



## Ombudsman Comments on the Year 2009

This issue of the Ombudsman Report is a yearly summary of efforts dedicated to the clients who are served by the **Wyoming Substance Abuse & Mental Health Ombudsman Program**. Information from clients provides data that are very informative and lay the groundwork for the goals and objectives for the next one to three years of the program.

Two hundred sixteen clients were assisted during the year. However, this number does not take into account clients who called a second time with a different issue. We assisted clients from 18 of the 23 counties in Wyoming. Numbers do not count the 31 other people who contacted the Ombudsman from outside the state. Our youngest client served was five years old

(referred by a parent) and the oldest was 91. Some of the cases were open for less than an hour because all that the client needed was information, but many other cases took much longer. For example, one current case we are trying to settle involves an inheritance problem and difficulty getting vital records. This case has been open for almost four months, and continues to require phone calls or home visits at least once a week.

The **Substance Abuse & Mental Health Ombudsman Program** serves a client population that is large and varied. Our successes have been numerous and the gratitude of our clients has been heart warming.

—Martha Mullikin

## Ombudsman Professional Development in 2009

*The SAMH Ombudsman attended several workshops and conferences this year to continue her professional development, to increase awareness of current substance abuse and mental health issues, and to educate audiences about the program's quality services for a diverse population. Educational opportunities such as these also allow the Ombudsman to network with other professionals, and individuals with substance abuse and mental health issues who can provide insight into their experiences. The following conferences and workshops were attended by the Ombudsman:*

—Generations 2009 Conference: Mental Health & Substance Abuse Treatment for Adults  
—Foundations of Dementia Care Seminar  
—NAMI Family-2-Family Training  
—DOH Employment Options for the Mental Health Community  
—University of Nevada Reno Addiction Severity Index (ASI) Training  
—Department of Health Substance Abuse Treatment for Persons with Co-Occurring Disorders  
—WYO Self-Advocates Advisory Group Conference

## 2010 Goals Outlined for Ombudsman Program

### Data-Driven Goals:

The Ombudsman will

- Visit Mental Health Centers, public health nurses, crisis centers, DFS offices, and treatment centers in all areas of the state;
- Provide Information Table at any state or regional conference where invited;
- Visit Homeless Shelters around the state;
- Make contact with minority organizations for possible presentations;
- Visit the Counseling Centers at the University of Wyoming and Community Colleges.

### Program Goals:

The Ombudsman will

- Oversee the update of the Website each quarter;
- Oversee the redesigning of the Ombudsman pamphlet;
- Complete a Power Point program for Ombudsman presentations;
- Redesign Presentation Boards for information tables;
- Meet with SAMH Division to discuss concerns and systemic issues;
- Participate as an active member in the Wyoming Suicide Prevention Task Force;
- Attend the Governor's Mental Health Planning Council meetings;
- Compile Quarterly and Yearly Reports containing goals for coming year based on data analysis.



**Clients Served by Issue: 1/1/2009-12/31/2009**

The data show 41 client issues, ten of which indicate significant numbers. "Care & treatment" and "access to information" were the most prevalent. Many clients who contacted SAMHOP were in search of assistance with both these issues, as one leads to the other. When a client calls regarding a housing issue, the initial discussion usually involves both "employment" and "financial need." This is when it is important for the Ombudsmen to be aware of current situations in communities where housing space is available. Many agencies have waiting lists that can be quite lengthy and specific requirements for clients. "Discharge planning" and "locating appropriate placement" are two of the main concerns social workers and case managers have when calling an Ombudsman. Some agencies will not take patients with co-occurring diagnoses, and Alzheimer patients and patients with eating disorders can sometimes be difficult cases to appropriately place.

<i>Issue</i>	<i>First Quarter</i>	<i>Second Quarter</i>	<i>Third Quarter</i>	<i>Fourth Quarter</i>	<i>Yearly Total</i>
Abuse, Neglect, Exploitation	1	1	2	4	8
Access to Information	2	6	20	13	41
Access to Mental Health/SA Services	9	7	8	7	31
Admission	0	1	0	1	2
Advance Directives	1	0	0	1	2
Anxiety	2	1	3	1	7
Care/Treatment	9	7	13	13	42
Child Custody/Visitation	1	2	0	2	5
Child & Family Services	2	1	1	0	4
Commitment to Mental Health Facility	0	4	4	2	10
Criminal Justice System	3	4	5	2	14
Dental	0	1	0	1	2
Discharge Planning	1	13	6	5	25
Discrimination/ADA	2	0	1	1	4
Emergency Detention Cost	2	0	1	0	3
Employment	1	4	4	3	12
Eviction	0	2	0	0	2
Financial Exploitation	0	1	0	3	4
Financial Need	10	5	4	9	28
Guardianship/Conservator	6	2	3	4	15
Health Insurance	0	1	2	0	3
Home Health Care	0	1	0	5	6
Housing	4	14	6	7	31
Legal	1	2	11	10	24
Locating Appropriate Placement	3	13	4	4	24
Marital Relationship	0	4	3	2	9
Medicaid/Medicare	1	3	1	6	11
Patient Rights	7	1	2	4	14
Premature Release from Inpatient Care	0	1	0	1	2
Prescription Drugs	3	1	5	4	13
Provider Concerns	0	1	0	5	6
Representative Payee	2	3	4	8	17
Sexual Assault	1	0	0	0	1
Social Security	1	0	2	1	4
Suicidal	0	1	0	2	3
Transfer	0	2	1	2	5
Transportation	2	0	1	1	4
Other	0	0	5	1	6
Unknown	0	2	0	0	2
<b>TOTALS</b>	<b>77</b>	<b>112</b>	<b>122</b>	<b>131</b>	<b>446</b>



