

## MINUTES ~ June 1, 2016

### Community Support Network Partners Meeting

3:30 to 5:00 pm ~ Gene Albaugh Community Room at the Madelyn Helling Library

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**Attending CSN Partners** – 35 attended (7 filled out evaluation forms). Anne Odell, 211; Barb Smith, Adult Family Services Commission; Caroline Hart, Sierra Mental Wellness-CSU; Cindy Wilson, Nevada County Public Health Dept.; Cynthia Meilicke, Hospice of the Foothills; Dirk Gifford, Nevada County DSS; Donna Fry, Nevada County Public Health; Gail Sullivan, Second Step; Gem Platte, One Stop - AFWD; Ginny Cutler, CoRR; Heather Smith, Sierra Mental Wellness Group-CSU; Helen Williamson, NAMI/Nevada County Mental Health Board; Jolene Hardin, AFLP - Cal-Learn; Josie Garcia, Nevada Co. Child Support Services; Joyce Ash, Child Advocates of Nevada County/FTHB; Julie Carrara, Welcome Home Vets; Laura Harter, Child Advocates of Nevada County; Lily Marie, Healing through Loss & Grief; Loydyne Lane, Parents' Resource Guide; Marley Mueller, CoRR; Matthew Coulter, Veteran; Meg Luce, PARTNERS/NCSOS; Melodee Rohlf, Public Health Community Student; Ned Russell, Got 40?, CSN; Nicola Murphy, Sierra College; Patty Dewlaney, Mother; Renée Racik, Sierra Forever Families; Sandi Hedenland, First 5; Scott Ingram, Peer Counselor; Sylvia Pichitino, Sierra Forever Families; Tiffany Napierski; Tom Cross, Community Volunteer; Trevina George, NS-PA; Valerie Dembrowsky, Nevada Union Adult Ed; Susan Sanford, CSN Coordinator.

**Welcome & Introductions** – Laurie DeMartini, PARTNERS Family Resource Center in Penn Valley; CAPC board member; CSN Steering Committee member

**Meeting Minutes & CSN Appreciations** - Accepted minutes from May meeting

**40 Developmental Assets** – Ned Russell of Got 40?

Developmental Asset # 14 - Adult Role Models (details on last page of minutes)

**Meeting Focus** – Panel - "Mental Health & Wellness - Four Specific Local Programs"

Each panelist did a presentation. At the conclusion of the presentations, there was a Q&A with meeting attendees. Key info from each presentation follows, including: what the program is, what it's based upon, who it's for, some of its characteristics, and a link to more info.

Nevada County Children's Behavioral Health ~ *Cindy Morgan*, Program Manager for the Children's Department, Nevada County Behavioral Health

- Nevada County Children's Behavioral Health Services provide therapy and related services to children and youth of all ages in Nevada County. Their goal is to keep children healthy, happy, in their homes safely, succeeding at school, and out of trouble.
- Serve kids on Medi-Cal who meet criteria for medical necessity, e.g. a recent psychiatric hospitalization, suicidal thoughts, self-injury, eating disorder, failing in school, substance abuse, breaking the law, involved with CPS, trauma, anxiety, depression.
- Scope - Serve kids 0-21, and 18-25 on a case by case basis. Therapy provided for 6-18 months, also on a case by case basis.
- Work with kid and family to build skills they can take forward into the future to manage challenges that will arise. Identify supports - family, friends, wider community. Provide a variety of different treatment models, including parent-child interaction therapy, motivational interviewing, cognitive behavioral therapy, ways to

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deal with traumatic memories, and psychiatry.

- More info: [www.mynevadacounty.com/nc/hhsa/bh](http://www.mynevadacounty.com/nc/hhsa/bh)

Moving Beyond Depression ~ *Donna Fry*, Maternal, Child and Adolescent Health Coordinator, Nevada County Public Health Department.

