

# Mississippi Profile

SPRING/SUMMER 2013

Information Publication from the Mississippi Department of Mental Health

## May is Mental Health Month

Blood pressure, glucose levels, cholesterol, and body mass index are all things we mention when we talk about being healthy. We often forget that mental health is an essential component of overall health and well-being. The fact is our overall well-being is tied to the balance that exists between our emotional, physical, spiritual, and mental health.

While conditions like depression are common - roughly 1 in 4 Mississippians have a mental health condition - they are extremely treatable. During Mental Health Month in May, the Mississippi Department of Mental Health (DMH) is spreading the word about why pathways to wellness are so important. Pathways to Wellness - this year's theme - calls attention to strategies and approaches that help all Mississippians achieve wellness and good mental and overall health.

Wellness is more than an absence of disease. It involves complete general, mental and social well-being. Whatever our situation, we are all at risk of stress given the demands of daily life and the challenges it brings—at home, at work and in life. Steps that build and maintain well-being and help us all achieve wellness involve a balanced diet, regular exercise, enough sleep, a sense of self-worth, development of coping skills that promote resiliency, emotional awareness, and connections to family, friends and the community.

These steps should be complemented by taking stock of one's well-being through regular mental health checkups. Just as we check our blood pressure and get cancer screenings, it's a good idea to take periodic reading of our emotional well-being. One recent study said everyone should get their mental health checked as often as they get a physical, and many doctors routinely screen for mental health, which typically include a series of questions about lifestyle, eating and drinking habits and mental wellness. But a checkup doesn't necessarily require a special trip to the doctor. There are also online screening tools you can use.

"Most people don't think twice about seeking treatment for diabetes, asthma, high blood pressure or other health conditions," said Ed LeGrand, DMH Executive Director. "People should seek treatment for substance abuse and mental health with the same urgency as they would any other health condition. It's important for us to break down barriers and understand that mental health is an essential part of overall health."

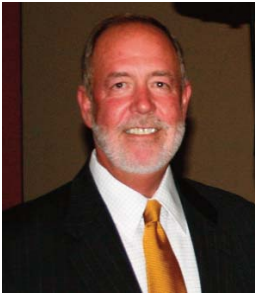
Fully embracing the concept of wellness not only improves health in the mind, body and spirit, but also maximizes one's potential to lead a full and productive life.

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Supporting a Better  
Tomorrow... Today



# Executive Director's Message



This edition of *Mississippi Profile* highlights a variety of activities which correlate with DMH's Strategic Plan including two recent training opportunities. I am proud of the progress we are making to achieve our Goals and Objectives.

As a way to increase training in evidence-based practices, DMH was excited to offer Mental Health First Aid training to 60 individuals in May. In response to recent shooting tragedies in the United States, Mental Health First Aid has become a hot topic in Washington and Mississippi. With knowledge, comes understanding. Communities that have a better understanding of mental health issues are shown to have less stigma around mental illness. We hope the individuals trained in this valuable program can take the information back to their communities and make a difference in the lives of Mississippians.

DMH also offered training on person-directed planning at one of the Behavioral Health Programs and has plans to continue the implementation at all six Behavioral Health Programs in the future. One of the cornerstones of person-directed planning is making sure there are as few barriers as possible to keep an individual from reaching the goals, desires community activities, and relationships that are important to them. This is essential in a person's individual recovery.

I am proud of the progress we are making to achieve our Goals and Objectives specifically the focus on evidence-based practices. With the assistance of our dedicated staff and partners, we have been able to achieve much even during difficult budget times. The economic climate has changed since the first Strategic Plan was crafted. During such a serious budget crisis, it continues to be a difficult task to transform the public mental health system to a more community-based, recovery-driven system. But, we will continue to move forward to the best of our ability.

We appreciate your continued support in these efforts. I hope you have a great summer!

