

The Mind's Eye

A newsletter from Northern Kentucky's Mental Health Community

NAMI Dedicated to Improving Lives

The National Alliance for the Mentally Ill (NAMI) is a grass-roots, self-help, support, education and advocacy organization dedicated to improving the quality of life for all people affected by severe mental illnesses.

"We should not feel embarrassed or guilty about mental illness," said Dr. Harry Mills, President of NAMI Kentucky. "It is nobody's fault, no more than any other medical problem would be."

NAMI serves Kentucky with five initiatives: family education programs; support for families and consumers; state, local and federal advocacy; ministry development and interaction with the faith community; and development of a mental health interface with the criminal justice system.

More Facts About NAMI

- NAMI is "The Nation's Voice on Mental Illness" advocating for the rights of individuals with brain disorders; representing them and their families at the federal, state and local levels of our society.
- Nationally, NAMI has aggressively pressed the issue of continued development and research for more effective medications and treatment.
- NAMI was founded in 1979. By 2001, it grew to a membership of 220,000 with affiliate groups in all 50 states, Puerto Rico, the US Virgin Islands, American Samoa and Canada.

- NAMI in Kentucky has an economic and culturally diverse membership of more than 1500 individuals serving communities across the state.

- NAMI works with more than 27 Kentucky agencies, including the Department of Mental Health, seeking to improve the quality of care for the mental health community.

What NAMI Can Do For Consumers and Families

- Provide free education for families facing mental health issues to help them develop communication and coping skills, self-care strategies and problem solving abilities. These courses address mental health issues, brain biology, diagnosis, medication, treatment options, rehabilitation and other concerns.
- Supply educational materials and information on various subjects related to mental illness.
- Help families find mental health services and deal with legal and criminal justice issues. NAMI can help direct families to find SSI and SSDI benefit options, insurance and other related benefits.
- Advocate and intercede for persons with mental illnesses in cases involving violations of human rights, discrimination and abuse.

- Provide support services for families and loved ones with group meetings, functions and year-round activities all across Kentucky.

Facts about Mental Illness

- Mental illnesses are physical brain disorders that profoundly disrupt a person's ability to think, feel and relate to others and his or her environment.
- Mental illnesses are more common than cancer, diabetes or heart disease. One in every five families has an affected family member.
- Five million Americans, at least 160,000 of them Kentuckians, experience an acute episode of mental illness each year.
- One in ten children and adolescents have mental illnesses severe enough to cause some level of impairment, yet fewer than one in five of those young people receive treatment.

NAMI can help.

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The views expressed in this article are those of NAMI and do not necessarily represent the views of other partners in this publication.

The Mind's Eye

A partnership of:

NorthKey Community Care

Mental Health Association of Northern Kentucky

Recovery Network of Northern Kentucky

NAMI Northern Kentucky

Northern Kentucky is a community whose agencies work collaboratively in many ways to better the lives of its citizens. Resources are pooled, information is shared and creativity is promoted when the best of organizations is brought together.

The Mind's Eye is another one of these shared efforts. NorthKey Community Care, the Mental Health Association of Northern Kentucky, the Recovery Network of Northern Kentucky and the National Alliance for the Mentally Ill Northern Kentucky are working together to give community members a "snapshot" of mental health in our region: the services, the goals and the issues. Thank you for reading.

Psych “Managed Care” is a Cruel Hoax

It is 12:30 A.M. in a comfortably lit, carpeted hallway of a behavioral health facility in a local hospital. A psychiatric nurse walks arm in arm with a tearful patient who is suffering from depression and cannot sleep.

The patient is in the hospital for two weeks during which medication changes and talk therapy will be provided by a team of nurses and a doctor working together to help her recover.

That was in the days before managed care. Today a nineteen-year-old young woman sits with her knees drawn up, not looking at anyone in the room where patients sit to watch TV. She was hospitalized last week for the maximum of five days allowed by her HMO under managed care. Two days ago, she was readmitted. Her wrists have fresh stitches over self-inflicted cuts. Tears stream down her young face from swollen, bloodshot eyes. What is wrong with this picture? According to many physicians, nurses and patients: just about everything.

The only good thing to be said for managed care is that, in the best of all possible worlds, therapeutic decisions made by one doctor would be scrutinized by other physicians. The reality, far from the best of worlds, is simply this: the bottom line of managed care is profit, not patient care. We live in a make-money nation that has its greedy talons so deeply entrenched in our health care system that it now takes an act of congress to allow new mothers to stay in the hospital more than one night when they deliver.

Length of stay in the hospital is a function of the policy the individual buys and it is pretty much cast in stone. It has little to do with treatment decisions, and treatment may be denied because the managed care company decides the patient no longer needs to be in the hospital. This is one of the things that make people very angry.

Andrew Solomon, in his recent article in the *New Yorker*, writes that

most managed care companies are keen on medication, which is relatively cheap, and not very keen on talking therapies and hospitalization. He goes on to quote Sylvia Simpson, a physician at Johns Hopkins: “I spend more and more time on the phone with managed care companies trying to justify patients’ need to stay in the hospital.

