



Sheryl Crow



Steven Tyler

## The Power of a Peer

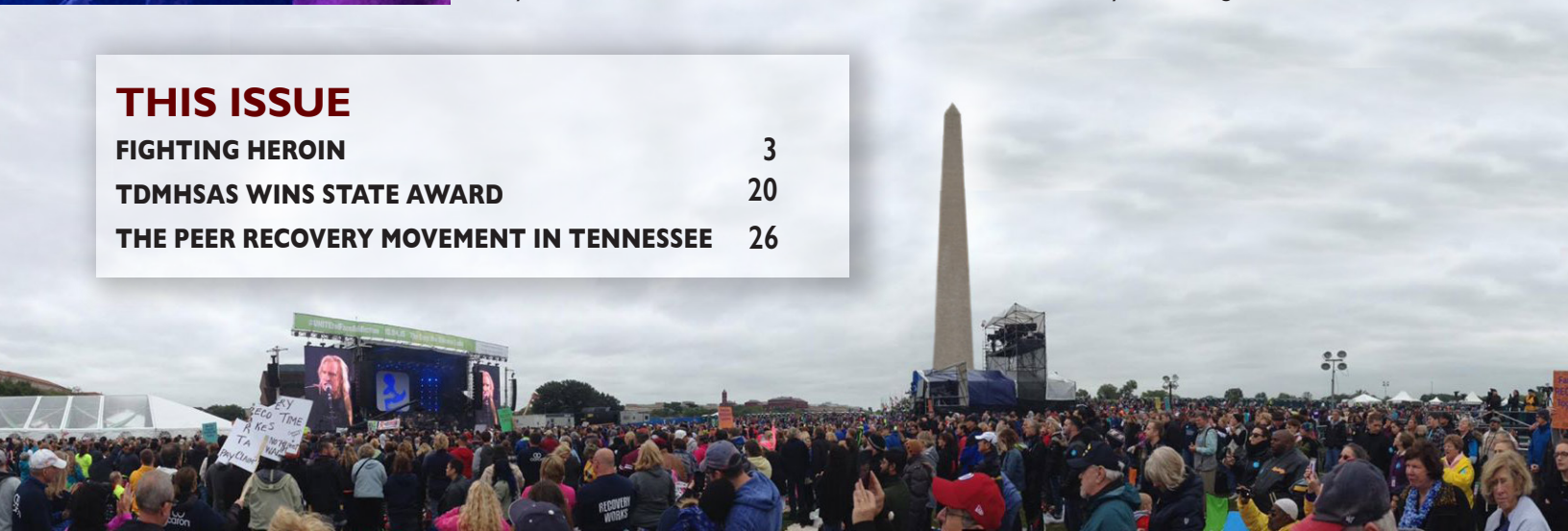
Special Section Pg. 26



Mary Linden Salter & Vik Moore at the Unite to Face Addiction rally in Washington D.C.

### THIS ISSUE

FIGHTING HEROIN	3
TDMHSAS WINS STATE AWARD	20
THE PEER RECOVERY MOVEMENT IN TENNESSEE	26



As we made our way through National Recovery Month in September, it was wonderful to hear about the many events celebrating people in recovery; one of the big ones this year is featured on the cover of this newsletter. It is great to see support increasing all the way to our Nation's Capital. It was an honor to host Michael Botticelli, White House Director of National Drug Policy, here in Nashville (pg. 3).



Awareness and positive change are happening! It is inspiring to see so many people in recovery helping others who are sick, hurting, and ready to begin a new life no longer controlled by their addictions. In October, we recognized 50 organizations that have joined our State's Faith-Based Recovery Network (pg. 4). There is great power in peer support.

In this issue, we take a special look at Peer Recovery Services in our state. We are highlighting peer programs and some of the people behind them. In the spirit of Thanksgiving, we are saying "thank you" to everyone who is a part of the peer support movement.

The peer movement continues to grow and make a huge difference in the fight against substance abuse. Thank you.

I hope you all enjoy the newsletter and have a blessed holiday season.

Warmest regards,

E. Douglas Varney, Commissioner



## November 2015

### Newsletter Staff

Mike Machak, Director of Communications

Leslie Judson, Managing Editor  
Assistant Director of Communications

Jennifer Moore, Graphic Designer  
Department of General Services

Melissa Pinhal, Intern  
Assistant Editor | Special Section

Published by the Office of Communications  
Mental Health & Substance Abuse Services  
6th Floor, Andrew Jackson Building  
500 Deaderick Street | Nashville, TN 37243

Please send feedback, queries, and corrections to:  
[Leslie.Judson@tn.gov](mailto:Leslie.Judson@tn.gov) or call (615) 770-0466

Update is published online at  
<http://www.tn.gov/behavioral-health>  
by the Tennessee Department of  
Mental Health and Substance Abuse Services.



### ON THE COVER

On Oct. 4, 2015, the National Mall in Washington D.C. was filled with thousands of people gathered for Unite to Face Addiction. Held to spread the message that addiction is preventable and treatable, the rally included performances by Joe Walsh, Steven Tyler, Sheryl Crow, Jason Isbell, and The Fray. The rally raised funds for substance abuse treatment. Photo credits: Steven Tyler's photo is by TN Lifeline representative Ashley Webb. Remaining cover photos by Vik Moore, TDMHSAS Peer Recovery Coordinator, who is pictured with Mary Linden Salter, Tennessee Association of Alcohol, Drug, and other Addiction Services.



Published online at <http://www.tn.gov/behavioral-health/>  
by the Tennessee Department of Mental Health and  
Substance Abuse Services. Publication Authorization  
#339454.



### Our VISION

To be one of the nation's most innovative and proactive state behavioral health authorities for Tennesseans dealing with mental health and substance abuse problems.

### Our MISSION

Provide, plan for, and promote a comprehensive array of quality prevention, early intervention, treatment, habilitation, rehabilitation and recovery support services for Tennesseans with mental illness and substance abuse issues.



As work continues in the fight against prescription drug abuse and heroin . . .

## TDMHSAS Receives Visit from the White House



“All of us have a role to play in dealing with this epidemic,” said Michael Botticelli, White House Director of National Drug Control Policy, to an Aug. 31 meeting of Tennessee leaders engaged in reducing the impact of opioid based drugs like heroin and prescription pain medication on Tennesseans.

In response to the national opioid epidemic, Botticelli has coordinated actions at the national level to reduce prescription drug abuse, heroin use, and related overdoses.

Commissioner E. Douglas Varney and others were congratulated for their partnership, collaboration, and implementation of prevention efforts. Specifically, Botticelli noted communicating the dangers, reducing the number of drug dependent newborns, and expanding Oxford Houses.

“I feel optimistic we’re going to see significant change,” said Botticelli.

*(Left) Michael Botticelli, White House Director of National Drug Control Policy.*

## Work Group Studies Abuse-Deterrent Opioids

As required by the Opioid Abuse Reduction Act, the multi-agency work group led by Commissioner E. Douglas Varney, continued its collaboration and fact finding efforts in addressing the abuse of opioids in Tennessee and the recent increase in heroin. “The heroin growth rate in Tennessee is scary,” said Commissioner Varney. “It’s destroying lives and putting a strain on our criminal justice system.”

During the work group’s Aug. 25 meeting, Commissioner Varney pointed to some successes like the availability of Naloxone which offers a lifesaving remedy to someone who

overdoses. Also discussed was the reformulated OxyContin that may make the opioid more abuse-deterrent.

“The healthcare community is doing its part to help us solve this statewide substance abuse problem, said Commissioner Varney. “While we’re making progress, opioid addiction in Tennessee is costing our state in lost lives and lost productivity.”

*(Below) TDMHSAS Director of Substance Abuse Services Rod Bragg, Medical Director Howard Burley, Jr. M.D., and Commissioner Varney (standing).*



# Faith-Based Recovery Network is Growing

## Dept. Holds Certification Ceremony at Baptist Church in Nashville



Faith-Based Recovery Network Certification Ceremony, Nashville.



On a beautiful autumn afternoon in October, nearly 50 churches and faith-based organizations came together for a special ceremony at Mt. Nebo Missionary Baptist Church in Nashville. The event was held to recognize Middle Tennessee Recovery Congregations. The ceremony included music, stories of hope, and the presentation of framed certificates.

A similar ceremony was held in Memphis in July for West TN churches and faith-based organizations and an East TN event is set to be scheduled.

To learn more about the State of Tennessee's Faith-Based Recovery Network and to get involved, visit: [tn.gov/behavioral-health/topic/Faith-Based-Initiatives](http://tn.gov/behavioral-health/topic/Faith-Based-Initiatives).

(Left) Commissioner Varney with Rep. John Ray Clemmons, District 55.

“Addiction is powerful, and it affects people in ways they never imagined. [Recovery] takes body, mind, and spirit.”  
Commissioner Varney





# Department Teams Up with Vanderbilt for First Episode Psychosis Conference

by Kisha Ledlow, Tennessee Healthy Transitions Initiative Project Director

First Episode Psychosis: Developing New Directions in Tennessee was held Sept. 3-4 in Franklin. The inaugural conference was a collaboration between the Tennessee Department of Mental Health and Substance Abuse Services, Vanderbilt University, and the Tennessee Association of Mental Health Organizations. It educates attendees about the initiatives designed to recognize and treat first episode psychosis, including the components of Tennessee's First Episode Psychosis Initiative called OnTrackTN.

Dr. Lisa Dixon, of OnTrackNY, was the keynote speaker and presented on RAISE, the Recovery After an Initial Schizophrenia Episode program in New York funded by the National Institute of Mental Health, which led the state of New York to develop this innovative treatment program for adolescents and young adults experiencing a first episode of psychosis.

Other sessions included: a panel titled "Pharmacological Management of First Episode Psychosis Patients," a research update on early intervention in psychosis from Dr. Susan Azrin of the National Institute for Mental Health, Carey Counseling Center, Inc.'s OnTrackTN program and Vanderbilt's Early Psychosis Program, and a panel providing information on effective resources for families. Dr. Stephan Heckers of Vanderbilt and Assistant Commissioner Sejal West provided closing remarks and discussed possible future learning collaboratives.

The Conference was funded through the Healthy Transitions discretionary grant and set-aside dollars from the Mental Health Services Block Grant.



Sejal West with members of the Vanderbilt Department of Psychiatry which provides inpatient and outpatient services to children, adolescents, and adults with mental illnesses. Faculty members in the department are engaged in psychiatric research and patient care and many teach students, residents, and fellows at Vanderbilt Medical School.



Representing NAMI, NAMI Tennessee, NAMI Davidson, NAMI Vanderbilt, and NAMI Williamson are: front row, left to right: Leslie El-Sayad, Robin Nobling, Bonnie Humphries, Sita Diehl, Denise Stewart, and Roger Stewart. Back row, left to right: Jeff Fladen, TDMHSAS Assistant Commissioner Sejal West, Lisa McMahan, Jessica Walker, and Rhonda Ashley-Dixon.



(Left) Assistant Commissioner Sejal West and Stephan Heckers, M.D., Chair of the Department of Psychiatry at Vanderbilt University. Dr. Heckers studies the neural basis of psychiatric disorders and is particularly interested in the disease mechanisms of schizophrenia and bipolar disorder.



# Star-Studded System of Care Conference Soars

by Brenda Donaldson, Family and Youth Engagement Coordinator



Members of Youth M.O.V.E., Rutherford County pose with CEO Terrell Johnson, Wake Up Youth Foundation.