Sincerely yours,

Edwin C. LeGrand III  
Executive Director

# Mississippi Profile



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Spring/Summer 2013

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The Mississippi Profile is devoted to providing the public with information about services provided or administered by the Mississippi Department of Mental Health. It also strives to increase public awareness and knowledge about mental illness, mental retardation/developmental disabilities, substance abuse, and Alzheimer's disease and other dementia to improve health and quality of life.

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This publication is free of charge to persons interested in mental health, intellectual and developmental disabilities, substance abuse, Alzheimer's disease and other dementia, the Mississippi Department of Mental Health, or the individuals it serves. It is the policy of the Mississippi Department of Mental Health to comply with federal and state laws assuring equal opportunities of employment and services.

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The editor reserves the right to edit all materials printed in this publication. Send requests for items to be included in the newsletter and other inquiries to:

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# Children's Mental Health Week

In recognition of National Children's Mental Health Awareness Day, the Mississippi Department of Mental Health (DMH) and the Mississippi Transitional Outreach Project (MTOPT) hosted a day full of fun at the Jamie Fowler Boyll Park in Jackson on Saturday, May 4.

The day began with a 5K Run at 8 a.m., followed by a free one mile Fun Run for families. The Run/Walk is part of the Mississippi 2013 Treasure Quest, an event for the whole family. Based on the theme of a massive treasure hunt, activities throughout the park include horse riding, obstacle courses, jump houses, face painting, zip lines, and more.

"This event is meant to help spread awareness about mental health and stigma that face children working towards mental wellness," said Ed LeGrand, DMH Executive Director. "One of the main reasons youth do not seek help for mental health problems is because they feel embarrassed and are scared their friends will not accept them. We want to change that."

Mental health is important at every stage in life. A child's mental health can affect their mood and behavior and the way they think and feel about



themselves. DMH and MTOPT are partnering with agencies in every area across Mississippi to improve services in our communities and support a better tomorrow for our youth.

Partners for the event include: CSpire, NFusion, Catholic Charities, Mississippi Families as Allies, National Alliance on Mental Illness, Department of Human Services, The Arc of Mississippi, the City of Jackson, and others.

## May is Mental Health Month

### **Continued from page 1**

Using strategies that promote resiliency and strengthen mental health and prevent mental health and substance use conditions lead to improved general health and a healthier society: greater academic achievement by our children, a more productive economy, and families that stay together.

Staying healthy and focusing on overall wellness is essential to recovery. Recovery is a process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential. Recovery is unique to each individual and can truly only be defined by the individual themselves.

DMH continues to focus on recovery with the Think Recovery campaign and the Mississippi Peer Support Specialist Network. The Mississippi Peer Support

Specialist Network are first degree family members and/or people living in recovery with mental illness, substance abuse, and intellectual and developmental disabilities that provide support to others who can benefit from their lived experiences.

"Good mental health includes assisting individuals to obtain opportunities to engage in social activities, make friends, and contribute to society, and that is where Peer Support Specialists do their best work," said Melody Worsham, President of the Mississippi Peer Support Specialist Network. "Through advocacy and mentoring, we support so many who feel like they don't have a voice. As of today, the Mississippi Peer Support Specialist Network is not even one year old, and we have already seen the benefits of our presence throughout the state."

For more information, visit [www.dmh.ms.gov](http://www.dmh.ms.gov).



# DMH Offers Mental Health First Aid



In response to recent shooting tragedies in the United States, Mental Health First Aid (MHFA) has become a hot topic in Washington and Mississippi. In May, DMH used some of the final British Petroleum grant monies to certify a cadre of trainers in MHFA.

These certified trainers will be available to provide education through workshops to community leaders such as pastors, teachers, and civic groups, along with families and friends interested in learning more about mental health issues. Funds from the DMH Behavioral Health BP Grant Program have already provided valuable services, programs, and informational materials in many of the communities in Mississippi affected by the BP oil spill. MHFA training will enhance the progress that has already been made.

Mental Health First Aid is a groundbreaking public education program that helps the public identify, understand, and respond to signs of mental illness, substance use disorders and behavioral disorders.