Frequently, when a patient is still very, very ill and unable to function-if he’s not acutely suicidal that day, authorization for coverage of further in-patient stay is denied.” Furthermore, the HMO may have an approved list of medications that attempt to dictate to the physician which medicines may be prescribed. Again, an appeal must be made. So the doctor starts writing more letters. Physicians also fill out forms to apply for more out-patient sessions because the number of sessions permitted by the HMO is unrealistic. “It’s a totally new way of practicing,” says one psychiatrist. “It’s very discouraging.” Seasoned, experienced doctors find the new way of practicing is forcing them to reconsider when they’ll retire. The absurd degree of bureaucratic hassle is pushing them toward it quicker rather than later. But this isn’t the only loss in the mental health field. The number of people going into psychiatric residency is down 45%. Among these, many will study psychopharmacology because psychotherapy both in and out of the hospital is being handled by social workers and masters level people. The days of receiving psychotherapy, medications, and hospital care from the same physician are quickly dwindling. Overall, from the physician’s point of view, patients are receiving a poorer and more limited amount of care under managed care.

And what about the psychiatric nurses? “It’s tragic what’s happening to the nurses,” says one psychiatrist. “They came into the field to help people and now they’re filling out forms.” As with doctors, nurses find the length of stay to be one of the most noteworthy changes in the recent years of

managed care. Patients used to stay two to five weeks, and now they’re cycling in and out of the hospital in four to five days. At some hospitals it takes two hours to do an intake,

and nurses may come back the next day to find the patient discharged. Patients in crisis often don’t like or can’t handle the sometimes-hostile environment of the hospital. Intake and discharge paperwork done by the nurses is greatly increased by the shorter five-day hospital stay mandated by most HMO’s. In former days, nurses had a lot of one-to-one interaction with the patient, now they are discouraged from doing so. The time a primary care nurse spends with the patient may be limited to ten minutes standing in a hallway. His or her duties include checking that all the blood work is done - again, more paperwork and less patient contact.

Indeed, according to a recent article from the Associated Press, 36-year-old executive and publisher J. Timothy Hogan did kill himself and left a four-page suicide note indicting the health care system. His HMO had no listings for psychiatrists, psychologists or mental health counselors.

Is this what it will take for the revolutionary changes needed now in order to include mental health providers in future directories? How many successful suicides will it take before psychiatric units in hospitals revert to “safe” places? Instead of moving forward toward more successful treatment and patient care, we seem to be moving backward. When good doctors and nurses are so frustrated with the system that they are getting out of the field, it is the patient who suffers. And that’s the bottom line. Our health care system is for profit, not for patient care.

This article contains excerpts from an article originally written by Cecelia Shoener. It was reprinted here with permission from the author.

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- A psychiatrist speaking on HMO practices”

Who We Are...

The Recovery Network of Northern Ky (RNNK) is a consumer operated organization that services persons living with mental illnesses. The RNNK also serves the homeless through a collaborative grant with other providers.

RNNK services include:

- ✓ Resumes/Cover Letters
- ✓ Job Resources
- ✓ Peer Support
- ✓ Computer Training
- ✓ Support Groups
- ✓ Volunteer Opportunities

Who We Are...

NorthKey Community Care is a community mental health center which provides mental health, substance abuse and developmental disability services to the eight counties of Northern Kentucky: Boone, Campbell, Carroll, Gallatin, Grant, Kenton, Pendleton and Owen. Services are offered for adults, children and families. Some of these services include:

- ✓ Individual and family therapy
- ✓ Psychiatric evaluations
- ✓ Inpatient treatment for children with severe mental health issues
- ✓ Drug and alcohol counseling
- ✓ Case management
- ✓ Work habilitation programs
- ✓ Supports for Community Living (SCL)
- ✓ School-based services
- ✓ Therapeutic rehabilitation programs
- ✓ Intensive outpatient programs for substance abuse problems
- ✓ Substance abuse prevention services
- ✓ Day treatment programs
- ✓ Employment rehabilitation
- ✓ Residential services
- ✓ And many more...

Many of these services receive support through local, state and federal grants and can therefore offer services free-of-charge or on a sliding fee scale. Medicaid and Medicare are also potential payer sources for some services.

To access NorthKey's services, contact our ACCESS line at 859-331-3292 or toll-free 877-331-3292.



Crisis Services Fill Community Need

Proposals and plans have become full-blown services in NorthKey's Crisis Stabilization programs.

For years, the Northern Kentucky community had asked for crisis services, and with a grant from the Department of Mental Health, NorthKey is now able to answer.

Adult Crisis Services Run 24/7

In October, NorthKey began offering crisis stabilization services for adults 24 hours a day, 7 days a week. Staffed by two therapists, the program has already served more than 80 individuals this fiscal year in all eight counties of Northern Kentucky.

"We hit the ground running," said Todd Teismann, Adult Crisis Stabilization Coordinator. "There was no time to just 'get our feet wet.' These services were desperately needed in the region, and we wanted to provide them as quickly and effectively as possible."