## Variety of Challenges and Opportunities Highlight 2009 SAMHOP Year

### Highlights of the State Ombudsman's activities for 2009:

- Participated as an active member of the Wyoming Adult Protective Services Team.
- Participated as an active member of the Wyoming Suicide Prevention Task Force.
- Attended the Governor's Mental Health Planning Council meetings and provided regular reports to address concerns with the mental health system.
- Provided SAMHOP information at NAMI Wyoming's Annual Conference.
- Presented at the Wyoming Self-Advocates Advisory Council Consumer Conference.
- Displayed an educational booth at the Wyoming Aging Conference.
- Participated as an active member of C.A.S.E. (Coalition of Agencies Serving the Elderly).
- Attended Substance Abuse and Violent Crime Advisory Board meeting.
- Provided an educational booth at the Cheyenne Regional Medical Center Education Fair.
- Attended Starfish Conference.
- Attended Military Affairs Conference.
- Visited numerous organizations and agencies to ensure people are aware of the services SAMHOP provides and how it can help their clients; visits such as these allowed people to speak one-to-one with the Ombudsman about any concerns.
- Visited community health centers to provide educational information about SAMHOP.
- Met with Substance Abuse and Mental Health Division staff to discuss specific concerns as well as systemic issues.

### Clients Served by Referral Source: 1/1/2009 to 12/31/2009

There were 19 different referral sources named in the 2009 data of which Mental Health Centers were the largest source; NAMI was another large referral source. These referrals appear to be a result of the number of Ombudsman visits made to Mental Health Centers around the state. I visited almost all the centers and met with the directors and many of the therapists. I staffed an information table at the NAMI Conference in Casper and I visited the NAMI Casper office on each trip to Casper; I have visited with various NAMI members around the state. After taking the Family-to-Family class, I frequently recommended it to persons who called for assistance. My vendor table at the Long-Term-Care Waiver Case Manager's Conference gave me an opportunity to meet many nurses and social workers statewide. Frequent visits with the LTC Ombudsman and P&A have fostered a feeling of camaraderie and referrals back and forth.

<i>Referral Source</i>	<i>First Quarter</i>	<i>Second Quarter</i>	<i>Third Quarter</i>	<i>Fourth Quarter</i>	<i>Yearly Total</i>
Attorney	0	1	0	1	2
Department of Family Services	0	2	0	4	6
Developmental Disabilities Division	0	0	0	1	1
Faith-Based Organization	0	0	2	1	3
Friend/Family	1	2	14	2	19
LTC Ombudsman	1	5	1	0	7
Mental Health Center	0	10	9	10	29
Mental Health Division	0	0	0	4	4
NAMI	0	6	3	3	12
Nursing Home	0	1	1	2	4
P and A	0	1	1	2	4
Posters/Flyers	0	6	2	3	11
Presentations	0	2	2	2	6
Public Health	0	1	1	0	2
Self (Previous Client)	0	0	0	1	1
Social Worker	0	0	4	5	9
Wyoming Guardianship Corporation	0	0	2	6	8
Wyoming State Hospital	0	0	1	2	3
Other	0	0	3	2	5
Unknown	1	1	7	2	11
<b>TOTALS</b>	<b>3</b>	<b>38</b>	<b>53</b>	<b>53</b>	<b>147</b>



**Clients Served by Diagnosis: 1/1/2009 to 12/31/2009**

“Alcohol abuse disorder” is the highest occurring diagnosis, and for many clients this is a co-occurring disorder. Currently the database does not indicate if a client has a co-occurring diagnosis so it is impossible to know the exact number. This is an issue that will be addressed on the intake form. Many residential treatment centers do not take clients with co-occurring disorders, so it is important that we are able to identify complete diagnoses. “Drug abuse,” “bipolar” and “schizophrenia” are three other areas high in diagnosis, which indicate areas the Ombudsmen need to explore for possible State treatment facilities. Often residential treatment facilities are full with lengthy waiting lists, but many clients are in need of immediate assistance. This data field also may be an indicator of where Ombudsmen need training. Many opportunities are provided by the Department of Health and attending these sessions can provide necessary knowledge as well as avenues for networking.

