



Wyoming Guardianship

# Substance Abuse & Mental Health Ombudsman Program *Quarterly Report*

June 2009

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## Ombudsman Program Activities...

### Conference & Seminars

The *second quarter* of the year has been a busy time in the Ombudsman's office. The weather affected several planned trips but these trips will be made up in the fall. I have set up and staffed vendor/resource tables at annual conferences for Aging, NAMI, and Case Managers. I also set up a table at the Cheyenne Regional Medical Center Education Fair in May. Staffing these vendor/resource tables gives me an opportunity to network with different organizations and agencies and let them know about our services, as well as allowing me to learn about facilities that are available in the state and the region. Our office tries to take advantage of every opportunity to be a part of an appropriate annual conference to make people aware of the Ombudsman's role and to converse one-to-one with constituents.

### Grant Approved

The Substance Abuse and Mental Health Ombudsman Program received notice in May that our grant application to the Department of Health was accepted and the contract signed between the Wyoming Guardianship Corporation and the Mental Health and Substance Abuse Services Division. We are pleased about this funding, which allows us to continue our work advocating for Wyoming residents.

### Medicare Experience

An interesting case this quarter turned into a learning experience for me. An individual called in requesting information about Medicare Part D. The individual was told by his pharmacy that he would have to pay for his medical prescriptions during the time he had been incarcerated. After checking into this issue, I veri-

fied this information with a Medicare Part D Specialist from the Denver Medicare Office. The ruling is that Medicare Part D **does not** pay when an individual is incarcerated. In these cases, payment becomes the county's or individual's responsibility.

### Trainings

I attended two training during the second quarter that were very informative. The Department of Health sponsored a seminar on "Substance Abuse Treatment for Persons with Co-Occurring Disorders," presented by Alan Burden from the Center for the Application of Substance Abuse Technology, Reno, Nevada.

The Generations 2009 conference in Salt Lake City, Utah—"Mental Health and Substance Abuse Treatment for Today's Generations"—had many knowledgeable and up-to-date speakers. I especially learned a great deal about Post Traumatic Stress Disorder and Prescription Drug Abuse.

—Martha Mullikin

## Ombudsman's Activities Second Quarter 2009

### Meetings/Conferences:

- *March 31-April 2:*  
The Generations 2009 Conference, Salt Lake City
- *April 15-17:*  
Case Managers Meeting, Cheyenne
- *April 27-28:*  
Mental Health Planning Council, Casper
- *May 2:*  
National Alliance on Mental Illness (NAMI) Meeting, Casper
- *May 7:*  
APS Team Meeting, Cheyenne
- *May 12:*  
Substance Abuse & Violent Crime Advisory Board, Cheyenne
- *May 12:*  
Future of Substance Abuse Treatment Seminar, Cheyenne
- *May 19-20:*  
Aging Conference, Cheyenne
- *May 28:*  
Cheyenne Regional Medical Center Education Fair, Cheyenne
- *June 16:*  
Substance Abuse Treatment for Persons with Co-Occurring Disorders Training,

## New Guardianship Website

By mid-July our new Internet site will be completed. Log on to [www.wyoguardianship.org](http://www.wyoguardianship.org) to view the improved Website that will have links to information regarding all programs under the Wyoming Guardianship Corporation umbrella. It will show a Board of Directors list and have easy access to SAMHOP Quarterly Reports, organizational newsletters, and other information.





## AARP Website Has “Calculator” to Assist Clients With Questions on Medicare-Part D Selection



Recently, information came across the Ombudsman’s desk regarding Medicare Part D, which is worth shar-

ing. Many of us have friends or family who have questions regarding their Part D selection. This summer, more than one million older Americans will be forced into the Part D “doughnut hole”—a coverage gap in Medicare Part D that leaves individuals on the hook for all of their own Part D costs while they still are paying premiums. The American Association of Retired Persons (AARP) is launching a new, free online resource to help older Americans and others avoid this

dreaded coverage gap. The AARP Doughnut Hole Calculator is available for no cost at:

[www.aarp.org/doughnuthole](http://www.aarp.org/doughnuthole)

It guides visitors through their options using localized information about their plans to determine if or when they will fall into the gap. In less than 15 minutes, visitors can view a graph of their out-of-pocket Part D spending by month, look up lower cost alternatives for their conditions, and print out personalized letters to their doctors or other health care providers to help start a conversation about safely switching to lower-cost alternatives. AARP’s Doughnut Hole Calculator is powered by Destination Rx as part of a special arrangement between AARP and The Centers for Medicare and Medicaid.

