



Ombudsman Program Activities...

This has been an exciting three months in the Ombudsman office. The client load has increased dramatically, and it seems that with every visit I make to offices out of town, the number of phone requests increases. I have started asking each client how they heard about our service and most have seen a flyer or were given my name by someone I have visited. Weather permitting, I plan to visit all parts of the state by June. I have already been to most locations in the southern part of Wyoming. In March I visited Riverton & Lander, in April I will be in the northeastern part of the state and in May I will be the northwestern area.

I attended two trainings: the Foundations of Dementia Care Seminar conducted by Charlie Simineo for two days in Casper, and the Family-2-Family training provided by NAMI in Cheyenne, which was one night a week for 12 weeks.

The following case addressed by the Ombudsman this quarter illustrates the advocacy SAMHOP is providing. A person from within the state called seeking help regarding his recent anxiety attacks and in-

creased depression. He wanted to know where he could go for counseling. After talking to him and attempting to determine if he could be suicidal, I learned he had recently lost his job and he feared he would become homeless. He lived alone and had no family in the area to give him assistance. I invited him to attend a conference being held by the advocacy coordinator at the Department of Health on "Employment Options for the Mental Health Community" designed for counselors, DVR staff, employers and the public. He attended, made many contacts, received a number of ideas about employment and a great deal of emotional support for his situation. During a follow-up call, he seemed to be much improved and is staying in contact with me regarding both his anxiety issues and his job search.

Another recent project involves working with the computer specialist on SAMHOP data-gathering to improve intake information and in-depth reports; this quarterly report will show data acquired from Jan 1 to March 31.

—Martha Mullikin

Gardening at Chrysalis House



Chrysalis House is a residential substance abuse treatment center for women and their children in Cheyenne. It is a modified therapeutic community where residents learn to be responsible for their behaviors, while restoring their ability to participate and function in life. It is one of the three residential programs run by Peak Wellness

Center. This spring and summer will be the second year that Chrysalis House has had a vegetable garden. Again it will be run under the guidance of Catherine Wissner, University of Wyoming Cooperative Extension Horticulturist in Laramie County. This year the vegetable garden will have one other volunteer—Martha Mullikin, the SAMHOP Ombudsman. This will provide hands-on experience working in a substance abuse treatment center.

Ombudsman's Activities First Quarter 2009

Onsite Visits to Referring Agencies:

- Transitions, Peak Wellness, Cheyenne
- Protection and Advocacy, Cheyenne
- Regional Medical Center, IOP, Cheyenne
- Pathfinders, Cheyenne
- Laramie County Courts, Cheyenne
- NAMI, Cheyenne
- DUI Court, Cheyenne
- State Hospital, Evanston
- Rocky Mountain Health Care, Evanston
- Southwest Counseling Service, Rock Springs
- Cornerstone Behavioral Health, Evanston
- Uinta County Hospital, Evanston
- DFS, Evanston
- Public Health Nurse, Evanston
- Police Department CLIP, Evanston

Meetings:

- Adult Protection Services, Cheyenne
- CASE (Coalition for Agencies Serving the Elderly)
- Starfish Conference
- Advocacy Conference, Cheyenne
- Wyoming Suicide Prevention Task Force
- Medicare Part D, Cheyenne
- Foundations of Dementia Care, Casper (2 days)
- Military Affairs Meeting, Cheyenne
- Employment Options for the Mental Health Community, Cheyenne
- CASE meeting, gave presentation, Cheyenne
- Mental Health Planning Council, Casper

Response to the NAMI 2009 “Grading the States Report”

—In the recent national NAMI 2009 “Grading the States” Report, Wyoming received an “F” (down from a “D” in the last report). The state NAMI Executive Director, Anna Edwards, sent an email to the members of the Mental Health Planning Council (MHPC) stating her reaction to the report. It is worth sharing:

“I too am disappointed by the grade given in this report. It does not reflect the time, energy and resources that have been invested in mental health over the last few years by all of us. Many of the “urgent needs” identified by the report (i.e. safe/affordable housing, workforce development, transportation, jail diversion) are issues that we have been discussing in depth and working to meet. In the past session, the Legislature voted to expand the Crisis Stabilization Project to the Basin Region which addresses the last “urgent need” identified by the report. This is real progress.

“I am very proud of our successes. In the last two years that I have worked in this posi-

tion, I have been impressed by the dedication each of you have shown to providing quality mental health services to the citizens of Wyoming. I think it would be a mistake to let this grade overshadow the great work we have all done. The report highlights several Wyoming innovations including our:

- Systems of Care Collaboration
- Veterans Mental Health Outreach Program
- Peer Support Specialists
- Crisis Stabilization Pilot Program

“For my part, I will be focusing on the successes Wyoming has made. While there is a lot of work left to do, I believe it is important to focus on the positive changes that have been made.”