The third annual System of Care conference was held Aug. 28-29 in Cool Springs. The theme was “Aligning the Systems to Illuminate our Stars.” This free event provided community members, professionals, parents, and youth with an array of diverse and engaging seminars.

The conference opened with Commissioner Varney sharing about the importance of collaboration. He spoke about what Tennessee State Government is doing to increase collaborative efforts across the state.

The President/CEO of Wake Up Youth Foundation, Terrell “TJ” Johnson, addressed the conference and facilitated dialogue with students and staff at the Woodland Hills Youth Development Center.

During the evening, conference goers enjoyed some fun and fellowship at Glo Galaxy.

On the second day of the conference, youth attendees were able to experience a wealth of wonderful seminars and networking opportunities.

## Council on Children’s Mental Health Looks to the Future

by Keri Virgo, System of Care Expansion Program Manager

In 2008, legislation was passed to create the Council on Children’s Mental Health (CCMH). The overall mission was to develop a statewide System of Care where children’s mental health services are child-centered, family-driven, and culturally and linguistically competent. The plan was to provide a coordinated system of care for children’s mental health needs statewide.

On Aug. 27, 2015, CCMH engaged in a strategic planning session facilitated by Senior Consultant Cissy Mynatt of the

Center for Nonprofit Management. This strategic facilitation is designed to address advancements and changes in the field of children’s mental health care since the origination of CCMH. Its intention is to further the mission by helping the Council focus efforts and to identify and assemble relevant and appropriate workgroup emphases to support the larger CCMH community. This strategic effort engaged the CCMH community in updating the mission and plan to continue to be a strong and innovative voice in the future of children’s mental health in Tennessee.

# Experts Talk Family Preservation

by Edwina Chappell, Principal Investigator

The Tennessee Department of Mental Health and Substance Abuse Services' (TDMHSAS) Therapeutic Intervention, Education, and Skills (TIES) grant project brought together providers of in-home/home-based services for the Tennessee Department of Children's Services (TDCS) for an expert presentation held in May. TIES was designed to address the complex needs of children (ages 0-18) who are in or at-risk of out-of-home placement due to parent/caretaker substance use. TDMHSAS partnered with Tennessee Department of Children's Services, Centerstone, and Centerstone Research Institute to establish and implement an evidence-based, trauma-focused, culturally-competent continuum of outreach, treatments, education/counseling, and supportive services for children and families utilizing all components of the evidence-based *Intensive Family Preservation Services (IFPS)* model in conjunction with another model that targets persons with a history of trauma. IFPS is an intensive in-home service model that seeks to prevent the unnecessary removal of children from their homes by promoting safety and improving family functioning. Convening this group of providers enabled the TIES grant to assist with the enhancement and expansion of in-home service capacity in the State.

The presentation, delivered by Mark A. Washington, was a joint effort of the National Family Preservation Network (NFPN) and The Washington Group. NFPN is the primary national voice for the preservation of families and IFPS consultant for the TIES grant. Mark serves as Managing Partner of The Washington Group and has held executive leadership positions within the health and human services public sector for more than a decade. Mark focused on essential elements of in-home services, including changing market forces. He noted that increased funding for in-home services was dependent on Medicaid and Title IV-E waivers, as well as the expansion of managed care. Further, Mark caused us to ponder policy issues and whether they were responsive to funding or vice versa. He emphasized that increased provision of in-home services required changes in philosophy, staff allocation, training, and support, and that policies should be kept to a minimum because the priorities are the changing culture of agencies and producing outcomes.

Stressed during the presentation was the importance of administrators in public and/or private sectors to document how many clients are being served well not just how many clients are being served. It is imperative that we move from



Priscilla Martens, National Family Preservation Network; Mark Washington, The Washington Group; and Edwina Chappell, TDMHSAS

using data primarily to count numbers served and instead identify patterns that, in turn, inform practice, notify workers when immediate action is necessary, and determine outcomes of service delivery. **Outcomes are critical.**

Mark talked about how good models recognize:

1. Team philosophies work best! Ensuring safety of children is a team responsibility.
2. Resourcing should be done early. Families with infants and young children should receive priority for intervention, services, and frequency of contact.
3. Use of a Systems of Care approach. Families deserve to be known and understood, so it is essential to provide them with voice and choice in the in-home service provider/family relationship.

Finally, Mark talked about utilizing payment methods that reward outcomes and recognize quality. He pointed to the benefits of paying more for high-quality services that result in successful outcomes than paying less for low-quality services that fail families. He said in-home services should be targeted to the number of families that need the service, not the number of slots that are available. The goal of every in-home service provider should be to deliver services to every eligible family in need.

For copies of the presentation and invitations to activities targeting home-based service providers, contact [edwina.chappell@tn.gov](mailto:edwina.chappell@tn.gov). For information about TIES, contact [richard.boyd@centerstone.org](mailto:richard.boyd@centerstone.org).



Romeo Cartagena | Tennessee Crisis Services

# Outstanding Employee

by Mike Machak

The satisfaction that comes from helping people who are struggling with addictions and being a resource for those who are homeless brings Case Manager and Discharge Planner Romeo Cartagena tremendous reward.

“What keeps me motivated is working with my fellow employees and helping clients who seriously want to make a change in their lives, ones that have fallen on hard times and just need a helping hand to get back on their feet,” said Romeo. “I enjoy the appreciation that they show and the look on their faces when they see that there is hope at the end of the tunnel.”

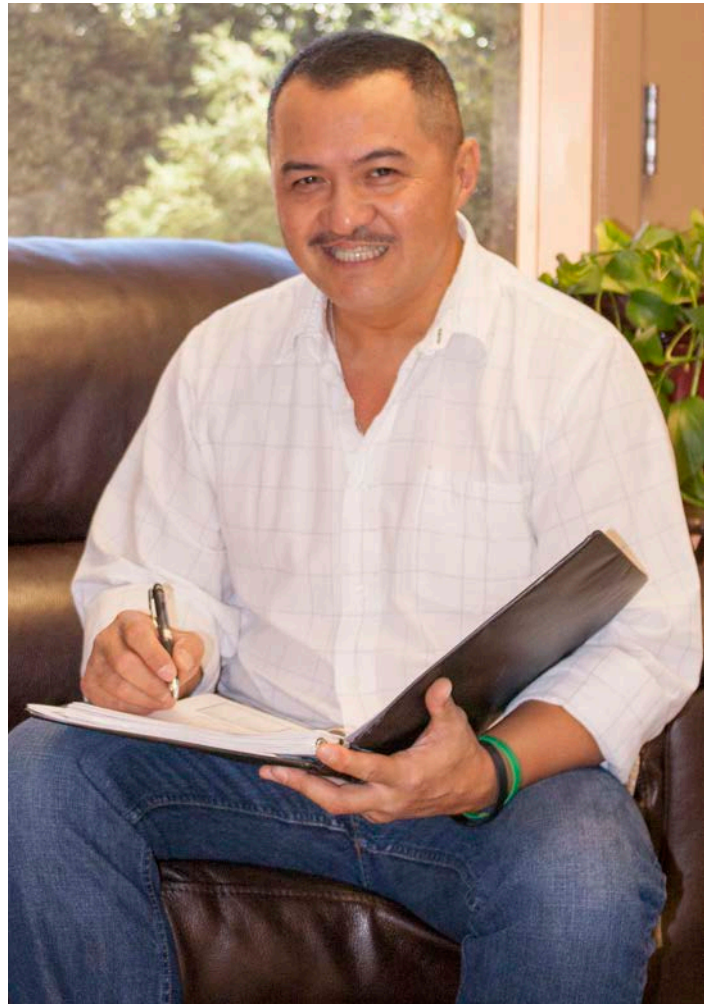
Cicely Brooks, Coordinator of Quality Management and Clinical Practice for Frontier Health, said, “Romeo goes above and beyond for clients. He regularly contacts support systems, creates safety plans, finds a shelter program, and assists clients in obtaining an ID and social security card.”

Romeo’s personal journey in search of greater job satisfaction started taking shape after more than a decade of working in a security capacity. “I was a probation officer for ten years,” said Romeo. “It just wasn’t the right job. It was not rewarding, and I was not very happy.”

In pursuit of something better, Romeo successfully landed a position as a security officer and residential tech with Frontier Health. The opening would ultimately lead to greater responsibility and career satisfaction.

“Romeo has taken clients to local day centers to become established if they are homeless and liaisons with shelter programs throughout the Tri-Cities,” said Brooks. “He encourages clients to attend both inpatient and outpatient treatment centers for alcohol and drug abuse issues, works with outpatient providers to assist in obtaining a client’s birth certificate, helps them get caught up on bills, and has assisted clients in getting case management through insurance companies.”

Within a couple years of joining Frontier Health, Romeo was promoted to Case Manager. And with it came more opportunities to make a difference in the lives of those struggling with additions.



Romeo Cartagena, Frontier Health

“What’s most rewarding is seeing a client who has successfully turned their life around,” said Romeo.

“Romeo recently worked with Discharge Planners from a higher level of care to set up a nursing home for a mutual client,” said Brooks. “Romeo consistently goes extra steps for clients.”

Romeo sees a bright future with Frontier Health. “I love this work and my fellow employees who I consider to be my second family,” said Romeo.



## NOMINATE A COLLEAGUE

To nominate a colleague as a State of Tennessee Crisis Services Outstanding Employee, [download a nomination form here](#). Completed forms are placed in a pool of applicants and reviewed by a special TDMHSAS committee.



## Make a Joyful Noise

### *Faith-Based Recovery Hits the Airwaves*

The work of faith communities in Tennessee who are addressing substance abuse in a new way was up for discussion at Nashville's Jazzy 88 WFSK in September. Sharron Kay, General Manager and host of the afternoon 411 talk show broadcast from the campus of Fisk University, engaged with Monty Burks, Director of Special Projects, about the Department's new Faith-Based Recovery Network.



## On Being Prepared: Department Facilitates Safety Training



In September, Richard Zhu, the Department's Director of Information Technology, assisted in connecting Homeland Security Agent Brice Allen (left) to an online audience of Southern Psychiatric Hospital Association members. His presentation shared information on how best to react and respond to the real scenario of an attack from an armed shooter. Allen stressed the need for organizations to be prepared, to have a plan and an escape route, and most importantly, to practice.



Like us on  
**Facebook**

*Follow the Tennessee Department of Mental Health and Substance Abuse Services on facebook for behavioral health news, provider updates, inspirational messages, and more! If you are a provider of mental health and substance abuse services and you are on facebook, please make sure and connect with us, so we can follow you, too!*

# Department Staff Honored by TSPN

The Department's Director of Crisis Services, Melissa Sparks, was honored at this year's Tennessee Suicide Prevention Network (TSPN) conference. Melissa won the Intra-State Departmental Award presented annually to a member of TSPN's Intra-State Departmental Group who has made remarkable contributions to suicide prevention. She was recognized "for the strong and enduring support and advocacy she has provided to TSPN and the Intra-State Departmental Group."



(Above) Left to right: Scott Ridgway, Executive Director of TSPN; Melissa Sparks, TDMHSAS Director of Crisis Services and Suicide Prevention; Sejal West, Assistant Commissioner of Mental Health Services; and Tim Tatum, TSPN Advisory Council Chair and Director of Behavioral Health for Pine Ridge Treatment Center.



(Above) Gwen Hamer, TDMHSAS Director of Education and Development, received a special commendation from TSPN honoring her suicide prevention work since the Network's establishment in 2001.