### “The Soloist”

*The National Alliance for Mental Health (NAMI) is honored to be screening “The Soloist,” a major motion picture starring Jamie Foxx and Robert Downey, Jr., at their convention in San Francisco, California this month. The story is based on a true story about a schizophrenic living on the streets of Los Angeles. We don’t normally recommend movies but this is a must-see film for people involved with mental health issues.*



## NAMI Supports “Second-Chance Act” and Encourages Programs that Prevent Incarceration of Mentally Ill

The criminalization of people with mental illness is a growing problem. A study released this month in the journal *Psychiatric Services* shows that the prevalence of people with serious mental illness in jails is increasing. The study, which was presented June 1 at a Senate briefing featuring NAMI national board member Fred Frese, found that overall, 16% of jail inmates have a serious mental illness. Even more alarming, 31% of female jail inmates have a serious mental illness. These numbers suggest that up to two million jail bookings every year involve an individual with serious mental illness.

In light of this study, it is more important now than ever before to support programs that help people stay out of jail. In June, the House Appropriations Committee approved the FY 2010 budget for Commerce, Justice and Science programs, which included \$12 million for the Mentally

Ill Offender Treatment and Crime Reduction Act (MIOTCRA). MIOTCRA grants support communities working on crisis intervention teams (CIT), mental health courts, and similar programs that are proven to help break the cycle of incarceration. The bill also includes \$100 million in funding for the Second Chance Act, which supports re-entry programs to help people get the services and support they need to successfully reintegrate into society. The full House was expected to vote on the bill the week of June 15.





## Two New Hires Complete the Staffing for Substance Abuse & Mental Health Ombudsman Program

The state Substance Abuse and Mental Health Ombudsman Program (SAMHOP) became fully staffed with the recent hiring of Cal Furnish in Sheridan, who has joined the program on a part-time basis. He will be visiting agencies and groups to give out information on SAMHOP. He is also available to do onsite assistance for clients in the northern part of Wyoming. Kenna Hill is the other part-time ombudsman in Evanston. She visits agencies and groups in the western part of the state in addition to providing onsite assistance.

### From Sheridan

I'm really pleased to be able to join the Wyoming Substance Abuse and Mental Health Ombudsman Program to connect people with needed programs, services and support. Since the early 70s, I've been fortunate to be able to work with individuals and families in Wyoming as they seek solutions to mental health, substance abuse and other problems. There are so many good services and people in the helping professions in Wyoming, but it is also true that there's sometimes a lot of space between those available services—especially for people who are facing significant and complex challenges. It is easy for them to get off the track as they search for help.

Since I first started talking with Martha and Sue about SAMHOP, I've received many questions about what an ombudsman is—and it is a good question. I've always had a sense that an ombudsman is someone who is both an advocate and a facilitator; someone who understands the needs and priorities of all of the various "players" in this field. Of course, the primary focus is always on the needs of those who we are seeking to help. But if our goal is truly to offer assistance that is both effective and sustainable, then I believe that it's not only possible, but essential, to consider the real needs, assets, capabilities, and priorities of care providers, managers, agencies, families, volunteers...ALL of the potential helpers and supporters who are out there. If everyone who is involved with a client with intense needs can work together, then there's not much that we CAN'T accomplish. If you're thinking that statement is naive, keep in mind that I'm making it based on nearly four decades of working closely with Wyoming people with significant challenges. On the other hand, when key people in the "helper group" get stuck in turf, blame, agendas, defensiveness—those issues that we're all susceptible to—then there's not much that we CAN accomplish, and as usual, the person with the unmet needs is caught in the middle. My belief is that we're all in this together and that's not just lip service. I try to operate day in and day out based on that belief. So I'm looking forward to working from the unique perspective of the ombudsman, to connect with people and make a difference. Thanks for this opportunity! I welcome your questions, ideas and suggestions.

—Cal Furnish

### From Evanston

My name is Kenna Hill and I currently reside in Evanston, Wyoming. As a long-time resident of Uinta County, I am familiar with the southwest area of the state and am pleased to be part the Wyoming Substance Abuse and Mental Health Ombudsman Program. I attended Western Wyoming Community College in Rock Springs for my Associate of Arts Degree and then transferred to the University of Wyoming where I completed a Bachelor of Arts Degree in Psychology. I have experience working in mental health at the Wyoming State Hospital and Wyoming Guardianship Corporation and also within the Developmental Disabilities Division as a direct care provider for an individual with mental retardation. As a representative of the Ombudsman program, I have visited several agencies in Evanston, Kemmerer and the Bridger Valley to introduce myself and distribute information on the program. Some of those agencies include the Wyoming State Hospital, Pioneer Counseling, Evanston Regional Hospital, Frontier Psychological, Cornerstone Behavioral Health, High Country Counseling, MRSI, Department of Family Services, Evanston Police Department and Public Health. I plan to distribute information to these agencies and expand to even more agencies to ensure that there is a community awareness of the Ombudsman program and that individuals have information on where to get assistance.