<i>Diagnosis Description</i>	<i>First Quarter</i>	<i>Second Quarter</i>	<i>Third Quarter</i>	<i>Fourth Quarter</i>	<i>Yearly Total</i>
Alcohol Abuse Disorder	1	16	14	6	37
Anorexia, Bulimia, Other Eating Disorder	0	1	0	1	2
Anxiety Disorder	1	1	2	3	7
Attention Deficit/Hyperactivity Disorder	0	0	3	0	3
Autism	0	1	0	0	1
Bipolar/Manic	1	8	6	5	20
Dementia	0	1	0	2	3
Drug Abuse Disorder	1	6	6	3	16
Major Depression	0	5	4	3	12
Mental Retardation	0	2	0	7	9
Obsessive Compulsive Disorder	0	0	0	1	1
Panic Disorder	0	0	0	1	1
Paranoid or Delusional Disorder	0	2	1	5	8
Personality Disorder	0	0	3	3	6
PTSD	1	1	3	1	6
Schizophrenia	0	11	9	11	31
Sexual Abuse, Physical Abuse	0	1	0	0	1
Traumatic Brain Injury	1	1	0	1	3
Not Applicable	0	1	1	2	4
Other	2	6	10	5	23
Unknown	1	6	11	15	33
<b>TOTALS</b>	<b>9</b>	<b>70</b>	<b>73</b>	<b>75</b>	<b>227</b>

**Clients Served by Living Arrangements: 1/1/2009 to 12/31/2009**

Data in this field present a primary concern with the number of homeless clients living in Wyoming. With many of our towns being small, far apart, and with few homeless shelters, winter weather can pose serious problems. The only problem that can be solved is the number of shelters available; however, many group homes, assisted-living facilities, supervised housing, and low-income housing often have no vacancies and long waiting lists. The state Ombudsmen need to find places in each town that can provide assistance to these people. The data from this field will be of ongoing interest to see what changes occur in the coming months.

<i>Living Arrangements</i>	<i>First Quarter</i>	<i>Second Quarter</i>	<i>Third Quarter</i>	<i>Fourth Quarter</i>	<i>Yearly Total</i>
Alone/Independent	7	5	16	13	41
Correctional Facility/Jail	3	1	4	0	8
Group Home	2	12	2	4	20
Homeless	2	5	6	4	17
Nursing Home/Assisted Living	3	3	4	4	14
Psychiatric Inpatient Hospital	1	1	8	13	23
Residential Treatment Hospital	2	2	0	0	4
Supervised Apartments	0	2	2	5	9
With Child Under Age 18	0	3	0	1	4
With Friends/Other Adults	2	0	4	1	7
With Other Family Members	5	5	4	8	22
With Spouse/Domestic Partner	3	4	4	6	17
Unknown	10	10	8	2	30
<b>TOTALS</b>	<b>40</b>	<b>53</b>	<b>62</b>	<b>61</b>	<b>216</b>



### Clients Served by County: 1/1/2009 to 12/31/2009

The data indicate the Ombudsman Program's greatest successes as well as a needed goal area. Most of the first months on the job for me were spent getting to know the people and agencies of Laramie County. Taking the NAMI Family-to-Family class in Cheyenne helped me get to know that organization. Attending conferences, community meetings, and visiting many agencies gave me a chance to share with people what an Ombudsman--specifically what the Substance Abuse and Mental Health Ombudsman--does. I received many additional calls from agencies after they were helped the first time, and the results of my visits around the state are indicated in these data. A trip to the Big Horn Basin shows successful results by the number of referrals. Trips to Casper kept the Ombudsman Program on the minds of people there. Frequent visits and phone calls to Fremont County added to their view of SAMHOP as a "can-help" agency. The results of adding two part-time Ombudsmen are clearly indicated by number of clients served in their areas. They have attended health fairs, done presentations and distributed pamphlets to let their communities become aware of the SAMHOP services. Even though we have sent information and talked to people there, the northeast section of the state has not had an onsite visit by an Ombudsman, which indicates an obvious need that will be addressed in the near future.

