



HEARTS & MINDS

VOLUME 1, ISSUE 1 FALL 2008

Community Mental Health: A Fundamental Community Service

We are pleased to present you with our Fall newsletter and with the many outstanding initiatives that Kennebec Behavioral Health is currently engaged in. We believe the Fall of 2008, as we look back on it, will be a time of significant change for not only the State of Maine but also for mental health services, both in terms of how they are delivered and how they are funded.

We believe, here at Kennebec Behavioral Health, that behavioral health services are a fundamental right for all citizens. Just as we believe that our hospitals, police departments, and transportation services are key fundamental services, so we believe that mental health care is a fundamental right for everyone.

There is probably not one of us that hasn't been affected at some point by a concern or tragedy that involved mental health, either with a family member or friend. The Surgeon General's report indicates that approximately 20% of the population during any given year will experience a mental health issue. This statistic alone illustrates the breadth with which behavioral health issues affect us all. Each and every one of us.

There are three important considerations we should keep in mind as we determine the value of behavioral health services. First, mental health care is fundamental to overall health. Mental health care is indispensable to personal well-being and to leading a balanced and productive life. Second, mental disorders are real. There is clear scientific basis showing that brain chemistry affects behavior, and behavior can affect brain chemistry. Third, and most important, mental health disorders and mental health problems are treatable. We can provide effective and safe interventions that can be foundational to an individual's overall health.

All of us at KBH dedicate ourselves to meeting these challenges as we move into uncertain times. Working together with the communities we serve, the KBH family will remain effective and efficient. We are not only ready to face these challenges; we look forward to participating in their solutions.



Sally E. Dyer,
President, KMHA



Thomas J. McAdam,
Chief Executive Officer

CHILDREN'S MEDICATION MANAGEMENT PROGRAM EXPANDED

In response to increased demand, KBH has added a new psychiatrist to see children and adolescent clients. Robert Gordon, M.D., joins Paige McInerney, D.O., Priscilla Young, M.S., psychiatric mental health nurse practitioner, and Emil Buker, M.S., psychiatric mental health nurse practitioner, as the newest provider of medication management for those with severe and persistent mental illness.

Dr. Gordon has been teaching and consulting at Harvard Medical School's Children's Hospital Developmental Center with a concentration in developmental disabilities. He has ten years of experience with autism, behavioral problems and complicated medical problems, but also has a master's degree in public health and worked previously in epidemiology and infectious diseases in Los Angeles. After several years at the University of Kansas, the opportunity to enjoy the outdoors in Maine and practice psychiatry drew Dr. Gordon to this area. Dr. Gordon is now accepting new patients also.

KBH welcomes Dr. Gordon.



Dr. Robert Gordon

Facilities Locations

**Administrative Offices
& Waterville Clinic**
67 Eustis Parkway
Waterville, ME 04901

Augusta Clinic
66 Stone Street
Augusta, ME 04330

Skowhegan Clinic
30 High Street
Skowhegan, ME 04976

Winthrop Clinic
736 Old Lewiston Road
Winthrop, ME 04364

**Family Behavioral Health &
Visitation Services**
66 Stone Street
Augusta, ME 04330

Capitol Clubhouse
37 Stone Street
Augusta, ME 04330

High Hopes Clubhouse
26 College Avenue
Waterville, ME 04901

Augusta House
Augusta, ME 04330

Valley View
Augusta, ME 04330

Wilson Place
Skowhegan, ME 04976

Bridgewood
Skowhegan, ME 04976

FAMILY STORIES by Karen Mosher, Ph. D.

Have you ever thought about the power of your family stories? Can you remember how they shaped your thoughts and feelings about yourself as a child? Every family has its stories. They end up becoming a big part of how we understand ourselves in the world. We use them to make sense out of confusion and to ground ourselves in our values and in our love and trust for one another. Stories help us grasp how our experiences fit into our world. They can convey and keep us mindful of many qualities such as love, heroism, sacrifice, humility, or safety. They provide a context and grounding for family values and strengths. They let people know that we see and value them.

Assembling and telling a story is a great way to help a child, or anyone else for that matter, understand, remember, and place in context his or her heritage and experiences.