—Kenna Hill

<b>Clients Served by Diagnosis</b>	
<i>from 4/1/2009 to 6/24/2009</i>	
<u>Diagnosis</u>	<u>Count</u>
Alcohol Abuse Disorder	16
Anorexia, Bulimia, Eating Disorder	1
Anxiety Disorder	1
Autism	1
Bipolar/Manic	8
Dementia	1
Drug Abuse Disorder	6
Major Depression	5
Mental Retardation	2
Paranoid or Delusional Disorder	2
PTSD	1
Schizophrenia (Includes Schizoaffective Disorder)	11
Sexual Abuse/Physical Abuse	1
Traumatic Brain Injury	1
Other	5
Unknown	6



This quarterly data report includes all individuals for whom a formal intake was done during the quarter. This includes cases that may not yet be closed. We are continuing to use entry dates to determine case numbers. If some of the data seem not to total the appropriate number, this could be caused by cases not being closed at this time or information that is not available. Our data show we are reaching individuals in more counties and with different type issues, and referral sources are becoming more varied.

<b>Clients Served by Services Provided</b> <i>from 4/1/2009 to 6/24/2009</i>	
<u>Services Provided</u>	<u>Count</u>
Coaching/Information	31
Informal Assistance/ Mediation	6
Investigation	5
Referral	3
Withdrawn	1

<b>Clients Served by Gender</b> <i>from 4/1/2009 to 6/24/2009</i>	
<u>Gender</u>	<u>Count</u>
Female	36
Male	15

<b>Clients Served by Ethnic Status</b> <i>from 4/1/2009 to 6/24/2009</i>	
<u>Ethnicity</u>	<u>Count</u>
Black/African American	1
Non-Minority/White	26
Unknown	23

<b>Client Outcomes</b> <i>from 4/1/2009 to 6/24/2009</i>	
<u>Outcome</u>	<u>Count</u>
No Further Action Can Be Taken	3
Satisfactorily Resolved	32

<b>Clients Served by Issue</b> <i>from 4/1/2009 to 6/24/2009</i>	
<u>Issue</u>	<u>Count</u>
Access to Information	6
Access to Mental Health Services	6
Admission	1
Anxiety	1
Care/Treatment	6
Child & Family Services	1
Child Custody/Visitation	2
Commitment to Mental Health Facility	4
Criminal Justice System	4
Dental	1
Discharge Planning	12
Employment	4
Eviction	2
Financial Need	5
Guardianship/Conservator	2
Health Insurance	1
Home Health Care	1
Housing	13
Legal	1
Locating Appropriate Placement	13
Marital Relationship	4
Medicaid/Medicare	3
Patient Rights	1
Premature Release from Inpatient	1
Prescription Drugs	1
Provider Concerns	1
Representative Payee	3
Suicidal	1
Transfer	2
Unknown	2

<b>Clients Served by County</b> <i>from 4/1/2009 to 6/24/2009</i>	
<u>County</u>	<u>Count</u>
Albany	2
Carbon	1
Fremont	3
Goshen	1
Laramie	20
Lincoln	1
Natrona	3
Park	2
Sublette	1
Sweetwater	1
Teton	1
Unita	3

<b>Clients Served by Age</b> <i>from 4/1/2009 to 6/24/2009</i>	
<u>Age Range</u>	<u>Count</u>
Under 18	2
18 to 24	6
25 to 44	9
45 to 64	11
65 to 84	1
85 and over	1
Not reported	22

<b>Clients Served by Referral Source</b> <i>from 4/1/2009 to 6/24/2009</i>	
<u>Referral Source</u>	<u>Count</u>
Attorney	1
Department of Family Services	2
Friend/Family	2
LTC Ombudsman	3
Mental Health Center	10
NAMI	6
P & A	1
Posters/Flyers	6
Presentations	2
Unknown	1

<b>Clients Served by Living Arrangements</b> <i>from 4/1/2009 to 6/24/2009</i>	
<u>Living Arrangements</u>	<u>Count</u>
Alone/Independent	5
Correctional Facility/Jail	1
Group Home	11
Homeless	4
Nursing Home/Assisted Living	3
Psychiatric Inpatient Hospital	1
Residential Treatment Hospital	2
Supervised Apartments	2
With Child Under 18	3
With Other Family Members	5
With Spouse/Domestic Partner	4
Unknown	7

<b>Clients Served by Education</b> <i>from 4/1/2009 to 6/24/2009</i>	
<u>Education</u>	<u>Count</u>
Tenth Grade	1
High School	2
1 Year of College	1
2 Years of College	1
3 Years of College	1
College Graduate	2
Unknown	30

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