<i>County</i>	<i>First Quarter</i>	<i>Second Quarter</i>	<i>Third Quarter</i>	<i>Fourth Quarter</i>	<i>Yearly Total</i>
Albany	0	2	2	0	4
Big Horn	1	0	0	1	2
Campbell	0	0	0	0	0
Carbon	1	1	2	2	6
Converse	0	0	1	1	2
Crook	0	0	0	0	0
Fremont	3	3	1	3	10
Goshen	1	1	0	1	3
Hot Springs	0	0	1	1	2
Johnson	0	0	0	0	0
Laramie	13	20	20	21	74
Lincoln	1	2	0	1	4
Natrona	2	3	5	2	12
Niobrara	0	0	0	0	0
Park	2	2	3	1	8
Platte	2	0	0	1	3
Sheridan	1	0	4	0	5
Sublette	0	1	0	1	2
Sweetwater	1	1	0	1	3
Teton	2	1	0	0	3
Uinta	4	3	10	23	40
Washakie	0	0	0	0	0
Weston	0	0	2	0	2
<b>TOTALS</b>	<b>34</b>	<b>40</b>	<b>51</b>	<b>60</b>	<b>185</b>

### Clients Served by Ethnic Status: 1/1/2009 to 12/31/2009

Data clearly indicate that the majority of SAMHOP clients are Caucasian, although the number of "unknowns" is very high. A SAMHOP emphasis will be to become more thorough and improve intake data, as well as increase outreach to minority clients, especially through contacts with agencies that reach high numbers of minorities.

<i>Ethnic Description</i>	<i>First Quarter</i>	<i>Second Quarter</i>	<i>Third Quarter</i>	<i>Fourth Quarter</i>	<i>Yearly Total</i>
American Indian/Alaska Native	1	0	2	3	6
Asian	1	0	0	0	1
Black/African American	1	1	0	1	3
Caucasian	28	26	23	52	129
Spanish/Hispanic/Latino	0	0	3	0	3
Other	0	0	1	0	1
Unknown	9	26	33	5	73
<b>TOTALS</b>	<b>40</b>	<b>53</b>	<b>62</b>	<b>61</b>	<b>216</b>



**Clients Served by Outcome: 1/1/2009 to 12/31/2009**

<i>Outcome</i>	<i>First Quarter</i>	<i>Second Quarter</i>	<i>Third Quarter</i>	<i>Fourth Quarter</i>	<i>Yearly Total</i>
Complaint Was Unsubstantiated	2	0	2	2	6
Corrective Action Taken	3	0	1	0	4
No Further Action Can Be Taken	13	7	5	4	29
Referred to Another Agency	6	0	0	0	6
Satisfactorily Resolved	15	46	49	31	141
Withdrawn/No Response	1	0	3	3	7
Unknown	0	0	0	0	0
<b>TOTALS</b>	<b>40</b>	<b>53</b>	<b>60</b>	<b>40</b>	<b>193</b>

**Clients Served by Service Provided: 1/1/2009 to 12/31/2009**

<i>Service Provided</i>	<i>First Quarter</i>	<i>Second Quarter</i>	<i>Third Quarter</i>	<i>Fourth Quarter</i>	<i>Yearly Total</i>
Coaching/Information	31	40	46	44	161
Informal Assistance/Mediation	10	7	12	21	50
Investigation	7	5	4	4	20
Referral	14	5	12	10	41
Withdrawn	1	1	0	0	2
Other	1	0	0	0	1
<b>TOTALS</b>	<b>64</b>	<b>58</b>	<b>74</b>	<b>79</b>	<b>275</b>

**Clients Served by Special Needs: 1/1/2009 to 12/31/2009**

<i>Special Need</i>	<i>First Quarter</i>	<i>Second Quarter</i>	<i>Third Quarter</i>	<i>Fourth Quarter</i>	<i>Yearly Total</i>
Ambulation Problems	1	1	8	2	12
Blindness/Severe Visual Impairment	1	1	4	1	7
Deafness/Severe Hearing Loss	0	0	1	2	3
Developmental Disability	2	1	3	7	13
Moderate to Severe Mental Problems	2	2	17	28	49
Translation for Other Language	0	0	0	0	0
Other	2	2	4	6	14
Unknown	27	44	30	19	120
<b>TOTALS</b>	<b>35</b>	<b>51</b>	<b>67</b>	<b>65</b>	<b>218</b>

**Clients Served by Gender: 1/1/2009 to 12/31/2009**

<i>Gender</i>	<i>First Quarter</i>	<i>Second Quarter</i>	<i>Third Quarter</i>	<i>Fourth Quarter</i>	<i>Yearly Total</i>
Female	22	36	26	33	117
Male	17	16	38	26	97
Transgender	0	0	0	0	0
<b>TOTALS</b>	<b>39</b>	<b>52</b>	<b>64</b>	<b>59</b>	<b>214</b>

**Substance Abuse  
& Mental Health  
Ombudsman  
Program**

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*...promoting a better quality  
of life for persons affected  
by mental illness and/or  
substance abuse issues.*