(Below) Conference attendees view the "Love Never Dies" quilts on display. This TSPN project memorializes loved ones lost to suicide.



To submit to Staff Briefs, email [OC.TDMHSAS@tn.gov](mailto:OC.TDMHSAS@tn.gov)



# Welcome New Hospital Employees

## Middle Tennessee Mental Health Institute

Adrianna Skelton, Psychiatric Technician  
 Christie Russell, Clerk 3  
 Erin Rogers, Custodial Worker 1  
 Icarus Palmer, Psychiatric Technician  
 Kala Simmons, Inpatient Coordinator  
 Loreto Biete, Registered Nurse 3  
 Natnale Mekonnen, Custodial Worker 1  
 Alexis Smith-Fonville, Psychiatric Technician  
 Annette Bazile, Psychiatric Technician  
 Jennifer Fogg, Registered Nurse 3  
 Karisa Graves, Psychiatric Technician  
 Kendra Simmons, Accounting Technician 1  
 Majlinda Sinjari, Certified Pharmacy Technician  
 Marsha Clayton, Psychiatric Technician  
 Nathan Beaulieu, Psychiatric Technician  
 Oluwaseun Oshunkeye, Psychiatric Technician  
 Omobolanle Adeosun, Psychiatric Technician  
 Rebecca Turk, Psychiatric Social Worker 1  
 Sara Evans, Psychiatric Social Worker 1  
 Supriya Halder, Psychiatric Technician  
 Tammie Cooper, Psychiatric Technician  
 Tiarra Patterson, Psychiatric Technician  
 Deborah Schneider, Registered Nurse 2  
 Kelly Mayo, Psychiatric Technician  
 Krishnankutty Nair, Psychiatrist  
 Monica Shaw, Psychiatric Technician  
 Anitra Green, Psychiatric Technician  
 Marisa Johnson, Registered Nurse 2  
 Megan Winkel, Psychiatric Technician  
 Mesa Mason, Psychiatric Technician  
 Stephanie Hutton, Custodial Worker 1  
 Teresa Teague, Custodial Worker 1  
 Turner Jernigan, Nurse Practitioner  
 Brenda Jones, Psychiatric Technician  
 Calista Doll, Registered Nurse 2  
 Connie Young, Psychiatric Technician  
 Darcy McPherson, Psychiatric Nurse Practitioner  
 Dondi Gasper, Registered Nurse 2  
 Faisal Siddiqui, Psychiatrist  
 Marshall Koks, Psychiatric Technician  
 Patricia Iniodu, Psychiatric Technician  
 Terence Morris, Psychiatric Technician  
 Vickie Newson, Psychiatric Technician

## Western Mental Health Institute

Belinda Douglas, Psychiatric Nurse Practitioner  
 Prients Harris, Psychiatric Technician  
 David Hodge, Registered Nurse 1  
 Clayton Hoyle, Psychiatric Technician  
 Antowin Jarrett, Psychiatric Technician  
 Christopher Jones, Psychiatric Technician  
 Kema Kelso, Facilities Safety Officer 3  
 Robert Mayes, Jr., Security Guard 1  
 Juankius Pirtle, Psychiatric Technician  
 Clenzel Polk, Jr., Psychiatric Technician  
 Deborah Smith, Registered Nurse 1  
 Tonya Williams, Psychiatric Technician

## Moccasin Bend Mental Health Institute

Sabrina Vontress, Psychiatric Social Worker 1  
 Rico Bush, Psychiatric Technician  
 Wynne Woods, Psychiatric Technician  
 Thomas Massaqui, Psychiatric Technician  
 James Anderson, Registered Nurse 2  
 Lauren Moore, Registered Nurse 2  
 Dustin Lynch, Psychiatric Technician  
 Rhonda Woody, Information Resource Services 4  
 Sindy Buckner, Registered Nurse 2  
 JoAnna Swanson, Registered Nurse 2  
 Debra Tomlinson, Registered Nurse 2  
 Sharon Jones, Licensed Practical Nurse 2  
 Andre Pope, Psychiatric Technician  
 Tyler Johnson, Psychiatric Technician  
 Benjamin Elmore, Psychiatric Technician  
 Kevin Fuller, Psychiatric Technician  
 Shawn Hassler, Psychiatric Examiner 1  
 Rasheem McCray, Food Service Worker  
 Lanetta Hudson, Cook 1  
 Scott Lacy, Custodial Worker 1  
 James Stoker, Psychiatric Technician  
 Janie Stragand, Registered Nurse 2  
 Sara Mathews, Registered Nurse 2  
 Mikcole Stout, Mental Health/IDD Investigator  
 Joseph Derrick, Psychiatric Technician  
 Naimah Greathouse, Psychiatric Technician

## Memphis Mental Health Institute

Makati Stokes, RN 2  
 Derrin Polk, Psychiatric Technician  
 Rickey Hines, Psychiatric Technician  
 LaTonya McNeal, Psychiatric Technician  
 Katrina Humphrey, RN 2  
 Steven Fulker, Psychiatric Technician  
 DeMarcus Coleman, Psychiatric Technician  
 Jorey Jefferson, Psychiatric Technician  
 LiHong Knight, RN 2  
 Patricia Hunt-Neal, Telephone Operator 1  
 Rodney Boyd, Custodial Worker 1  
 Genelle Briggs, Psychiatric Technician  
 JaNear Johnson, Psychiatric Social Worker 2  
 Crystal Johnson, RN 2  
 Tiajuana Terrell, RN 2  
 Willie Jefferson, Custodial Worker 1  
 Brian Taylor, Psychiatric Technician  
 Alma Toney, RN 2



To submit to Staff Briefs,  
 email [OC.TDMHSAS@tn.gov](mailto:OC.TDMHSAS@tn.gov)

**Michelle Smith** has joined the Office of Prevention and Early Intervention Services. Michelle graduated from Tennessee Technological University in Cookeville with her bachelor's degree in Psychology and plans to obtain her master's degree in the near future. After working in the field of mental health and crisis services for five years at a non-profit organization, she said she is blessed to be working with the State of Tennessee. When Michelle is not working with coalitions and the Lifeline Peer Project, you can find her acting at her local community theatre, teaching swing dancing, and spending time with her family.

**Jamie Murphy** has been hired to serve as the Administrative Assistant for Assistant Commissioner Rod Bragg. Jamie has been working with the State for four years. She started in Medicaid policy and most recently worked for Community Outreach with the Department of Health. Jamie graduated with a degree in the Arts. Originally from Michigan, Jamie has lived in Nashville for 10 years and currently resides in Springfield with her husband, Chris, and their 4-year-old daughter. In her free time, Jamie enjoys spending time with her family. Her hobbies include photography and travel.

**Caitlin Wright**, former Assistant Director of Housing and Homeless Services, left the Department to work in the Bureau of TennCare. Mike Davis has been hired to fill that position.

**Mike Davis** has joined the Department of Mental Health and Substance Abuse Services as the Assistant Director of Housing and Homeless Services. Mike is a Veteran who served in the United States Army both as a Commissioned and as a Non-Commissioned Officer. He has 10 years of experience in the mental health field serving a variety of functions including clinical care, management, foster youth services, treatment programs, clinical acute care, and volunteer work with homeless veterans. He holds a Master's degree in Professional Counseling and is currently entering the dissertation phase of his Doctorate degree in General Psychology. His research interests include PTSD, personality disorders, trauma-informed treatment modalities, and other applied research topics.

**Abigail (Abby) Howard, Ph.D.** has joined the Office of Research as a statistical research specialist. She has a Ph.D. in Sociology and Gerontology from Purdue University. Abby most recently worked as a graduate instructor at Purdue University teaching courses such as Introduction to Sociology; Marriage and the Family; and Social Problems, among others. She is a member of both the American Sociological Association and the Gerontological Society of America. Her dissertation examined the impact of early life adversity, such as poverty or loss of a parent, on later life health.

## Aloha, Tom! Mahalo!



*Tom Criswell, Assistant Fiscal Director, retired in September. About his departure, Department Controller Michael Walden said, "Tom has served our State in multiple capacities for over 20 years and will be greatly missed." Sue Hunt, who attended Tom's reception, agrees. Photo by Andre Gibson.*

**Brooke DeFosse, Pharm.D.** has joined the Tennessee Department of Mental Health and Substance Abuse Services as the 2015-2016 PGY1 Managed Care pharmacy resident. Brooke Graduated from the University of Tennessee College of Pharmacy with her Doctor of Pharmacy Degree in May 2015. At UT, Brooke held several leadership positions including vice-chair for the Operation Immunization committee that organized an annual Boo Flu in which immunization certified pharmacy students administered influenza vaccinations to University of Tennessee Health Science Center students, faculty, staff, and residents. Brooke also attended several legislative health fairs at Legislative Plaza with the Tennessee Pharmacists Association providing basic health screenings and medication-related information, and advocating for the profession. Brooke's residency is through June 2016.



**Find more staffing news  
Commissioner's Corner, pg. 22**



# More Retirement News

Four employees from the Office of Information Technology retired in August after decades of service with the State. The Department held a reception in the Ground Floor Hearing Room to honor Roy Chance, Richard Potts, Kevin Dillehay, and Ellen Roberts. They will be missed.

*Many thanks to Roy, Richard, Kevin, and Ellen!*



*Roy Chance proudly displays his retirement certificate alongside IT Director Richard Zhu.*



*Richard Potts with Heather Gundersen, Assistant Commissioner of Administrative Services.*



*Kevin Dillehay and his infectious smile.*

# Governor Appoints New Planning Council Chair

## Frontier Health VP Joe Page to succeed Paul Fuchcar

The Tennessee Department of Mental Health and Substance Abuse Services is pleased to announce the appointment by Governor Bill Haslam of Frontier Health Senior Vice President Joe Page to serve as Chairman of the Department's Statewide Planning Council.

Page has served on the Statewide Council for more than 10 years and as Vice Chair for the past four years. "My sincere thanks to Governor Haslam for his leadership in helping to advance the needs for those who seek treatment and therapies for themselves and loved ones and those in need," said Page. "I am grateful for the opportunity to serve the citizens of Tennessee who live every day with mental health and substance use needs."

Page has been with Frontier Health since 1985 and has served as Senior Vice President of Adult Services since 2011. Prior to that, he served as Division Director of Adult Outpatient Services. He holds a Bachelor's in Psychology from Virginia Intermont College and a Master's in Sociology from East Tennessee State University. Page is a licensed marital and family therapist in Tennessee and has also worked as a clinical therapist, a coordinator for children and youth programs, an associate director for children and youth programs, and a division director of children and youth programs including intervention, prevention, and substance abuse services.