—Anna Edwards
Executive Director
NAMI Wyoming
aedward@nami.org



Horticultural Therapy is a discipline that uses plants, gardening activities, and the natural world as vehicles for professionally-conducted programs in therapy and rehabilitation.

Martha Mullikin Earns “Horticultural Therapy Certificate”



Martha Mullikin, SAMHOP Ombudsman, has completed the program to be certified in Horticultural Therapy.

Horticultural Therapy (HT) is a discipline that uses plants, gardening activities, and the natural world as vehicles for professionally-conducted programs in therapy and rehabilitation.

Martha feels HT is a viable therapy that can be used with inpatient or outpatient programs in the substance abuse and mental health areas. While in Evanston, Martha visited the Horticultural Therapy program at the Wyoming State Hospital. This is one of the few HT programs in the state. Cynthia Conk, Certified Therapeutic Recreation Therapist and Horticultural Therapist described her program this way: “Our HT program is a combination therapeutic/social program. The HT activities take place primarily in the greenhouse and in the attached activity room. We also have

designated areas around the hospital grounds where we have developed garden areas near living units that provide accessible ‘outdoor classrooms’ in the summer. We strive to create environments that promote and allow for growth. An assessment developed specifically for HT is given to each client prior to participating in the HT program. It assesses cognitive, social, physical and leisure needs/limitations and provides background information to help staff work more effectively with each individual. Activities are provided that focus on client needs and limitations and participation is documented toward client goals and objectives.”



Wyoming State Hospital Greenhouse

Ombudsman Visits Uinta & Fremont County Programs

Uinta County Visit

In February the Ombudsman traveled to Uinta County. It was a busy trip with most of the time spent at the Wyoming State Hospital where she received a tour of the facilities and held meetings with many of the staff members. The visit was enlightening and the Ombudsman came away with a great respect for the staff and the facility. Other places the Ombudsman visited and answered questions regarding our program included Cornerstone Behavioral Health, Pioneer Counseling Services, Department of Family Services, the Public Health Nurse, and the Evanston Police Department.

Fremont County Visit

In March the Ombudsman visited Riverton, Lander and Ft. Washakie. It was a busy and varied trip.

Fremont Counseling Service director, Jerry McAdams, was able to take time out

of his busy schedule to meet with the Ombudsman. Wyoming Senior Citizens Inc. Director Charlie Siminoe and the LTC Ombudsmen were available for a meeting, as were the advocates at Protection and Advocacy, Dick Lefevre and Randy Peil.

A staff meeting with teleconference availability to other offices was set up with Indian Health Services in Ft. Washakie, and a complete tour of the Wyoming Life Resource Center in Lander was given by Karen Beddoes. A visit was also made to the Fremont County Alcohol Crisis Center.

The Ombudsman consulted with Karen Beddoes regarding a Horticultural Therapy program that is being established at WLRC. A presentation was done by the Ombudsman for the Recreation Therapists at WLRC to explain how HT fits with mental health therapy, rehabilitation, the developmentally disabled, and ABI populations.

Ombudsman Training

While visiting in Evanston in February, the state Ombudsman conducted training for the part-time southwest area Ombudsman, Kenna Hill. Topics discussed included referrals, data gathering, expectations, and communications. Special emphasis was placed on how to best educate drug and alcohol program staff in the southwest corner of the state about the Ombudsman Program.

One referral was made to Kenna this month and by working together, we were able to provide timely and beneficial results. Individuals in the northeastern part of the state are currently being interviewed for the part time position in that region.

Report Shows How States Rank on "Depression"

Mental Health America recently released a report, "Ranking America's Mental Health: An Analysis of Depression Across the States," a first-of-its-kind study examining state and national data for statistical associations between access-to-care factors and actual health outcomes, namely a state's mental health status and suicide rate. Included in the study is a ranking of the 50 states and the District of Columbia based on rates of depression and suicide.

Depression, a chronic illness that exacts a significant toll on America's health and productivity, affects more than 21 million American children and adults annually and is the leading cause of disability in the United States for individuals ages 15 to 44.

Lost productive time among U.S. workers due to depression is estimated to be in excess of \$31 billion per year. Depression frequently

co-occurs with a variety of medical illnesses such as heart disease, cancer, and chronic pain and is associated with poorer health status and prognosis. It is also the principal cause of the 30,000 suicides in the U.S. each year. Despite significant gains in the availability of effective depression treatment over the past decade, the level of unmet need for treatment remains high. On average, people living with depression go for nearly a decade before receiving treatment, and less than one-third of people who seek help receive minimally adequate care.