The program aims to prevent needless hospitalization or trips to the emergency room for adults in a psychiatric crisis.

When the crisis program is contacted, a therapist will meet the individual at a secure location to determine the level of that individual's needs. The therapist will provide short-term therapy, if deemed necessary, and help the individual with a short-term plan to see him or her through the crisis situation. The crisis clinicians will also link the individual with other needed services in the community, including outpatient therapy, if the individual is not already receiving it.

NorthKey's crisis team is in the process of hiring a case manager and another therapist to help fill the need. The staff is also exploring options for overnight therapeutic treatment for adults in crisis.

"We've come a long way," said Teismann, "but we are still looking for ways to innovate to better serve the community."

To access Adult Crisis Stabilization Services, call NorthKey's ACCESS line at 859-331-3292.

Children's Crisis Expands

Children's Crisis Stabilization clinicians work as counselors, advocates and educators for the children and families they serve. The program has been very successful in its nearly three years of operation, serving more than 126 children this fiscal year alone.

The team has been successful in its many roles. With the addition of a new therapist, NorthKey's Children's Crisis Stabilization is

expanding its mobile crisis unit into Grant and Pendleton Counties. The program had been offering evaluations for this part of the region, but is now able to provide short-term intensive therapy for children who need it.

Short-term intensive therapy usually involves meeting with a child and/or his or her parents one to four times a week, both at home and school, for one to three months. The child receives individual and/or family therapy during that time. In addition, connections are made with other services in the community which will help the child through treatment.

The program will continue expanding into Owen, Carroll and Gallatin counties with the hiring of an additional therapist in the coming months.

To make a referral to the Children's Crisis Stabilization program, contact NorthKey's ACCESS line at 859-331-3292.

Partial Hospitalization Begins

Another major milestone in the development of NorthKey's crisis stabilization services has been the creation of a Partial Hospitalization program out of NorthKey's Children's Intensive Services.

The program can serve as a "step down" for adolescents age 12-18 who have already received inpatient care or as a more intensive treatment for adolescents who need a more structured environment than home and school can offer.

The program is made up of an educational component; therapeutic groups; medication evaluation and monitoring; individual and family therapy; transportation to and from the program; and outreach through home visits and service collaboration.

"The services we're providing are new and innovative for Northern Kentucky," said Nancy McKee, Partial Hospitalization coordinator. "This is a referral option for clinicians that hasn't ever been present before."

"We have a group of dedicated staff who are anxious to start working with other groups in the community to provide these much-needed services for adolescents," she continued. "We have the opportunity to really make a difference in a child's continuum of care, making the transition from inpatient care or outpatient care nearly seamless."

To make a referral to the Partial Hospitalization program, contact NorthKey's ACCESS line at 859-331-3292.

The Mental Health Association of NKY

Celebrating 50 Years of Service

The Mental Health Association was formed in 1954 to offer hope for recovery to individuals who, at that time, received no care. Since then, the Mental Health Association has led advocacy efforts and provided support, information and referrals to promote mental wellness.

For 50 years we have worked to create a just, humane and healthy community. Yet today, it is estimated that two-thirds of the more than 20% of our general population and the thousands of people in jails that are suffering from mental health problems are receiving no care or inadequate care.

The Mental Health Association will do its best to improve attitudes toward mental illnesses so that the people who suffer from them may be accorded the respect and dignity they deserve. Everyone is worthy of achieving his or her full potential free from stigma and prejudice.

To celebrate 50 years of service, the MHA will keep advocating for increased funds for the region so that children, adolescents, adults and older adults may receive appropriate treatment. The MHA will also host the first-ever Northern Kentucky Mental Health Reform conference.

Awareness activities will focus on teaching people to recognize the signs of mental illnesses and how to get information and treatment that is needed to fully recover. It is the organization's hope that mental health concerns are seen as an equal partner with physical health problems.

The Mental Health Association will continue streamlining services to maximize their effectiveness and meet growing demand.

Take a look at our new and improved website: www.mhanky.org.

The website is now a source for the widely utilized Resource Directory, free education programs, fact sheets, answers to frequently asked questions, links to legislators, online screening sites and other websites offering science-based information.

The Mental Health Association of Northern Kentucky is proud to be 50 years old! Much has been accomplished, so much due to the many great supporters who care about living in a healthy society. For another 50 years, the MHA will strive to spread tolerance and awareness, improve mental health services and promote mental wellness.

The vast majority of mental illnesses are treatable, and people significantly improve with proper care. For more information on how you can become a member of the Mental Health Association or to ask questions concerning your health or the health of a loved one, call 859-431-1077 or visit www.mhanky.org.

Services of the MHA of Northern Kentucky:

Free Education Opportunities (schedule enclosed) ♦ Mental Health Consulting ♦ Payee Program ♦ Depression Support Group ♦ Information and Referral ♦ Exodus Jail Visitation ♦ Christmas Day Dinner Celebration ♦ Community Education/Training Mental Health Screenings ♦ Advocacy



The Mental Health Association of Northern Kentucky
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