Mental Health First Aid is offered in the form of an interactive 12-hour course that presents an overview of mental illness and substance use disorders in the U.S. and introduces participants to risk factors and warning signs of mental health problems, builds understanding of their impact, and overviews common treatments.

Individuals who participated in the Mental Health First Aid Training (Adult) held on May 6-10 included: Andrew Day, Aurora Baugh, Brent Hurley, Dwayne Nelson, Jackie Chatmon, Joe Maury, Karen West, Mardi Allen, Natasha Griffin, Scott Sumrall, and Willis Garrison of DMH Central Office; Bessie Marshall and Linda Bradley of Singing River Services; Christina Torti, Wes Pegues, and Jenny Pittman of MS State Hospital; Cindy Dittus, ARC of MS; Delesia Walker, Hinds Behavioral Health Services; Genia Craine, Mental Health Association South MS; Gina Tucker, DREAM; Laveta Moody-Thomas and Millie Smith of



the MS Department of Health; Mike Ganuchau, Region 8; Monica Wolters, NAMI MS; Quita Dawson and Stephanie Stout of Timber Hills Mental Health Services; Sally Bates, G.A. Carmichael CHC; Debbie Coghlan and Spencer Blalock of Central MS Residential Center; and Sonya Catchings; Mental Health Association South MS.

Individuals who participated in the Mental Health First Aid Training (Youth) held on May 20 - 24 included: Andrew Strehlow and Jill Breland of Mississippi State hospital; Noreen Waithaka, Catholic Charities; Larry Nelson, Coreaner Price, Lori Grimes, and Sidney Byrd of MS Families as Allies; Deborah Brockaway and Ruth Gunn of Singing River Services; Dwayne Nelson, Jackie Chatmon, Joe Maury, Mardi Allen, Mark Stovall, Natasha Griffin, Scott Sumrall, and Willis Garrison of DMH Central Office; Frankie Johnson, Spencer Blalock, and Jennifer Savell of Central Mississippi Residential Center; Jacquelyn McDougale of Pine Belt Mental Health Resources; James Miles and Rodney Mayers of Specialized Treatment Facility; Jamie Rathert, Will Ballew, and Lori Beth Ratcliff of Mental Health Association - Central MS; Linda Vasquez of DREAM of Hattiesburg; Sally Bates of G.A. Carmichael CHC; Shane McNeil of the MS Department of Education; and Sherry Ponder of NAMI MS.

## *Focus V Participants Graduate*



In May, after a year of hard work and dedication, 23 individuals graduated from the Mississippi Department of Mental Health's (DMH) accelerated leadership development program, Focus. During the last year, participants have learned about conflict management, human resources, strategic planning, community integration, fiscal management, and other topics.

Offering opportunities for employees to expand their knowledge and skills is one of DMH's priorities. In 2007, DMH developed the Focus program to offer employees a unique opportunity to hone their skills to greater and higher personal performance and self-awareness. The program is designed to develop leaders from within. There is a critical need to develop a pipeline of leaders in DMH to create bench strength with depth. The goal of this program is to have the right people, with the right skills, in the right place, at the right time. Participants are selected from a blind, competitive process.

"The Focus program is one of our agency's accomplishments that I am most proud of," said Ed LeGrand, DMH Executive Director. "Our goal is to develop each and every Department employee to maximum capacity and to deploy that very talented team to the service of our fellow Mississippians. We are dedicated to the mission of enhancing the knowledge of our employees to build future leaders to help support a better tomorrow."