Fortunately for us, telling a meaningful story is not difficult. Here are a few practical ideas:

- Keep it simple! One idea or concept is enough for a story.
- Think short. If you try to write a novel, you might not write anything.
- It doesn't have to be dramatic.
- It doesn't even have to be written.
- It can be a series of pictures with captions, or a paragraph here and there.
- A funny song, or poem written for the child about a particular event is something they can keep with pride.
- Take turns on the drive home making the day's activity into a story. Have fun with it.
- Alternatively, use times in the car or in other situations where things are quiet to tell a story about one of your parents, grandparents or friends.
- A scrap book page done for a child after a fun day at the beach keeps the memory alive.
- A series of simple drawings and a few captions on a page after a hard day can reflect a return to comfort and a good ending for a child.
- A story with pictures, hand drawn, cut out, or photographs, about a happy experience with a loved one who is gone keeps good memories in the forefront.
- A page with a picture of a grandparent and a short story about their love, helpfulness, strength, courage, skill, or sacrifice is wonderfully grounding.
- A cook book page with the recipe for one of the child's favorite foods and pictures of the child helping or of the finished product makes helping fun.
- A short, 3 minute "Movie Maker" movie that includes a favorite song, pictures of a fun activity, and some captions or narration is a great option. This simple movie making software comes in the operating system package on many computers.
- Your story can be messy.
- It can be imperfect.



"We use them to make sense out of confusion and to ground ourselves in our values and in our love and trust for one another."

If your story conveys your love, caring, acknowledgment or respect, the recipient of any age will appreciate and value it as well as carry into their future its message of grounding and certainty of place in the world.

GOLDEN GALA RAISES MONEY FOR CAPITOL CLUBHOUSE

On October 11, KBH honored employers who work with Capitol Clubhouse to provide transitional and permanent employment for those with mental illness. KBH also had great fun raising money for the Clubhouse. After a gourmet dinner, live music, an auction and a nationally-known comedian, KBH wrapped up its first Annual Golden Gala at the University of Maine-Augusta's beautiful new Student Center. Don't miss the Second Annual Golden Gala, date to be announced.

Employers that were honored at the Gala were:

The Pomerleau Family

(Capitol Clubhouse members' first employer was a Pomerleau family business)

Fairfield Inn & Suites

Sears

Ruby Tuesday

Maine Department of Labor, Bureau of Employment Services



CHILDREN'S TARGETED CASE MANAGEMENT COMPLETES FAMILY BEHAVIORAL HEALTH PROGRAM

When doctors and clinicians requested a direct portal of entry for children to enter into services that include assessment, referral, linkage, monitoring and advocacy, Kennebec Behavioral Health staff responded.

Cheryl Davis, Administrator of Community Services at Kennebec Behavioral Health, explained recently how children's case management can complete a circle that begins with assessment and ends with coordinating options for children and families. They can then receive needed, effective services and make better use of natural supports.

Cindy Pooler, a former teacher with years of administrative and case management experience, has been brought on board to lead a Children's Targeted Case Management Program within KBH's Department of Child and Family Services. The program will be supervised by David Whitestone, Ph. D., Director of Family Behavioral Health and Visitation Services.

Cindy explains that the ideal outcome of Children's Targeted Case Management Services is for parents to become informed about resources and be able to effectively advocate for their child. "This is child and family-centered planning," notes Cindy. "For children who need mental health treatment, we can assist the parent or caregiver, teach the family to maximize the benefits of the treatment, and we can do continuous assessment for service planning." Cindy explains that KBH can exit the case management process when parents feel comfortable about going forward on their own.

The continuum of services which is organized through Children's Targeted Case Management, can then integrate with other services to support children and their families, such as the School-Based Program, Medication Clinic, Outpatient Services or Family Behavioral Health and intensive home-based treatment.



Cindy Pooler

Children's Targeted Case Management is an excellent addition to the continuum of services offered to children and families at KBH. Please contact Cindy Pooler directly for further information or to make a referral to the program.

"Our program goals include developing a sound, effective program to help parents learn advocacy skills, learn about local resources, and utilize natural supports."

"Referrals will come from within our agency," explains Cheryl, "as well as from outside agencies and parents themselves. Children who carry diagnoses of mental health, mental retardation, or autism spectrum disorders and have Maine-Care are eligible for the service. Our program goals include developing a sound, effective program to help parents learn advocacy skills, learn about local resources, and utilize natural supports."

Cindy Pooler refers to the State of Maine's wraparound process which emphasizes a highly individualized planning process aimed at helping a child. "The goal is to be family-centered in our approach, to be strengths-based, and to meet a child's needs both within and outside of the human services system, while they remain in their homes and communities if at all possible."

KBH PARTICIPATES IN THE CO-OCCURRING STATE INTEGRATION INITIATIVE

Kennebec Behavioral Health’s substance abuse and co-occurring disorders staff and consumers will benefit from a federal project funded by the Substance Abuse and Mental Health Services Administration. Through the Maine Department of Health and Human Services, this grant will focus on developing infrastructure that will make it possible for providers to offer integrated, co-occurring treatment services. A co-occurring disorder is one in which a person abuses substances and is also diagnosed with a mental illness.

As a partner site, KBH will implement new co-occurring approaches over the 18 month course of the grant, helping to remove structural barriers to integrated treatment at the policy, funding, contracting, training, and program levels.