The Council wishes to thank outgoing Chair Paul Fuchcar for his many years of leadership and service. Fuchcar is

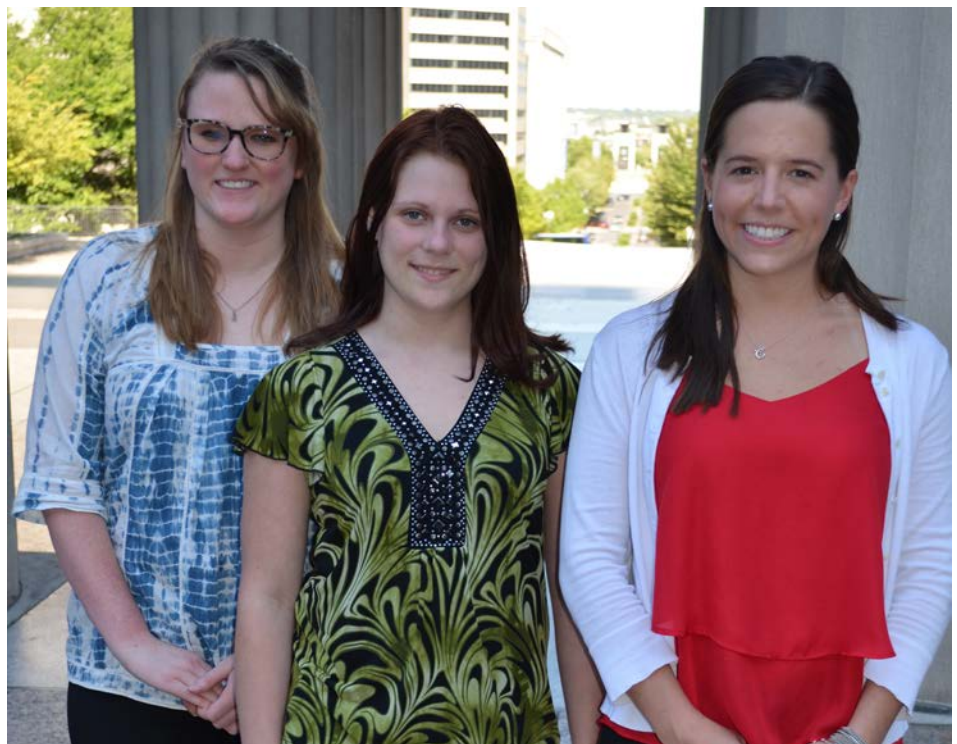


Executive Director of The Council for Alcohol and Drug Abuse Services, Inc. Laura Berling, current Council member and former Chair of the Children's Committee, will assume the role of Vice Chair.

## Vanderbilt Students Study Alternative Scheduling System

The Divisions of Hospital Services and Administrative Services are working in collaboration with Vanderbilt University School of Engineering to sponsor three Vanderbilt engineering students this fall semester. The students will be working on an electronic nurse scheduling program - a cost-saving solution to the current paper system. Welcome, Commodores!

*Pictured, left to right: Emily Bury, Devin Bird, and Cathleen Trespasz*





# Western Recognized by Crisis Intervention Team

*Submitted by Ernest Jones, Assistant Superintendent for Program Services*

Western Mental Health Institute (WMHI) was recognized Oct. 8 at a luncheon ceremony sponsored by the Jackson-Madison County Crisis Intervention Team (CIT) committee.

Lisa Roy, Assistant Superintendent of Quality Management, and I attended the ceremony and accepted a very nice plaque on behalf of WMHI for its contributions and support of CIT and the community.

The recognition reads: CIT of Jackson-Madison County, Tennessee hereby acknowledges the faithful and steadfast support of Western WMHI personnel. The generous support of this organization is an integral part of what has kept the team sustained throughout its history. In honor and recognition of the contributions that these individuals have made to C.I.T., this award is extended with sincere thanks for all the assistance provided thus far and with anticipation of further collaboration in continued partnership as stakeholders in the welfare and safety of our community.

Melissa Sparks, Director of Crisis Services and Suicide Prevention, reported that awards also went to local CIT law enforcement officers who have gone above and beyond handling



*WMHI's Ernest Jones and Lisa Roy (far right) accept the award from Kim Beare, Pathways CIT Training Coordinator.*

mental health issues and concerns. "The event was inspiring," she said.

Ellen Abbott, Director of Criminal Justice Services, and Commissioner Varney also attended the ceremony.

## MMHI Partners with Centerstone to Prevent Suicide

In support of Suicide Awareness Month, Memphis Mental Health Institute signed a Memorandum of Understanding (MOU) Sept. 23 with Centerstone Crisis Care Services for provision of suicide prevention and intervention follow-up services.

The MOU with Centerstone, in partnership with TDMHSAS, will provide discharged MMHI patients the opportunity to participate in one of two SAMSHA-funded suicide prevention and intervention grants, known as TLC Connect and TARGET.

The grants provide enhanced follow-up services to individuals ages 18-64 who recently experienced a suicide crisis. MMHI Social Services staff and Utilization Management staff will

coordinate the referral of individuals who elect to receive these services with Centerstone Crisis Care Services.

The services will include, at minimum, weekly support phone calls for up to 30 days post-discharge. The goals of these two programs include the monitoring of on-going risk and crisis management plans, linkage to needed mental health and/or related services, reducing suicidal ideation, and promoting recovery.

MMHI is an active participant in Tennessee's Zero Suicide initiative, a national effort to reduce and eliminate suicide, as a result of Zero Suicide Task Force membership by the facility's CEO Lisa Daniel.

## 25 RMHI Staff Certified to Teach Crisis Management

The Joint Commission requires staff at the RMHIs to be trained and to demonstrate competence in techniques utilized in the provision of patient care, including procedures for management of aggressive behavior. The University of Pittsburgh currently provides annual Comprehensive Crisis Management (CCM) training in a train-the-trainer format. New instructors attend a 40-hour training course, while previously trained instructors attend a 16-hour course for recertification. The training classes are held at MTMHI each year in September.

This year, ten new instructors were trained and 15 current instructors obtained recertification. These trained and certified

instructors, in turn, train the staff at their respective RMHI to use these techniques with our patients.

The classes focus on how to teach the verbal skills necessary to prevent the occurrence of aggressive behavior. It also includes teaching physical techniques designed to protect both the patient and staff should it become necessary to implement them. The goals of CCM include: to promote the safety of the individuals receiving and providing care; to reduce the use of seclusion and restraint in all healthcare settings; to promote the use of best treatment practices; to promote an environment of partnering and collaboration; to eliminate the use of aversive/coercive interventions.

# MMHI Continues Training Legacy

by Lisa Daniel, CEO

Memphis Mental Health Institute continues its multi-decade legacy as a teaching hospital by serving as a clinical rotation site for University of Tennessee psychiatric nurse practitioners.

In February, MMHI and University of Tennessee Center for the Health Sciences at Memphis (UTCHS) initiated their partnership. Three students from the College of Nursing's Advance Practice and Doctoral Studies Program worked closely with Dr. Viaja Chandel who has a special interest in family therapy.

As a preceptor, Dr. Chandel introduced students to the vital role the family system plays in both symptom presentation at the time of admission and the patient's recovery journey in the treatment process. The students were also actively involved in MMHI's Treatment Mall which provides psycho-educational group treatment for patients related to issues identified in their individual treatment plans.

In August, UTCHS's second group of students joined MMHI for a clinical rotation related to psychiatric assessment techniques, diagnostics, and psychopharmacology. Three MMHI staff: Dr. Chandel, Dr. Austin Osborn, and Melinda Mosby are currently working



Dr. Austin Osborn, MMHI, (seated, far right) and Coordinator Dr. Laura Melaro, DNP, (standing) work with students Brittany Boyd and Jerry Williams III.

with these five students as preceptors and mentors.

Regarding the opportunity to include MMHI in UTCHS students' clinical rotations, Dr. Laura Melaro, College of Nursing, stated, "The clinical experience at Memphis Mental Health provides our students with a very real and unique opportunity for learning about the assessment, diagnosis, and treatment of individuals with severe and persistent mental illness. We look forward to a long and fruitful partnership with MMHI that will provide opportunities for our

students as well as the evolving role of psychiatric nurse practitioners within the Tennessee Department of Mental Health and Substance Abuse Services."

MMHI Clinical Director Dr. Taylor Williams stated, "Clinical rotations at a state psychiatric facility are a critical part of the educational process for resident physicians, psychiatric nurse practitioner students, and an important part of the psychiatric clerkship for medical students. Our clinical staff is excited to be a part of the education and training of these individuals."

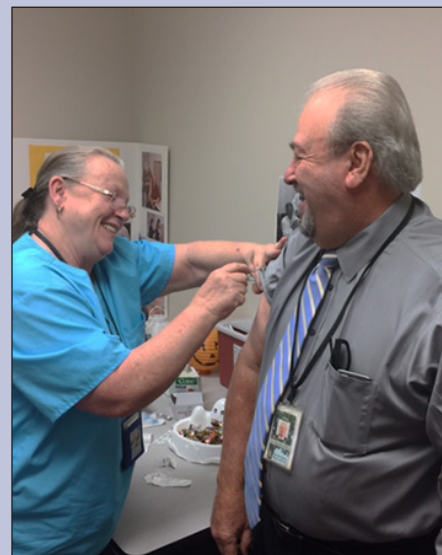


## CEOs Roll Up Their Sleeves

Flu season is here! Our hospitals are gearing up. Moccasin Bend Mental Health Institute promoted health awareness and provided employee flu vaccines at its annual health fair organized by Andy Smith, Infection Control/Employee Health Nurse. At Western, all of executive leadership got a flu shot during its nursing skills fair last month.

(Left) Michelle Mann, LPN, administers the flu vaccine for CEO Mary C. Young.

(Right) Georgia Davis administers the vaccine to WMHI CEO Roger Pursley.





## MTMHI Hosts Successful Career Fair

Middle Tennessee Mental Health Institute held a job fair in July with support from Central Office. In an effort to fill open positions, MTMHI staff prepared for the career fair weeks in advance, and several played a part in its success.

Job seekers were welcomed as they walked in the front doors. They were encouraged to fill out applications that day, and staff were on hand to answer questions.

Members of the team assisting on-site included (pictured, left to right) from MTMHI Assistant Human Resources Director Pam Monjar, and Melissa Peters and Alyssa Cave from Human Resources, Central Office.



## Thinking Outside the (Shopping) Bag

### RMHI Staff Get Creative

by Lisa Daniel, CEO

A special event for Memphis Mental Health patients was a big success! For one day, the MMHI Treatment Mall was converted into a neighborhood yard sale. Excitement built during the week before the yard sale as patients earned shopping “money” based on active participation in their scheduled Treatment Mall groups.

The event was the brainchild of Bobby Golden, Adjunctive Therapy Director, who rallied the AT staff as major supports and “salespeople” for this project. The Adjunctive Therapy staff received special recognition with each of the staff members pictured on the “Mall Money.”

Many of the MMHI staff throughout the hospital contributed to the success of the event by donating clothes, shoes, hats, purses, jewelry, personal hygiene items, books and a multitude of other typical yard sale treasures.

“We have a special event committee that plans and schedules, as part of our Treatment Mall, a fun event for our



patients at the end of each month. This event was successful beyond our wildest dreams,” said Ellouise Warr, Program Director for Active Treatment.

Eight classrooms were converted to shopping venues with the Treatment Mall becoming the equivalent of a neighborhood yard sale. Some rooms were set up with specific items such as clothing, shoes, and miscellaneous

keepsakes. Patients enjoyed filling their shopping bags with various items, some of which could be used during their stay at MMHI while other items were planned for use after discharge.

The most complicated part of the event was deciding how to spend your “Mall Money” and still get everything you wanted. One patient commented, “Can we do this every Friday?”

# Filling a Critical Role at Our Hospitals

## *Our RMHI Assistant Superintendents for Program Services*

### **Rob Cotterman**

Moccasin Bend Mental Health Institute

Rob Cotterman has worked at Moccasin Bend Mental Health Institute in Chattanooga for more than 32 years having served as a psychiatric technician, rehabilitation therapist and supervisor, program director, and as Assistant Superintendent for Program Services. Rob has also served as an ancillary professor in the Graduate School of Psychology for the University of Tennessee at Chattanooga, and as a day treatment counselor for Chattanooga Psychiatric Clinic, now Fortwood Center.