Graduates include: Craig Kittrell and Sheri Allen of Boswell Regional Center; Lance Sigrest and Kristin Merritte of Hudspeth Regional Center; Kim Sallis and Cheryl Anderson of North Mississippi Regional Center; Glenda McMillon and Vonda Burleson of South Mississippi Regional Center; Rinsey McSwain and Rachel Ingram of Ellisville State School; Molly Sprayberry of Central Mississippi Residential Center; Lynn Garrett of East Mississippi State Hospital; Gene Amason and Jackie Yates of Mississippi State Hospital; Joe Rials and Debra Wuichet of North Mississippi State Hospital; Kelly Reid of South Mississippi State Hospital; Stephanie May and Valerie Joiner of Specialized Treatment Facility; Kathy VanCleave, Tabeth Jiri, Trisha Hinson, and Willis Garrison of DMH Central Office; Sonya Robinson and Heidi Nelson of Pine Belt Mental Healthcare Resources; and Dr. Lee Lee Marlow of Weems Community Mental Health Center.

# Providing a Continuum of Care

Submitted by Debbie Hall, NMSH

It is Wednesday morning at 9 a.m. and the Conference Room at North Mississippi State Hospital (NMSH) is full. In attendance are social work staff from NMSH and the case manager supervisors from Region II (Communicare), Region III, and Region IV (Timber Hills) Community Mental Health Centers. This meeting has occurred weekly for 14 years and has been the focal point of the continuum of care for patients at NMSH. What takes place at these meetings is a discussion of patients who are currently in care, patients who are on the waiting list, and CMHC clients who may be nearing an acute status.

For those patients who are currently in care at NMSH, the social workers review the projected discharge plans for each, including the region to which they will be discharged. Discussions center around diagnosis, medications, family situations, and planned discharged dates. This allows the CMHC staff to provide any information they may have on family background and living conditions that might be helpful. It also allows them to prepare for supporting the patient's transition back into the community.

Information is discussed about patients on the waiting list for whom the CMHC staff may have background information...what has caused the acute episode, what is the family involvement, etc. In cases where the person on the waiting list has not been a client at a CMHC, it allows both entities to begin looking at the background, illness and needs of the individual.



Time is also allowed for CMHC staff to give updates on clients who have been discharged back to their care. Have the patients kept appointments made for them? Are they taking their medications? Is the discharge placement working? Does he/she appear to be headed for another acute episode or is the client continuing in a stabilized condition?

"This weekly meeting is very important to our staff," stated Debra Wuichet, Director of Social Services at NMSH. "It gives us the opportunity to gain supportive information from and to give the same kind of information to our CMHC representatives. It has allowed us to have a great working relationship with the three CMHC's."

NMSH Director Paul A. Callens, Ph.D., praises the program. "We opened our hospital with the vision of 'being a leader in providing the citizens of northeast Mississippi a continuum of psychiatric services that are fully integrated with other healthcare programs.' We have held these meetings since the first week we had patients. I cannot imagine our trying to provide a continuum a care without them!"

## 30th Annual MH/IDD Conference

The Call for Papers for the 30th Annual MH/IDD Conference has been distributed. To download the application, visit [www.dmh.ms.gov](http://www.dmh.ms.gov). This year's theme is Community: The Pathway to Belonging. The Conference is scheduled for October 29-31 at the IP Casino and Hotel in Biloxi.



# *DMH Programs Focus on Person-Directed Planning*

A group of Mississippi State Hospital employees have met twice in recent months to learn about and discuss a fundamental change in the way the Hospital and community-based service providers plan and conduct treatment for patients and clients.

Linda McDowell, Ph.D., a professor in the University of Southern Mississippi's College of Education and Psychology, led the group in the two-day conference that discussed person-directed planning, recovery, and the continued transition to community-based care for those in need of mental health services.

Throughout the training Dr. McDowell provided examples of tools and strategies that may be used to redesign services to a recovery-based, person-directed model, such as the use of individual profiles and plans specifically tailored for each individual patient.

To help drive the points home, the listeners also heard from two Certified Peer Support Specialists. These individuals were able to share their unique perspectives and discuss ways to make treatment more focused and personal for each individual served. One Peer Support Specialist indicated that getting to know someone being treated for mental health can make a big difference in their treatment.