Examples of integrated co-occurring services include screening for both psychiatric and substance use disorders, integrated assessment of both conditions, treatment planning for both conditions, crisis intervention protocols for both disorders, education on co-occurring disorders, motivational intervention for either or both disorders, and educational or motivational interventions for parents or caregivers who are receiving care for emotional disturbance. These represent several, but not all, services which attempt to integrate treatment.

Consumers with co-occurring conditions have historically not received the more cost-effective, integrated treatment they need because of structural and philosophical divisions between the behavioral health and substance abuse treatment systems. This project has the potential to establish a structure which will maximize successful outcomes for these individuals.



Bob Long, LCPC/LADC/CCS
Administrator of Access & Outpatient Services

Boards of Directors

Kennebec Mental Health Associates

Sally E. Dyer, *President*

Elaine E. Fuller, *Vice President*

William I. Branch

Rep. Donna W. Finley

Samuel N. Goddard

Fr. Philip A. Tracy

Carol A. Welch

KMHA Foundation, Inc.

Keith J. Gunning, *President*

Sheryl A. Milliard,
Vice President

Suzanne I. Uhl-Melanson

Carol A. Welch

Lucille D. Zelenkewich

KMHA Real Estate, Inc

Clifford A. Manchester,
President

Norman St. Hilaire,
Vice President

James E. Coffin

Sally E. Dyer

Matthew Pooler

KBH Programs & Services

Terri T. Watson, *President*

Gisselle M. Hertler,
Vice President

Rep. Marilyn E. Canavan

Rep. Patrick S.A. Flood

Samuel N. Goddard

Carol A. Norcross

James R. Schmidt

2008 Municipal Contributions

Albion	Dresden	Norridgewock	Sebec	Vassalboro
Alna	Embden	Phillips	Sidney	Wales
Anson	Fairfield	Pittsfield	Skowhegan	Waterville
Benton	Farmingdale	Pleasant Ridge	Smithfield	Wayne
Burnham	Freedom	Plantation	Solon	West Forks
Canaan	Hallowell	Plymouth	Somerville	Plantation
Caratunk	Islesboro	Readfield	The Forks	Winslow
China	Litchfield	Richmond	Plantation	Winthrop
Cornville	Madison	Rome	Thorndike	
Detroit	Manchester	Searsmont	Troy	
			Unity	

THANK YOU

INTERNS: BENEFITS THREE WAYS

When University of Maine at Farmington psychology major Tory McKenney needed some additional academic credits, her advisor had an idea. Having sent other students to Kennebec Behavioral Health, she suggested that Tory finish credits by taking an internship at the Access Center at KBH. In a whirlwind senior year, Tory got her academic credits, worked part-time at KBH, and also got the experience that helped her determine that she wanted to go to graduate school and further her education in mental health. Before she even graduated from UMF she was also offered a full-time job at KBH and started immediately.



Tory McKenney

Now, after doing intake interviews with persons with mental illness, making follow-up calls, making electronic entries as an intern, Tory has been hired as an Access Center Specialist. Not only was the psychology major able to land a job in a mental health center, but she has determined that she wants to prepare to further her education as a nurse practitioner specializing in mental health.

Tory is not the only intern who was able to turn an internship at KBH into a full-time job. Our employees who stay after an internship are proof that it's good for the student intern, good for Kennebec Behavioral Health, and good for keeping Maine graduates in the State of Maine. The University of Maine at Orono, Farmington, and Augusta are only three examples of programs which have recently placed student interns with KBH. We offer internships for undergraduates as well as graduate students who are pursuing social work or mental health care provider degrees.

The benefits are accruing in three ways. The interns get a great professional experience, our programs get the benefit of getting work done by students bringing the latest research and evidence-based skills from the universities. Maine gets another benefit when graduates and professionals stay to work at settings like KBH which they know and respect.

Go to www.kbhmaine.org for more information on mental health topics.

The results are in...

Summer 2008 Client Satisfaction Survey

The survey took place during June 2008. A total of 643 surveys were handed out to clients and 492 were returned. All Kennebec Behavioral Health programs were surveyed at this time.

These survey results were similar to many of the other surveys conducted in the past. 98.75% of clients indicated that they were satisfied with the services they were receiving. 98.95% of respondents felt that services at KBH have helped them and 98.54% would recommend KBH to others who need help.



- Overall Quality of Care - **98.75%** • Access to Services - **98.17%**
- Comfort & Cleanliness of Facilities - **98.15%** • Courtesy & Respect - **98.79%**
 - Confidentiality - **98.78%** • Accessibility - **96.26%**
- Information about payment - **98.40%** • Outcomes - **98.95%**

“To aim at excellence, our reputation, and friends, and all must be ventured; to aim at the average we run no risk and provide little service.”

- Oliver Goldsmith