- MBD started in August 2015 in Nevada County in response to discovering that two of the biggest public health problems in the county are: 1. substance abuse within maternal population; and 2. perinatal depression - includes time woman is pregnant until child is about 2 years old.
- MBD is an evidence-based treatment program for maternal depression. It is a free in-home treatment program for mothers also participating in home visiting.
- Important to treat because it has a profound impact on mother and child. It's costly if not treated - financially, socially, developmentally.
- Treating in-home supports other home visiting goals (to improve the health and outcomes of at-risk children), and overcomes possible barriers to getting help, such as transportation, child care, travel time, scheduling, and more.
- A key tool for managing depression is Cognitive Behavioral Therapy. Can be as effective as anti-depressant medication. MBT provides 15 weekly sessions and a one month follow-up booster session.

- More info: [www.movingbeyonddepression.org](http://www.movingbeyonddepression.org)

Co-occurring Disorders Program at CoRR ~ *Ginny Cutler*, Integrated Mental Health Services Director, Co-occurring Disorders Program at CoRR (Community Recovery Resources)

- In co-occurring disorders treatment, mental health and substance abuse treatment issues are evaluated and addressed with the same team, at the same location, concurrently.
- Evidence Based Practice used: "Integrated Treatment for Co-Occurring Disorders" a SAMHSA "KIT" (= Substance Abuse and Mental Health Services Administration "Knowledge Informing Transformation")
- For adults and adolescents with mild to moderate mental health diagnoses and can have moderate to significant addiction issues. They must have full scope Medi-Cal, and all referrals must be approved by Behavioral Health. The program is small, space is limited.
- Multiple formats for services include individual, group, self-help, family work and collaborative support team meetings. Medication services are integrated and coordinated with medical and psychiatric providers.
- Belief in recovery by all involved, and personal goals and choices of clients are key elements of success.
- More info: [www.samhsa.gov/disorders/co-occurring](http://www.samhsa.gov/disorders/co-occurring)

Healing Through Loss & Grief groups ~ *Lily Marie*, Healing Through Loss & Grief groups

- Healing Through Loss & Grief groups are open to anyone experiencing loss or change in life. Have had participants from teens to 90s in age. Groups started here in the 1980s by Marilyn Beckwith.
- The textbook is "The Grief Recovery Handbook - Revised Edition" by John W. James and Russell Friedman.
- There are different kinds of grief: complicated (usually social overtones or stigma component), overt, and covert. Lots of kinds of losses and changes can cause grief.
- Love and grief are the two most powerful emotions. Fear and anger arise from grief.
- Group runs 14 weeks. Anyone welcome to the first two, then group closes for twelve week curriculum in "The Grief Recovery Handbook." Includes info about language for feelings, and communication skills.
- More info: [www.lossandgrief.org](http://www.lossandgrief.org)

### Q&A

Q: Re: homelessness - how are substance use and mental illness involved?

A: Ginny - Up to 75-85% of people who have substance abuse problems also have a mental health challenge...at CoRR we expect both

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A: Cindy - 10 to 50 year projections point to integrating health care systems including mental health

Q: *Who leads the grief group and what is their training?*

A: Lily Marie - people from a variety of backgrounds who have taken the program and been trained to facilitate. Groups begin in January and August. There is a handout that helps people develop "a personal crisis care plan."

Q: *Is there a cost for the grief group?*

A: Lily Marie - Group is free. Donations welcome.

Q: *Is there a wait list for people waiting to access services at NCCBH?*

A: Cindy - No, we are mandated to provide services and do so as quickly as possible.

Q: *Where would psychiatric hospitalization happen?*

A: Cindy - Not one in Nevada Co. so go to Sacramento, Vacaville, Reno

Q: *Do you work with Charis (pronounced "Kah-REES") Youth Center?*

A: Cindy - Yes. They are one of NCBH's contractors. Usually don't take local youth because of risk of flight. ([www.charisyouthcenter.org/about/history/](http://www.charisyouthcenter.org/about/history/))

Q: *What about youth who are 18-24 who don't fall into other categories?*

A: Cindy - telepsychiatry being used very effectively

Q: *Can young people self-refer? Is parental consent required?*

A: Cindy - 12 yrs old and up can self-refer, but who might pay varies. Parent has to sign treatment plan.