Making sure individuals have the chances to follow up with any of their specific goals or desires can make a big difference in keeping them on the road to recovery. That goal, which could be something as simple as having an opportunity for a productive job, can be key to living a satisfying life for many people.

A tenet of person-directed planning is making sure there are as few barriers as possible to keep an individual from reaching the goals, desires community activities, and relationships that are important to them. A barrier could be something like transportation or funding, or it could be something like family and community attitudes. Social workers and mental health professionals can play a large part in helping remove those barriers by getting a good sense of who their patient is and focusing on the individual.

Person-directed planning advocates building an individual profile that is used to help develop a plan for each individual receiving services. It began as a philosophy of care and later developed a set of related activities for the full inclusion of individuals receiving mental health services as valued members of their community. It helps increase choice, avoids stigma, builds relationships, and creates individualized supports.

The workshop providers offered several examples of ways to more actively engage individuals in developing their recovery plan. By engaging individuals in their treatment in a person-directed manner, the service providers increase the potential for truly effective therapeutic relationships. Those relationships can result in meeting the needs and choices of individuals receiving services, helping to build the natural support system that will be required to maintain both mental and physical health of the individual, and to also potentially decrease the stigma experienced by the individual.

One aspect of this model that the Peer Support Specialists said was a vital part of their recovery was the concept of shared decision making – involving the individual being served in the treatment planning process. Shared decision making in mental health is being supported by SAMHSA as an evidence-based practice and one of the more effective strategies for engaging individuals in their care. Many of the tools available from SAMHSA were shared with the audience.

"It was 15 years before someone said 'what do you want for your life?' to me," one of them said. "And that's the day I began my road to recovery."

The training also discussed some of the tools that are already in place at Mississippi State Hospital and in the community, such as WRAP and PACT. WRAP is the Wellness Recovery Action Plan, an evidence-based practice that encourages individuals to think about their illnesses, identify problems that deter their recovery, and how they can avoid those problems. It involves their friends and families as well as giving them a familiar plan to fall back on if they feel begin to feel their recovery take a step back.

# DMH Programs Focus on Person-Directed Planning

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PACT is the Program of Assertive Community Treatment, a group of teams that goes to individuals' homes instead of having them come to the group. It gives a group of people a way to stay in touch and try to meet others' needs. PACT is currently available through two community mental health centers.

Person-centered planning, person-directed care, and mental health recovery are all terms that have been used nationally among mental health providers for several decades. There is a growing expectation for such a philosophical shift in service provision at all levels, as well as incorporation of treatment strategies that demonstrate that individuals are at the center of the treatment decisions.

DMH will continue the implementation of Person-Directed Planning at all six Behavioral Health Programs in the future. The next training will be held at North Mississippi State Hospital in June.



Pictured are (front row, l to r) Certified Peer Support Specialist Sandra Caron, Certified Peer Support Specialist Beverly Pettigrew, Dr. Linda McDowell, (back row, l to r) MSH Director of Psychological Services Amy Baskin, Community Services Operations Manager Jennifer Giambrone, Sherry Holloway, Director of Social Services Jackie Fleming, Community Services Director Dr. Cynthia Johnson, and Department of Mental Health Bureau Director of Community Mental Health Services Jake Hutchins.

## Hayles Receives Cotten Award



The recipient of the 2012 Paul D. Cotten Leadership Award was Edith Hayles. Hayles is the Director of North Mississippi Regional Center in Oxford. Hayles received the award at the 29th Annual MH/IDD Conference in Biloxi in November 2012.

The Award is presented to a Mississippian who has demonstrated exemplary leadership in the field of services for persons with intellectual and developmental disabilities.

Pictured with Edith Hayles is Paul Cotten.



# Dreams Become Reality for the Bailey Family

Reprinted with permission by Magee News

Some dream of getting out on their own, however, for one Simpson County family, coming back together was their dream. After about 35 years of living apart, dreams became reality when the six moved into new community housing.

The Bailey family originally lived in Lincoln County; however, starting in 1995 one-by-one, the Bailey's took up residence in different programs at Boswell Regional Center in Simpson County. Now they are all back together again, living in the Pine Grove area.