Rob is a graduate of Tennessee Government Executive Institute. He holds a Master of Science degree in Industrial/Organizational Psychology from the University of Tennessee at Chattanooga and a Bachelor of Arts in Counseling Psychology from William Jennings Bryan College. He serves on the Board of Directors of the AIM Center in Chattanooga, of the Hamilton County Homeless Healthcare Center, and on the Hamilton County Mental Health Court Advisory Board. When away from work, Rob enjoys spoiling his toy poodles, bowling, and working on his 120-plus-year-old home



### **Joyce Kovacs**

Middle Tennessee Mental Health Institute

Joyce Kovacs is a Licensed Clinical Social Worker serving as the Assistant Superintendent for Program Services at the Middle Tennessee Mental Health Institute where she has worked for eight years. Joyce has 15 years of experience in mental health working as a family therapist, hospital social worker, and as social work director. Joyce currently serves as an ex-officio board member for the Conservatorship Association of Tennessee.

While pursuing her degree in social work, she worked for the Lady Vols in Knoxville as a graduate assistant helping female athletes maintain emotional and physical health. Prior to pursuing her Master of Social Work, Joyce obtained a degree in Geological Engineering from the South Dakota School of Mines and Technology and subsequently worked for Martin Marietta Energy Systems as an engineering project manager investigating and remediating hazardous waste sites for the military.

In her personal time, Joyce enjoys outdoor activities such as mountain biking and hiking with her dogs as well as staying in shape at the gym and eating a whole foods, plant-based diet.



■ **Continued on pg. 19**



# Filling a Critical Role at Our Hospitals

## *Our RMHI Assistant Superintendents for Program Services*

■ *Continued from pg. 18*

### **Ernest Jones**

Western Mental Health Institute

Ernest Jones has over 38 years of experience working at Western Mental Health Institute. He has held several positions within the hospital, including nine years as Senior Social Worker, 13 years as MH/MR Institutional Program Coordinator for Forensic Services, four years as MH/MR Institutional Program Director for Adult Services, and 12 years as Assistant Superintendent for Program Services.

Ernest holds a Bachelor of Arts Degree in Sociology from Lane College in Jackson, TN. He is active in church, civic and community organizations, as well as serving as a board member for Bolivar Energy Authority and Quinco Mental Health Center. He also served on the Bolivar Recreation Department Board and the Devco Renovation Development Committee for downtown Bolivar, TN.

Ernest is looking forward to continuing his work at Western Mental Health Institute for several more years and meeting the day-to-day challenges of serving the mental health population. Ernest doesn't think that in this business you make a difference individually. It's not like golf or tennis where you make decisions alone. You surround yourself with a strong team and together you make a difference. He believes his contributions to a strong leadership team make a difference in providing quality patient care and making Western a top performing hospital.

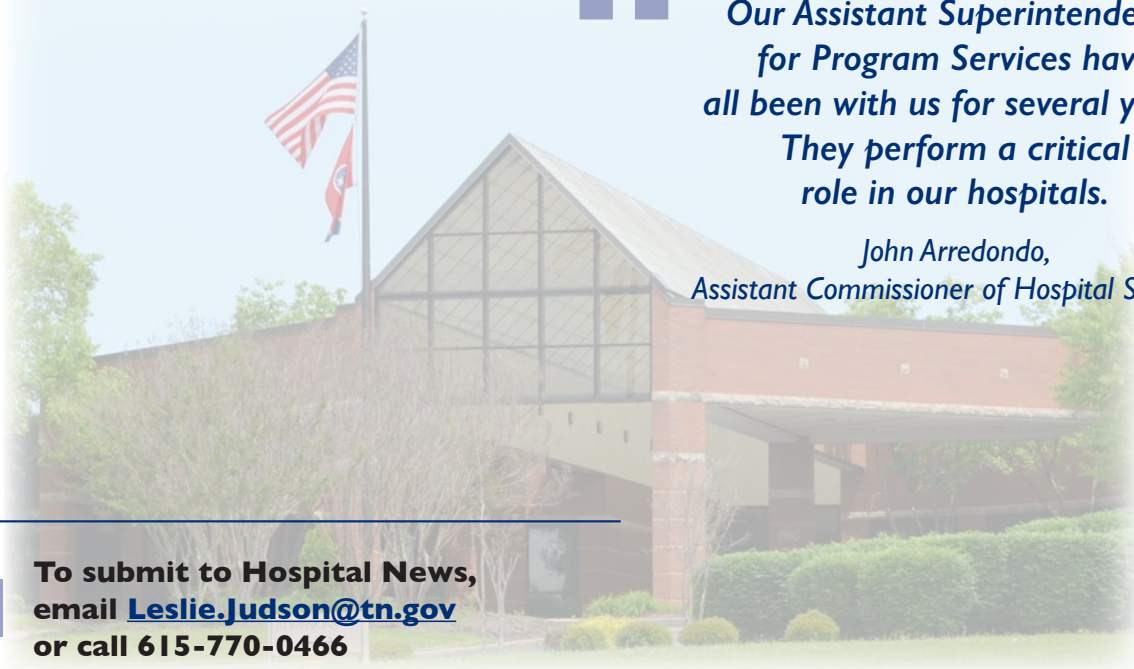


“

*Our Assistant Superintendents  
for Program Services have  
all been with us for several years.  
They perform a critical  
role in our hospitals.*

”

*John Arredondo,  
Assistant Commissioner of Hospital Services*



To submit to Hospital News,  
email [Leslie.Judson@tn.gov](mailto:Leslie.Judson@tn.gov)  
or call 615-770-0466

# TDMHSAS Wins Big at State's Annual Wellness Awards

The Tennessee Department of Mental Health and Substance Abuse Services was honored with the Wellness Activities trophy at the Working for a Healthier Tennessee annual celebration in July. The award was based on the culmination of a year of wellness activities at Central Office and all four Regional Mental Health Institutes.

Departments received points for sharing health observances and educational information with employees, and for engaging staff in wellness activities centered around the initiative's three main objectives: healthy eating, physical activity, and tobacco cessation.

Highlights of the Department's wellness activities included: a Cinco de Mayo Potluck which featured food, fun, and fitness, a Ladies Lunch 'n Learn for Breast Cancer Awareness, Wellness Wednesdays as well as various staff challenges at our hospitals.

The TDMHSAS Wellness Council plans and leads wellness activities Department-wide. Wellness Council members for the 2014-2015 cycle included the following:

**Central Office:** Alex King, Tony Jackson, Debbie Shahla, Deb Cunningham, Kevin Dillehay, Mike Machak, Leslie Judson, Monty Burks, Tonya Black, Vivian Verran, Melissa McGee, Katie Lee, and Sarah Sanders

**Moccasin Bend Mental Health Institute:** Gerald LaCourse

**Middle Tennessee Mental Health Institute:** Jamma Law

**Memphis Mental Health Institute:** Bobby Golden, Charles Taylor

**Western Mental Health Institute:** Diane Lafferty

Other State Departments who won Wellness Awards were: Department of Health, Department of Revenue, Department of Military, Department of Transportation, and Department of Economic and Community Development.

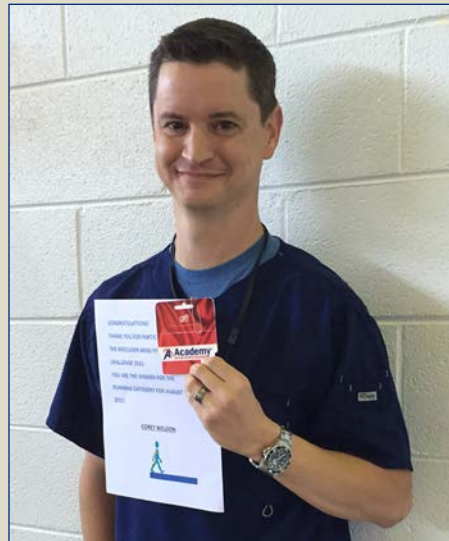


## Way to Go, Moccasin Bend Fitness Champions!

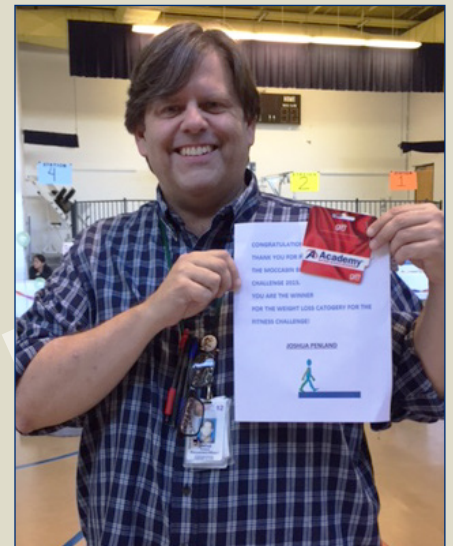
Congratulations to all who participated in the MBMHI Fitness Challenge this summer. Top honors went to the following staff:



**Dale Sharp**  
Walking 473 miles



**Cory Weldon**  
Running 619 miles



**Josh Pendland**  
Weight Loss



# Business Journal Honors Frontier Health Heroes

*From a news release submitted by Frontier Health*

The Business Journal of Tri-Cities Tennessee/Virginia included three Frontier Health staff members in its recognition of Health Care Heroes. Rita Tweed, Heather Crouse, L.P.C., and Melissa Willett were honored for their roles in “assisting others, displaying qualities of selflessness, compassion, and loyalty.”

A Cup of Kindness Support Service Award was given to Tweed, division director of administrative support services for being intrinsically involved in nearly every Frontier Health operational process and maintaining frontline staffing for 30 locations over 12,000 square miles in 12 counties in two states. Rita, a definitive problem solver, is an active member of the Management Team, Integration, Reimbursement, Electronic Records, HIPAA and Compliance committees.

Crouse was recognized for her significant contribution to the health and well-being of children in far Southwest Virginia, where she’s currently the Child and Adolescent Services Coordinator in the Planning District One area. Crouse’s early role was providing intensive in-home care for children at risk of removal and families in their homes. She obtained her license as a professional counselor and worked to create programs for youth aging out of foster care and for children with serious emotional disturbance and families as well as a home-based Children and Youth Crisis Stabilization and Intervention program, a Child Crisis Response Team, and Juvenile Forensic and Restoration services.



*Heather Crouse*

Willett, Tennessee director of Mental Health Housing, supervises 45 staff and managers who provide a housing continuum for 152 individuals with serious and persistent mental illnesses and/or co-occurring disorders. There are eight adult group homes for 74 individuals and seven apartment complexes for 78 individuals in Northeast Tennessee. She also works with individuals in need of temporary assistance or who are discharged from long-term regional mental health institutes into community settings. In addition, as Team Coordinator of the regional Tennessee Recovery Project, Melissa assisted vulnerable citizens devastated by the 2011 tornadoes in Greene, Washington, and Johnson Counties.

Congratulations, Health Care Heroes!



*Rita Tweed*



*Melissa Willett*



We know there are **MANY** heroes across the State of Tennessee working in **Mental Health & Substance Abuse Services**. **SHARE** your success stories and awards with us so that we can recognize you, too!  
Email: [Leslie.Judson@tn.gov](mailto:Leslie.Judson@tn.gov).