"Ranking the States: An Analysis of Depression Across the States" was researched and written by Mental Health America and Thomson Healthcare. It looked at data from 2002-2006 and was conducted from July to November 2007. The report compared depression levels and suicide rates in all 50 states and the District of Columbia. South Dakota was the healthiest state with respect to depression status, while Utah was the most depressed state with a ranking of 51; Wyoming ranked 42nd. For the complete rankings, visit:

www.mentalhealthamerica.net/go/state-ranking

"Depression affects more than 21 million American children and adults annually and is the leading cause of disability in the United States for individuals ages 15 to 44."



Our computer consultant has been working with the Ombudsman and other staff to make our intake information and data reports more meaningful. Our goal is to make the data easier to read and interpret. If you have any suggestions for changes please contact the Ombudsman. Reports are a work in progress...

| Clients Served by Services Provided <i>from 1/1/2009 to 3/31/2009</i> | |
|---|--------------|
| <u>Services Provided</u> | <u>Count</u> |
| Coaching/Information | 26 |
| Informal Assistance/ Mediation | 10 |
| Investigation | 6 |
| Referral | 12 |
| Withdrawn | 1 |

| Clients Served by Gender <i>from 1/1/2009 to 3/31/2009</i> | |
|--|--------------|
| <u>Gender</u> | <u>Count</u> |
| Female | 21 |
| Male | 16 |

| Client Issues <i>from 1/1/2009 to 3/31/2009</i> | |
|---|--------------|
| <u>Issue</u> | <u>Count</u> |
| Abuse, Neglect, Exploitation | 1 |
| Access to Information | 2 |
| Access to Mental Health Services | 7 |
| Advances Directives | 1 |
| Anxiety | 2 |
| Care/Treatment | 7 |
| Child & Family Services | 2 |
| Child Custody/Visitation | 1 |
| Criminal Justice System | 3 |
| Discrimination/ADA | 2 |
| Emergency Detention Cost | 2 |
| Employment | 1 |
| Financial Need | 10 |
| Guardianship/Conservator | 6 |
| Housing | 2 |
| Legal | 1 |
| Locating Appropriate Placement | 2 |
| Medicaid/Medicare | 1 |
| Patient Rights | 7 |
| Prescription Drugs | 3 |
| Representative Payee | 2 |
| Sexual Assault | 1 |
| Social Security | 1 |
| Transportation | 1 |

| Clients Served by County <i>from 1/1/2009 to 3/31/2009</i> | |
|--|--------------|
| <u>County</u> | <u>Count</u> |
| Big Horn | 1 |
| Carbon | 1 |
| Fremont | 2 |
| Goshen | 1 |
| Laramie | 13 |
| Lincoln | 1 |
| Natrona | 2 |
| Park | 2 |
| Platte | 2 |
| Sheridan | 1 |
| Sweetwater | 1 |
| Teton | 2 |
| Unknown | 8 |

| Clients Served by Age <i>from 1/1/2009 to 3/31/2009</i> | |
|---|--------------|
| <u>Age Range</u> | <u>Count</u> |
| Under 18 | 3 |
| 18 to 24 | 2 |
| 25 to 44 | 10 |
| 45 to 64 | 1 |
| 65 to 84 | 5 |
| 85 and over | 1 |
| Not reported | 15 |

**Substance Abuse & Mental Health
Ombudsman Program**

Wyoming Guardianship Corporation
P.O. Box 2778
Cheyenne, Wyoming 82003
www.wyoguardianship.org
samhop@bresnan.net
307.632.5519



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

| Clients Served by Living Arrangements <i>from 1/1/2009 to 3/31/2009</i> | |
|---|--------------|
| <u>Living Arrangements</u> | <u>Count</u> |
| Alone/Independent | 7 |
| Correctional Facility/Jail | 3 |
| Group Home | 2 |
| Homeless | 2 |
| Nursing Home/Assisted Living | 2 |
| Psychiatric Inpatient Hospital | 1 |
| Residential Treatment Hospital | 1 |
| With Friends/Other Adults | 2 |
| With Other Family Members | 4 |
| With Spouse/Domestic Partner | 3 |
| Unknown | 10 |

| Client Outcomes <i>from 1/1/2009 to 3/31/2009</i> | |
|---|--------------|
| <u>Outcome</u> | <u>Count</u> |
| Complaint Was Unsubstantiated | 1 |
| Corrective Action Taken | 3 |
| No Further Action To Be Taken | 7 |
| Referred to Another Agency | 6 |
| Satisfactorily Resolved | 12 |
| Withdrawn/No Response | 1 |

| Clients Served by Ethnic Status <i>from 1/1/2009 to 3/31/2009</i> | |
|---|--------------|
| <u>Ethnicity</u> | <u>Count</u> |
| American Indian or Alaskan Native | 1 |
| Asian | 1 |
| Black/African American | 1 |
| Non-Minority/White | 27 |
| Unknown | 7 |