In two homes, one for the sisters and one for the brothers, the Bailey's live side-by-side, part of four community homes just outside Magee. There the siblings receive whatever assistance is necessary for each of them to be as independent as possible.

Planning began around a year ago, culminating in a massive effort, which included staff from just about every department on campus, community services, and outside agencies like the Division of Medicaid, the ARC, and Region 8 participating in Bridge to Independence. Trucks, vans, and cars rolled out and with many hands helping, the six siblings and six other residents were moved from campus and other Simpson County community housing on March 19 and March 20, 2013 – just after Ed's eighteenth anniversary of coming to Boswell.

For all, this has truly been a dream come true! For the Bailey's, however, this is also a very momentous and poignant time as well.

Moving boxes still needed to be unpacked when the six gathered together, sitting at the dining table en-mass, grins lighting up for all to see. At first, they all just sat together, but it didn't take long for that to change. It seems that sibling bantering and badgering knows no age or time limits. The siblings started ribbing and joking with each other. Generally, it was time for them to just be together.

Memories of times past aren't what the group talks about, mostly they just like being able to spend time together. The present and the future are their reality now.

The siblings remarked that being able to see each other whenever possible and having the time now to make new family memories is what they most enjoy.

While each is now enjoying greater independence, which they (and staff) have all labored long and hard for, they are also rebuilding their family circle. According to the Bailey's, some of their future plans include family dinners, cook-outs, and maybe even a backyard garden. No matter what though, the Bailey's are able to reconnect with each other – making many dreams reality.

Can't you just imagine the good nights being said at Pine Grove? Good night, Ed ...Emma ...Tim ...Jearlean ...Dorothy ...Willie



***The Bailey family gathered in the new residence for the three sisters on move-in day. This is the first time in about 35 years that the six siblings have lived this close together. Pictured front from left: Jearlean, Emma, Tim, and Ed. Back from left: Dorothy and Willie.***

# *Crisis Intervention Center Aids Law Enforcement*

Reprinted with permission by The Newton Co. Appeal

Police in Lauderdale County have a new option to help people dealing with mental health crises.

They can bring them to the Crisis Intervention Center at Central Mississippi Residential Center in Newton, where they can get the help they need.

The East Mississippi Crisis Intervention team is a partnership between the Lauderdale County Sheriff's Office, The Meridian Police Department, Weems Community Mental Health Center, CMRC, and several other agencies.

Its goal is simple, according to LCSO Chief Deputy Ward Calhoun: to keep those dealing with mental health issues from going to jail, and to help them get the services they need.

"There's more to being a law enforcement officer than just locking people up," he said. "Not everybody needs to go to jail."

The partnership with CMRC streamlines the process to help those dealing with a mental health crisis, said Spencer Blaylock, the center's director of outreach services.

Instead of taking them to hospitals in Meridian, where they may wait several hours before being seen, police can bring them straight to the Crisis Intervention Center at CMRC, where they can be assessed immediately.

CMRC will serve as a "single point of entry" because it has a crisis intervention center, a 16-bed facility designed to deal with mental health emergencies.

The center stabilizes the person, typically keeping them a few days until they feel better.

Select LCSO deputies and Meridian police officers make up the law enforcement portion of the program. Those officers have completed 40 hours of crisis intervention training, which teaches them how to diffuse volatile situations and to assess if the individual needs immediate mental health assessment.

The crisis intervention training was funded with \$350,000 in federal grant funds, Calhoun said.

"We're really excited about this partnership," said CMRC director Debbie Ferguson, adding that the center is already working with Newton police and the Newton County Sheriff's office.

*The Mississippi Department of Mental Health  
has a redesigned Web site. The site includes  
a Resource Library, Events Calendar,  
Where to Go for Help Search Feature,  
and much more.  
Check it out at [www.dmh.ms.gov](http://www.dmh.ms.gov).*