# Linda McCorkle Wins Founders Award



At September's Tennessee Oxford House Convention, Linda McCorkle was recognized for her efforts to go above and beyond in helping Oxford House grow to meet the needs of those in recovery. Linda, TDMHSAS Director of Treatment Services, is the very first recipient of the Tennessee Oxford House Founders Award. She is pictured holding her award alongside Oxford House staff, residents, and supporters. Also pictured are outreach workers Marty Walker, Kayla Leinenweber, and Stephanie Hendren. Congratulations, Linda!



## Welcome Aboard!

### Lisa Roy

Assistant Superintendent of Quality Management  
Western Mental Health Institute

Lisa Roy has been appointed the Assistant Superintendent of Quality Management for Western Mental Health Institute. She is a licensed advance practice social worker with 20 years of social work experience in both medical and psychiatric services. She began her career as a medical social worker for a home health agency. She has been employed at WMHI since 1998 serving as a psychiatric social worker before being promoted to the Director of Social Services in 2002.

Lisa has more than 13 years experience with Joint Commissions accreditation in meeting and developing quality improvement plans. She has served on numerous committees at WMHI and has served as the hospital's Administrative Officer of the Day on weekend rotations. She was a LEAD Tennessee and Alliance 2 graduate in 2011.

Lisa is a graduate of Memphis State University where she earned a bachelor's degree in social work. She received her MSW from the University of Tennessee. She has served her church, working with youth and in women's ministry. She has been married to her husband, Kevin, for 20 years; they have two teenage children, Chandler and Shelby.





**Krishnankutty Nair, M.D**

Staff Psychiatrist  
Middle Tennessee Mental Health Institute

Krishnankutty Nair, M.D. (left) joined the Middle Tennessee Mental Health Institute team as a staff psychiatrist in August. He received his medical degree from the University of Kerala in India and completed residencies in Internal Medicine and Psychiatry at Woodhull Medical and Mental Health Center in Brooklyn and Bronx Lebanon Hospital Center in Bronx, New York.

Prior to joining MTMHI, he served as a staff psychiatrist at the Veterans Administration Medical Center in Chillicothe, Ohio, from 1989 to 1991, he held the position of Clinical Assistant Professor of Anatomy at New York College of Osteopathic Medicine in Long Island, New York. Additionally, he worked as a Family Practice Physician and Assistant Surgeon in India and Nigeria.

Dr. Nair joins the Medical Staff's psychiatrists providing psychiatric care for acute patients.

**Faisal Siddiqui, M.D.**

Staff Psychiatrist  
Middle Tennessee Mental Health Institute

Faisal Siddiqui, M.D. joined the MTMHI team in September. He received his medical degree in medicine and surgery from Dow Medical College in Karachi, Pakistan and completed a residency in Psychiatry at Elmhurst Hospital Center in New York.

In addition to clinical research with pharmaceuticals, he was employed at Family Options in Kentucky providing psychiatric care at outpatient clinics and nursing homes. At Western State Hospital in Kentucky he treated patients with acute psychiatric crisis. He also worked at the outpatient clinic at Pennyroyal Mental Health Center from 2005 to 2008. More recently, he worked at Centerstone in Nashville and Moccasin Bend Mental Health Institute in Chattanooga. Additionally, he provided coverage for acute and chronic inpatient units at Rolling Hills Hospital in Franklin.

Dr. Siddiqui will provide admissions coverage and psychiatric care for the hospital's chronic patients.

## Quinn Simpson

Contracts Director | Assistant General Counsel  
Division of General Counsel

Quinn Simpson has joined the Division of General Counsel in the position of Contracts Director and Assistant General Counsel.

Quinn comes to the Department from the Tennessee Department of the Military where she was the Assistant General Counsel for seven years. She brings with her a variety of experience including extensive contracts administration and law.

Quinn has an undergraduate degree in Religion from the University of the South (Sewanee) and received her J.D. from Appalachian School of Law in Grundy, Virginia. Prior to law school she worked as a bill clerk with the Tennessee General Assembly.



## Abdul Enayat, M.D.

Medical Doctor  
Middle Tennessee Mental Health Institute

Abdul Enayat, M.D. joined Middle Tennessee Mental Health Institute's Medical Staff in March.

Dr. Enayat received his medical degree in general medicine from Kabul University in Afghanistan. He completed residencies in Internal Medicine and ENT at Methodist Central in Memphis and Kabul University Hospital, respectively. For the past 14 years, he was in private practice at Summit Hospital in Hermitage, Tennessee.

From 1989 to 1995, he served on the Emergency Room staff at Centennial Medical Center and worked on an outpatient basis for Columbia Care. Dr. Enayat is a welcome addition to Medical Services which provides continuing medical care for the hospital's chronic as well as acute patients.



# In Memoriam

by Kevin Beck, Assistant General Counsel

Mike Willie, Moccasin Bend Mental Health Institute Investigator since 2007, died unexpectedly at home July 19, 2015. Smart, dedicated, and always armed with a new joke, Mike was respected by his co-workers, feared by those who would do harm to patients, and described as “a rock star at his job” by his supervisor.

Originally from Nashville, Mike earned a Bachelor of Arts in Communications from the University of Tennessee, Chattanooga and earned national recognition for documentary videos he produced for the U.S. Veterans’ History Project, now archived in the Library of Congress.

Mike was a fan of UT football, the Titans, and the Braves. He was renowned for his hilarious Photoshop art and for his role as a team captain in the Chattanooga Live Trivia League. He and his team (prior city champions) were scheduled to play in the city finals on the day he died. His friends and family mourn his loss.



## “Dickson County”

Artist Libby Byler

Libby is a Certified Peer Recovery Specialist who works as the Wellness and Recovery Lead for Amerigroup.

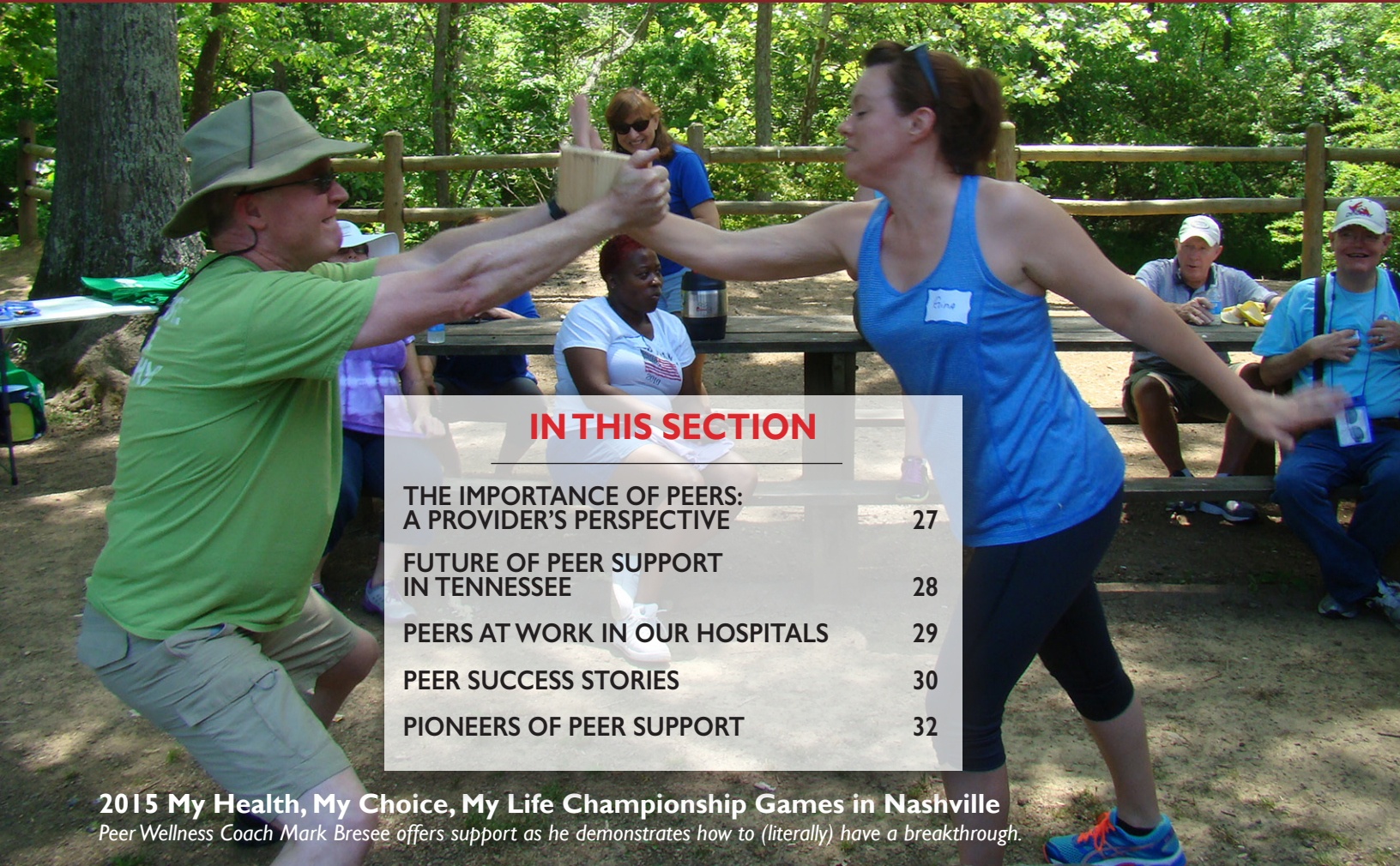
*Look for more of her wonderful artwork in upcoming editions of Update.*



# THE POWER of PEER SUPPORT

SPECIAL EDITION

NOVEMBER 2015



## IN THIS SECTION

THE IMPORTANCE OF PEERS: A PROVIDER'S PERSPECTIVE	27
FUTURE OF PEER SUPPORT IN TENNESSEE	28
PEERS AT WORK IN OUR HOSPITALS	29
PEER SUCCESS STORIES	30
PIONEERS OF PEER SUPPORT	32

### 2015 My Health, My Choice, My Life Championship Games in Nashville

Peer Wellness Coach Mark Bresee offers support as he demonstrates how to (literally) have a breakthrough.

## Peer Support Services in Tennessee: A Timeline

### 1989

Tennessee's first drop-in center "Friends Helping Friends" opens.

The center establishes four goals:

- empower participants
- provide emotional support
- combat stigma
- promote independence

### 1993

The Division of Mental Health Services establishes an Office of Consumer Affairs, now called Office of Consumer Affairs and Peer Recovery Services.

### 2004

The National Association of Peer Specialists, now International Association of Peer Supporters, is founded by a group of avid peer specialists; the organization quickly grows with supporters from every state and several countries.

### 2005

Drop-in centers are transformed into peer support centers and begin offering structured recovery education classes and support groups.



# The Importance of Peers:

## A Provider's Perspective

For someone struggling with an addiction, support from those who have been down the path of recovery can make all the difference. We asked **Paul Fuchcar**, the Executive Director at the Center for Alcohol and Drug Addiction Services (CADAS) in Chattanooga, for his perspective on the importance of peers in the recovery process.

### How do you utilize certified peers at your agency?

CADAS operates Samaritan House, a peer-to-peer recovery program for men: an eight bedroom facility managed by peers. Samaritan House relies on 12 step program attendance and community meetings to provide the structure necessary to begin a program of recovery.

