "motion therapy." It's called a "Marathon" Clinic and the therapist's favorite way to do therapy is to hit the streets and run with his clients.

While most people don't wish to pursue quite that extreme, the concept of using exercise and fitness to deal with anxiety, anger and depression is well known. Exercise stimulates serotonin, dopamine, epinephrine and beta-endorphins which elevate mood and reduce depression and anxiety. In his book, "Conquering Depression and Anxiety Through Exercise," Keith Johnsgard, Ph.D., said just 20 to 30 minutes of vigorous exercise a day produces five to six hours of reduced anxiety, anger, fatigue and other negative emotions. Studies show therapeutic benefits increase as exercise intensity ramps up! And deep breathing stimulates the parasympathetic nervous system which is responsible for calming us down afterward.

Upon reading the article I immediately thought of a client from several years back who wasn't doing well. We tried a number of things to help, to little avail. One day this person decided to take a 15-minute walk just to get some fresh air and clear their head. The next thing you know the walk became an everyday event! Before long the 15-minute walks turned into 45-minute walks! As the person lost weight, gained muscle and developed endurance, with their doctor's OK they were able to cut back on meds. The last time I spoke with them they had regained their focus and were beginning employment. That's when I became a true believer in the power of positive energy.

I'm a runner myself, and while none of my clients have accompanied me on any 15-mile runs yet, I hope some will see the wisdom of getting out and taking walks or regularly engaging in their favorite exercise. Exercise isn't a miracle cure by any means, but it certainly can help create some positive energy!



**WRAP (Wellness Recovery Action Plan)- A New Beginning**

*Russ Sapienza - Consumer/Advocate*



During a three day period of April 23-25, 2007, approximately twenty mental health consumers, advocates, and professionals attended a workshop on wellness. It was held at St. Luke's Health Education Center in Bellingham. The purpose of the workshop, the first of its kind in Washington State, is to establish a "wellness toolbox", when one's mental illness symptoms worsen. The "toolbox" includes lists of medications, people within one's support system, and preferred methods of treatment.

According to Mary Ellen Copeland, who developed the Wellness Recovery Action Plan (or WRAP) as a response to physical and mental health symptoms, the five foundations of WRAP are: 1) a sense of hope, 2) education about mental illness and various treatment resources, 3) a sense of personal responsibility toward dealing with mental illness, 4) advocacy for one's self and others, and 5) a support system of at least five family members and/or friends.

Each workshop participant was encouraged to share his or her own personal ways of dealing with whatever symptoms he or she may experience. Some turned to yoga, meditative exercise, and knitting. Others turned to prayer and developing a spiritual life. One even shared membership in a "laughter club", which encourages the simple act of laughing as a way to lower stress and improve one's health. Also discussed were working through situations in an uninformed or indifferent mental health system, as well as ways that some words ( i.e. "crazy", "decompensating") may stymie recovery - or perhaps improve it.

Respect and non-judgment are two of many values and ethics found in the WRAP program, and were exercised on a consistent basis in this workshop. It is also confidential, voluntary, and places a high emphasis on listening to one's own needs, as well as others. WRAP is found in most of the United States, but as mentioned earlier, this workshop was the first of its kind in Washington State. It is proven to be an effective practice in reducing mental illness symptoms, and requires as much support from the mental health community and the general public as possible.

**Meet the WRAP Trainers!**

**H. James Mead**, AAS, BBA, MBA, M.Th., M.Div., D.Min. is a retired Social and Health Services Program Manager from the Department of Social and Health Services, Region 3 Home and Community Services. James is currently President, of The Snohomish County Mental Health Advisory Board, and current Chairperson of the North Sound Mental Health Administration Advisory Board, Mt. Vernon, Washington.

Mr. Mead received numerous awards while in the U.S. Navy, including the Air Medal, the Navy Commendation Medal with Combat "V", the Vietnamese Staff Service Honor Medal and the Vietnamese Cross of Gallantry along with numerous Letters of Commendation and Appreciation from various Commanding Officers.

In addition to his wealth of experience in Mental Health and Chemical Dependency fields, James has worked with Adult Protective Services, and served as Secretary for the Cherokee Blue Clan Inter-tribal Council.



**Betty Scott** was trained as a WRAP counselor in the summer of 2007. Since 2000 she has worked as NAMI's Early Intervention Specialist, providing support, education, and consulting services to families, health providers and school personnel. She has been a NAMI board member since 1999. For fifteen years, she was an English Instructor at Whatcom Community College.

In May she spoke to journalism students at Western Washington University about stigma and mental illnesses. When asked her job title, she explained to the students: "My dad recently told me a story that pretty much defines the work I do. As a small child I looked at him and said, 'Daddy you are sweet and you are good.' When he told me this story, he added: 'Honey, I've been trying to live up to your expectations ever since.'"

Whether coordinating NAMI programs, lobbying for better services, running WRAP workshops, or providing support or education, I am at heart, reminding us all that 'we are all sweet and we are good.'