*Comment: Attendee familiar with the Grief Recovery Handbook says it's an amazing and effective program.*

A: Lily Marie - Grief has a purpose. Most people eventually have "the big one." Grief can help us find a part of ourselves we didn't know before.

Q: *Are veterans using Grief Recovery? Services at CoRR?*

A: Lily Marie and Ginny both answer yes.

**Building the Network** – Sandi Hedenland, First 5 Nevada County - Kids Corner at the Nevada County Fair. Volunteer sign-up sheets at meeting. Info will be posted and updated on CSN website between now and the Fair, which runs August 10-14.

### **Network Announcements and Meeting Evaluation**

- Loydyne Lane, Parents' Resource Guide - Can help to get info out to parents about things going on. They welcome submissions. June 15 is deadline for back to school issue.
- Julie Carrara, Executive Director, Welcome Home Vets - Image Nation photo exhibit opening on June 3. On display at Rood Center and will move to Center for the Arts later in the year.
- Helen Williamson, National Alliance on Mental Illness (NAMI) - Three handouts from workshop with Dr. Peter Van Houten: *Addiction and Mental Illness are Health Conditions*, *Baseline Understanding of Mental Illness and Addiction*, and *Communicating with Someone who has a Psychiatric Illness*.

**Adjournment** - 5 pm – REMEMBER: CSN Partner meetings on summer hiatus for July and August (you can volunteer for Kids Corner!). Next meeting: September 7, 2016, Gene Albaugh Community Room, at the Madelyn Helling Library.

**2016 CSN Partner Meeting Dates** ~ January 6, February 3, March 2, April 6, May 4, June 1, July & August-hiatus, September 7, October 5, November 2, December-hiatus. Gene Albaugh Community Room, at the Madelyn Helling Library.

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## Community Support Network of Nevada County Meeting Agreements

- Make decisions by consensus.
- Create an atmosphere of mutual respect that includes active listening and listening without judging.
- Start and end on time.
- Maintain a sense of humor and a positive attitude.
- Bring concerns to the whole group. Don't take them to the parking lot after the meeting.
- Set up the room in an inclusive way.
- Take responsibility for a task only if you have the time to accomplish it.
- Everyone is empowered to be a process observer and take ownership for the health of the meeting and is responsible for the health of the whole meeting.
- Be sensitive to others' need for more information. Make sure everyone understands.
- Be careful of injecting your self-interest and label it as such. Be able to layout your agency's interest and be open to other's interests.
- Meetings are meaningful and have a shared purpose.
- This is a living document and can be changed as needed.

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### Developmental Asset # 14 - Adult Role Models– June 1, 2016

*Parent(s) and other adults model positive, responsible behavior.*

The many examples of disrespect toward those with differing opinions on local and national political issues and candidates were the incentives for this month's 40 Asset tip.

- Avoid disparaging remarks about co-workers, politicians, sports figures, others.
- Regardless of methods or words employed or view expressed, try to assume:
  - Every parent wants what is best for their children
  - Every teacher wants children to learn and be successful
  - Every community member wants what is best for our community
  - Every local, state, or national politician wants what is best for his/her area of responsibility
- When witnessing others' bad behavior, discuss alternate ways of viewing and handling the situation.
- Help other adults recognize negative model behavior.
- Help parents obtain the internal assets they are missing so that they can model positive, responsible behavior for their children.

To learn more about the 40 Developmental Assets (Got40?), call 530-271-5617 or email [info@Got40.org](mailto:info@Got40.org) or [NedRussell@pacbell.net](mailto:NedRussell@pacbell.net).

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