### How have peers improved/changed the experience for people?

People benefit from peer-led programs because they know they are discussing issues and challenges with someone who has trudged the path before them. Peer leaders are uniquely qualified to manage programs such as this because they aren't surprised or flummoxed by an addict's behavior. They understand important components of recovery like triggers and are better able to hold residents responsible for their actions.



Paul Fuchcar

### Have you ever had a jaw-dropping moment while working with peers?

Peer Manager LaDonald Bryant has been sober for more than six years. Prior to his time as a resident at Samaritan House, LaDonald had been through substance abuse treatment at CADAS three times. He says the error of his early attempts at sobriety was his motivation. It wasn't until LaDonald did it for himself that the concepts of recovery came alive. After one year of living in Samaritan House, LaDonald became house manager. He is also the Food and Beverage Manager at the Hilton Garden Inn in Chattanooga. In his professional capacity, he has hired several peers and one of his proudest successes is a peer who has been an exemplary employee for him for over three years!

## Qualities of a Peer Leader

We asked Paul Fuchcar what he considered to be the top attributes in a peer leader. He said staff member LaDonald Bryant possesses all of these qualities and more.

- Compassion
- Understanding
- Empathy
- Desire



LaDonald Bryant

## Peer Support Services in Tennessee: A Timeline

**2007**  
Office of Consumer Affairs certifies the first Tennessee Certified Peer Specialist.  
TennCare (Medicaid) approves peer support services as provided by a Certified Peer Specialist to be a reimbursable expense in Middle Tennessee.

**2012**  
TDMHSAS announces plans for standardized peer specialist certification training and the inclusion of peer specialists who have lived experience of substance use disorders as candidates for certification.

**2013**  
TDMHSAS changes Tennessee Certified Peer Specialist (TCPS) to Certified Peer Recovery Specialist (CPRS) to reflect integrated focus on both mental illness and substance use disorders.

**Nov. 2015**  
TDMHSAS certifies its 525th Certified Peer Recovery Specialist.

# Our Peer Support Centers and Beyond

## *The Future of Peer Support in Tennessee*

by Lisa Ragan, Director of Consumer Affairs and Peer Recovery Services

Since Tennessee's first peer-run drop-in center opened in 1989, the state has transformed its behavioral health system into one that is person-centered and recovery-focused by developing peer-provided services for adults with mental illness or substance use disorder.

Today, Tennessee has 45 Peer Support Centers, seven Peer Wellness Coaches, Medicaid-reimbursable peer support services, Certified Peer Recovery Specialists (CPRSs) in recovery courts and crisis stabilization units, a peer-run statewide advocacy program, and various peer-led trainings.

Peer Support Centers have changed significantly since their beginnings as drop-in centers. Drop-in centers were among the first to have peers on staff to provide emotional support, to help participants gain control over their lives, and to combat stigma. In the mid-2000s, drop-in centers became Peer Support Centers and included more evidence-based recovery education, including classes in the Wellness Recovery Action Plan (WRAP®), BRIDGES (Building Recovery of Individual Dreams and Goals through Education and Support), and Illness Management and Recovery (IMR).

The latest transformation of Peer Support Centers has been through My Health, My Choice, My Life, a strategy for improving health and wellness for those with mental illness or substance use disorder. My Health, My Choice, My Life arose following the release of NASMHPD's seminal research study<sup>1</sup> which showed people who use public mental health services, on average, die 25 years younger than the general population.

Seven Peer Wellness Coaches from My Health, My Choice, My Life provide services in Peer Support Centers throughout

the state, among other locations. They provide six-week classes in Stanford University's Chronic Disease Self-Management Program and the Diabetes Self-Management Program, as well as University of Colorado's Well Body Workshop and Tobacco Free program.

Now a culture shift is occurring in Peer Support Centers among the participants. They are making healthier choices in many areas of their lives, including switching from coffee or Kool-Aid to water, eating healthier snacks, and even playing kickball out on the lawn. Participants have experienced significant improvements in key health indicators and are, arguably, living longer, more fulfilling lives.

The future of peer support services in Tennessee will include further integration through all aspects of the system to provide peer support services to people in every county. The Peer Engagement Project began in October with the Tennessee Mental Health Consumers' Association (TMHCA) and includes providing peer support services to patients in the Regional Mental Health Institutes (RMHIs), locations where peer support services are sorely needed. The Peer Engagement Project will not only provide hope to the patients, it will also inspire hope among the RMHI staff when they have the opportunity to work with Certified Peer Recovery Specialists who model the possibilities of recovery every day.

<sup>1</sup> Parks, J., Svendsen, D., Singer, P. & Foti, M.E., *Morbidity and Mortality in People with Serious Mental Illness*, National Association of State Mental Health Program Directors, Medical Directors Council (2006)

## Your Opinion Matters



Commissioner Varney listens to a TMHCA Conference attendee.

Commissioner Varney attended the 27th annual Tennessee Mental Health Consumers' Association conference May 14 in Manchester, TN. At the conference, Commissioner took time to listen to attendees' concerns and he greatly appreciated the feedback he received.

The peers who spoke with Commissioner said they would like to see every hospital emergency room have a staff member who understands mental illness. Attendees also expressed concern about the availability of mental health services for people who don't have insurance and for those with mental illness who are jailed.

To share your concerns or to ask questions about mental health and substance abuse services in Tennessee, email the Office of Consumer Affairs at [OCA.TDMHSAS@tn.gov](mailto:OCA.TDMHSAS@tn.gov) or call 1-800-560-5767 Monday - Friday, from 8 a.m. to 4:30 p.m.



# New Strategy in Mental Health Services

by Mike Machak

Tennessee Mental Health Consumers' Association embarked on a pilot project to enhance treatment at Tennessee's mental health institutes Oct. 1, 2015. The Peer Engagement Project will be in Tennessee's four Regional Mental Health Institutes for the next three years thanks to grant funding from the U.S. Substance Abuse and Mental Health Services Administration.

In partnership with the Tennessee Department of Mental Health and Substance Abuse Services, Certified Peer Recovery Specialists will be paired with patients, families, and institute staff to improve treatment and recovery. The project aims to teach recovery skills, to increase patient access to peer support, to reduce readmissions, and to offer hope.

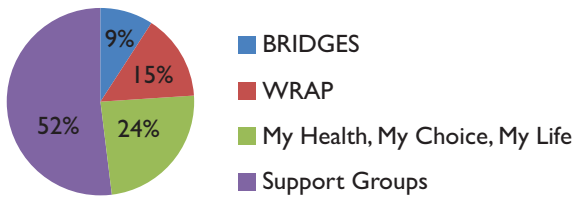
About the program, Lisa Ragan, TDMHSAS Director of Consumer Affairs and Peer Recovery Services, said "A pioneering approach, which we hope greatly improves outcomes for patients, cuts down on repeat hospitalizations and readmissions, and reduces a patients' need for crisis services after they return to their home community."



Tennessee's Certified Peer Recovery Specialists working in a Regional Mental Health Institute are Melanie Brander (left) and Helen Johnson with Program Director David Reichert. Helen and Melanie offer peer support services to patients at Middle Tennessee Mental Health Institute in Nashville.

# Peer Support by the Numbers

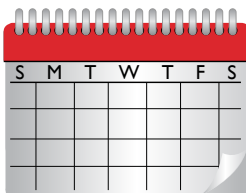
## Peer Support Centers are Making a Difference



Services offered in past 3 months

**73%**

Participants who receive disability as their source of income



Most participants come to the PSC on a daily (61%) or weekly basis (29%)

## Peer Recovery Call Center Succeeds

by Ben Harrington, Executive Director, MHAET

The Peer Recovery Call Center is making a difference. 85 percent of clients are requesting follow-up contact. 74% have reported making strides on their recovery goals or following through on their treatment plans. This comes after the Mental Health Association of East Tennessee began hiring Certified Peer Recovery Specialists to work in a call center.

The Peer Recovery Call Center model has been well received by communities in East Tennessee. Inbound call volume has increased 127%. In the first two years of program operations, CPRS's have offered peer support in more than 15,000 phone calls.

Mental Health America recognized the Peer Recovery Call Center in its Innovation Nation best practice programs in 2014. Home Federal Bank recognized Tina Wilder, a Certified Peer Recovery Specialist in the Peer Recovery Call Center, with the Home Town Hero Award for motivating and empowering clients of the Peer Recovery Call Center.

**15,000**  
Number of calls

**85%**  
Request follow-up contact

**74%**  
Report making strides in recovery

From data collected from Tennessee's Peer Support Centers, 2015

## Recovery is Possible

by Vik Moore, Peer Recovery Coordinator

In 1985, I was flat on my back in a psychiatric facility, staring up at the ceiling when I was given advice by a trusted friend who had known me throughout my childhood—before the bipolar bomb went off in my early twenties. Her visit gave me a moment of clarity despite a whirlwind of delusional psychosis. She believed I would recover!

Recovering from mental illness is a journey and a challenge. Yet people do recover. Even the Diagnostic and Statistical Manual of Mental Disorders has a category called “in full remission.” Working with my treatment team has allowed me to be in full remission or, as I like to call it, “full recovery mode.” My handful of daily medication in the 90s has dwindled to a single stabilizing pill. After being on disability income for five years, I went through a trial work period and was able to reenter the work force.

As I recovered from the “bipolar coaster,” I began using my experience to help friends and family find resources and hope. I created a tool to help me make sense of it all—a large binder of data, tips, chart notes, and resources I called “The Enpsyclopedia,” emphasis on the cope, not the psycho. The Enpsyclopedia became my go-to resource to learn, to track, and to conquer this beast of mental illness and substance use. Who knew that within a short period of time, I’d share what I learned firsthand and get paid for it?

The ad for the TMHCA job stated: “Must have personal experience with a mental illness to apply.” What? My trauma and pain was now a resume builder? I wasn’t going to be stigmatized because of my past? This job was for me! I interviewed with

Sheryl McCormick [see p32] who would later become my mentor and began working for TMHCA in 1998 as the middle Tennessee regional advocate.

After working in the field for a year, I met my wonderful wife Kim and settled down. I lived in East Tennessee and began work at Parkwest Peninsula Behavioral Health. I helped deliver peer services and train up-and-coming Peer Recovery Specialists. I also served under great mentors like the late Penny Driver and the tenacious and innovative Ron Morton, who encouraged me to finish my degree. I’ve since received my bachelor’s magna cum laude and master’s summa cum laude.

I’m currently pursuing my PhD and work as Tennessee’s Peer Recovery Coordinator where my current supervisor, Lisa Ragan, inspires me daily. She challenges me to do the best job I can. She expects recovery for every peer in our state.

People recover from illnesses every day, from heart attacks to kidney stones. Why don’t we expect the same results for those with mental or substance use disorders? I am proof! And so are many others.



**Vik Moore** is the Peer Recovery Coordinator for TDMHSAS. He enjoys spending time with his five grandchildren, power-walking, and inventing gadgets to fix everyday household problems. He runs a podcast called “It’s the Recovery Talking” on [www.PodOMatic.com](http://www.PodOMatic.com)



2015 Lifeline Representatives: Jack Wyatt, Steve Shates, Stan Grubb, Allen Burnette, Kirk Johnson, Lynda Lortis, Jason Abernathy, Ashley Davis-Webb, and Dave Hodges. Not pictured: Drew Lester.

## Statewide Peer Project Growing, Going Strong

The Lifeline Peer Project had its semi-annual meeting at the TDMHSAS Central Office in Nashville Oct. 26-27. Representatives from 10 regions across the state discussed policy, advocacy, and the importance of their voices and personal stories.

Lifeline Peer Project was established to reduce stigma related to the disease of addiction and increase access to substance abuse recovery. Lifeline Representatives help start Alcoholics Anonymous, Narcotics Anonymous, Celebrate Recovery and other self-help support groups in their local communities. They help connect individuals with treatment, and they speak about their own personal experience with recovery.

To learn more about the Lifeline Peer Project, including how to get involved, go to “Resources” on page 34.



## Drug Court Set Me Free

by Marianne Cripps, Peer Case Manager

My name is Marianne. After years of mental health issues, self-medicating with multiple substances, and facing negative consequences in the criminal justice system, I enrolled in and successfully completed a drug court program. I celebrate six years of wellness and recovery this year.

I was once broken and afraid. I felt alone and hopeless until I found people who had chosen paths similar to mine—my peers. For the effect they have had on my life, I will be forever grateful.

Today, I am a Certified Peer Recovery Specialist working as a Peer Case Manager for the same recovery court program I graduated from. I have become a living example of how wellness and recovery are possible.

My responsibilities as Peer Case Manager are constantly evolving. One of my most important functions is as the initial contact for new participants as they enter the program. I also help acquire resources for housing, employment, and behavioral health services. I share self-help meeting information, provide one-on-one peer support and case management, and facilitate “Living in Balance” group sessions twice a week. I am a member of our Adult Recovery Court team, where I act as the bridge between treatment and supervision. I offer the team an experienced perspective on what participants are going through. I know what it’s like to live in the vicious cycle of addiction. I know what it takes to stand up, dust yourself off, and believe that recovery is possible.

When I was in the drug court program and met people who were in recovery and doing well, it gave me hope. Those people—my peers—inspired me to keep moving forward and never give up. They showed me that living, rather than existing, is possible. Rather than telling me what I needed to do, my peers supported me as I changed direction and my life for the better. Now I give back and act as the inspiration that was so graciously given to me.



Marianne Cripps stands with Judge Larry B. Stanley, Jr., at her graduation from the recovery court program.

I have learned there are many roads to recovery. There is no “one size fits all.” It’s important to ask, “What happened to you?” rather than, “What’s wrong with you?” I believe participants value our work: the support, leadership, education, and advocacy we offer. We are living examples of wellness and recovery; we have overcome great adversity to become the people we are today, and we inspire the people we serve. Just as they inspire me.

## Certified Peer Recovery Specialist Conference

Peers Honor One Another at 2015 CPRS Awards



Ken Barton receives the CPRS of the Year award from Michelle Webster, chair of the Consumer Advisory Board.

The 2015 Certified Peer Recovery Specialist Conference was a collaboration this year with the My Health, My Choice, My Life initiative. The two-day event, “Creating a Culture of Wellness in Tennessee: Transforming the Role of Peers in the Provision of Behavioral Health Service,” was coordinated by TAMHO, and took place Sept. 16-17 at the Patterson Park Community Center in Murfreesboro. There were 227 people in attendance. One of the conference’s highlights is the annual CPRS Awards which are voted upon by peers who are current CPRS’s themselves.

Pictured is Ken Barton, who was awarded the Tennessee Certified Peer Recovery Specialist of the Year. This award is given to the Certified Peer Recovery Specialist in Tennessee who has consistently gone above and beyond the call of duty, modeling by example the concept of recovery and helping peers with mental illness and/or substance use disorder start and move forward in their own recovery.

Other 2015 winners were:

**Community Service Award:** John D. Allen, Peninsula

**Patsy Cronk Award:** Jennifer Jones, TMHCA

**Advocate of the Year, Individual:** Michelle Webster, TAADAS

**Advocate of the Year, Agency:** TMHCA

# Pioneers of Peer Support

Edited by Melissa Pinhal

*The field of peer recovery services is still relatively new. However, Anthony Fox and Sheryl McCormick are two of the pioneers who have led the movement in the State of Tennessee. Anthony and Sheryl are both peers who have used their experiences with recovery to educate and mentor others. We asked Anthony and Sheryl to discuss the importance of peer support, the evolution of peer services, and their own personal recovery journeys. Thanks to both of you for the work you have done, for the work you continue to do.*



**Sheryl McCormick** describes herself as a PEER- a Person Empowered to Experience Recovery. She is an advocate, facilitator, mentor, and Certified Peer Recovery Specialist.

Sheryl's start in the field of peer recovery began with 12 Step service work in 1988. Sheryl and her best friend co-founded the Bipolar Support Group in the early 90s. Taking BRIDGES teacher training led to Sheryl becoming a regional advocate and eventually State Advocacy Director for Tennessee Mental Health Consumers Association. While at Foundations Associates, Sheryl directed the Statewide Task Force on Co-occurring Disorders. She coordinated six NAMI Walks and served as regional coordinator for NAMI Tennessee. In 2005, Peninsula hired Sheryl to develop their Peer Support Specialist Training program resulting in more than 200 graduates. Sheryl has taught WRAP® to countless students, including training nearly 500 WRAP® facilitators.

Currently, Sheryl coordinates Peer Support and Recovery Training Services at Peninsula where she mentors staff, has helped to grow the Peer Support Academy model in Knox, Blount, and Sevier Counties to offer peer support in the community, including hospitals, jails, and beyond. Sheryl is one of the first two Certified Peer Recovery Specialist training facilitators for the State of Tennessee.

**Anthony Fox** is the CEO of the Tennessee Mental Health Consumers' Association (TMHCA). He is a native of Lawrenceburg, TN. He has worked in the mental health field for nearly 18 years.

Anthony's first job in the field was as the coordinator for a drop-in center in Columbia, TN. After working as a coordinator, he became an area supervisor for peer programs. He also worked as an advocate and education coordinator. He has been in management with TMHCA since 2002 where he oversees employment and approximately 50 peer specialists.

Prior to working in mental health, Anthony was an independent business owner.





# Pioneers of Peer Support *in their own words...*

## Why do you think peer support is important?

**Sheryl:** Connections made in a peer support relationship are based on mutuality and shared experiences, which creates space for empowerment and lessens the risk of power struggles. Someone who receives peer support is more likely to embrace recovery when it is role-modeled by someone who can empathize.

**Anthony:** Peer support occurs when people provide knowledge, experience, emotional, social, or practical help to each other. There are many mechanisms of peer support. If you think about it, we provide peer support to our colleagues, friends, and family every day. Unfortunately, people with mental health and substance abuse issues, many times, do not have those natural supports or have lost support because of their illness. Peer support helps build or rebuild that “bridge” to community.

## How do you mentor peers who work in the field?

**Sheryl:** We are role models. How we conduct ourselves reflects on others.

**Anthony:** I remind them that things don’t happen overnight. You have to be patient, listen and learn, find a good role model and emulate them. I have been fortunate to have many great mentors and supporters.

## Would you share some of your recovery journey?

**Sheryl:** My difficulties began in elementary school. My first break with reality happened in fourth grade. I would go on to survive numerous serious suicide attempts. My mother once told me that God saved me for a purpose. For years I wondered what that could be if it was true. I wandered through various jobs, acquiring seemingly disparate skills, enduring the pain and confusion of disordered thinking and emotional upheavals and rollercoasters.

**Anthony:** I was first diagnosed in 1971 and was unfortunately a victim of a poorly-operated mental health system. I was mistreated and dishonored in so many ways it is hard to explain or even imagine. Throughout my life I have struggled to maintain my “sanity” because of extreme mood swings, anxiety, and anger that is a direct result of bipolar disorder.

## How do you cope best?

**Sheryl:** I stay well by positive thinking, finding and embracing joy, having a support network, reading, sleep, self-assessment, using my WRAP®, being grateful, having fun, and giving back to others.

**Anthony:** Beginning in 1998, I found I was able to use my life experiences as an avenue to help others that face similar circumstances. I also found and developed alternative ways to stay healthy and improve both my mental and physical wellbeing using best practices and creating natural outlets to reduce stress and anxiety.

## What advice would you give to a peer considering entering the field as a mentor?

**Sheryl:** Accept mentorship. Seek it out. Be grateful for opportunities. Remember that self-care comes first. Don’t forget where you came from or how far you have come. Listen to others, validate them and their experiences, and encourage them.

**Anthony:** Peer recovery services can be a very rewarding although challenging field. The field is still relatively new, and practices and programs constantly change. The role is very exhaustive and fast-paced. Progress doesn’t happen overnight. Patience is key.

“ On a given day, everyone has something positive to offer.”

Zoe Simpson, Retired CPRS

## What do you find most rewarding about your work?

**Sheryl:** I love individual and group work. I enjoy advocacy, the transfer of knowledge, and being able to mentor.

**Anthony:** Seeing our participants smile is my favorite part, but I also enjoy being able to dream and be creative. With this job, I feel like I can achieve things I never thought I would be able to achieve.

## What are some lessons you’ve learned in your work?

**Sheryl:** One person CAN make a difference.

**Anthony:** Every problem is situational. Nothing lasts forever. Share the glory; take the blame. Don’t waste time being famous. Be humble.

# Tennessee Leading Nation in Peer Services

by Lisa Ragan, Director of Consumer Affairs and Peer Recovery Services

Tennessee was selected as a pilot site for training in the Supervision of Peer Recovery Specialists after participation in the 2014 Pillars of Peer Support Services Summit. Supervisors and Certified Peer Recovery Specialists who work in Peer Support Centers attended one-day trainings in Nashville and Knoxville. Training was provided by Ike Powell and Larry Fricks of the Appalachian Consulting Group.

Pillars of Peer Support Services is an initiative designed to foster use of Medicaid funding for peer support services in mental health systems of care. Since 2009, there have been six

Summits on Pillars of Peer Support Services. These events bring together nationally-recognized experts and stakeholders from across the U.S. to identify factors that facilitate use of peer services as valuable tools to improve recovery in state systems. Summit participants have been recruited and invited from their state behavioral health authorities. Tennessee has been honored to participate in four of the past six summits. A comprehensive summary of each summit - as well as various resources that promote the expansion of peer support services - can be found at [pillarsofpeersupport.org](http://pillarsofpeersupport.org).

## Your Office of Consumer Affairs and Peer Recovery Services Staff



Put a face to a name! When they are not traveling for trainings or conferences, the Office of Consumer Affairs and Peer Recovery Services staff work out of Central Office in downtown Nashville. Left to right: Vik Moore, Director Lisa Ragan, Gerald Pitts, Gina Morton, and Kathy Haley.

## RESOURCES

### TN's Certified Peer Recovery Specialist Program

Vik Moore, 615-741-7693

### TN's Family Support Specialist Program

Brenda Donaldson, 615-770-1788

### TN's Lifeline Peer Project

[tn.gov/behavioral-health/article/lifeline-peer-project](http://tn.gov/behavioral-health/article/lifeline-peer-project)

### Find a Peer Support Center

[tn.gov/behavioral-health/article/peer-support-centers-in-tennessee](http://tn.gov/behavioral-health/article/peer-support-centers-in-tennessee)

### Recovery Within Reach

An online resource featuring all things recovery.

[recoverywithinreach.org](http://recoverywithinreach.org)

### Consumer Affairs Helpline (free of charge and confidential)

1-800-560-5767, Monday-Friday (8 AM - 4:30 PM)

[OCA.TDMHSAS@tn.gov](mailto:OCA.TDMHSAS@tn.gov)

If you are experiencing a mental health emergency, call 855-CRISIS-1 or 1-855-274-7471