

Spring 2016



# HEARTS & MINDS

Community Newsletter of Kennebec Behavioral Health





## CRAFT- UNIQUELY KBH!

*Tina Chapman, Director of Communications & Development, & Bob Long, Administrator of Substance Abuse Grants & Contract Services*

Community Reinforcement and Family Training (CRAFT) is a comprehensive behavioral program that focuses on the family members of those in harm's way due to substance use. It teaches family members to optimize the positive impacts they have on their loved one about the substance use and avoid confrontation and detachment.

CRAFT methods are evidence-based and provide families with a hopeful, positive and more effective alternative to addressing substance problems as compared with other intervention programs.

Three years ago, Kennebec Behavioral Health began offering

the CRAFT Program at clinic locations in Augusta, Waterville and Skowhegan. Since then, the number of clients who are requesting and being referred to the CRAFT Program has steadily increased.

As a result, KBH is in the process of expanding and enhancing its CRAFT network of providers and subsequently increasing access to CRAFT in and around the communities the agency serves.

Three KBH clinicians, Bob Long, Tanya Johanson and Paige Ricciardo recently had the amazing opportunity to attend the national CRAFT Training at the Parents Translational Research Center at the Treatment Research Institute in Philadelphia, PA and offered by Robert J. Meyers, Ph.D. & Associates.

This three-day foundational training provided the KBH clinicians with

instruction in the CRAFT model and was taught by Dr. Robert J. Meyers himself.

The success of the CRAFT model has been widely documented. Across a number of clinical research studies, CRAFT consistently gets 64%- 86% of cases into treatment, typically after only five sessions. In comparative studies, CRAFT treatment engagement is significantly higher than other types of intervention models, i.e. the Johnson Intervention (30%) and Al-Anon (0%-17%).

CRAFT is available either by self-referral or by provider referral. CRAFT is covered by self-pay and third party insurance. For more information contact Kennebec Behavioral Health at 1-888-322-2136 or visit KBH's website at [www.kbhmaine.org](http://www.kbhmaine.org).



New Balance in Norridgewock has generously donated sneakers to Capitol Clubhouse in Augusta and High Hopes Clubhouse in Waterville. Since this past March, New Balance has contributed over 150 pairs of men's and women's sneakers to the Vocational and Psychosocial Clubhouses. In total, the value of these donations was over \$6,000. This thoughtful gift will go towards supporting the clubhouse members and promoting KBH's mission!

# A MESSAGE FROM THE CEO



At Kennebec Behavioral Health, we feel it is a privilege to serve the people we do every day. If you've ever thought about our mission - to promote the well-being of children, adults and families who experience mental illness, emotional difficulties or behavioral challenges, you'll notice that the emphasis is on well-being and on children, adults and families, and that their condition is secondary. This focus underscores our philosophy, which is to serve people holistically.

It's been a challenging time, with changes happening within the statewide mental health system and for those who rely on mental health services in communities all across the state of Maine. KBH has strategically and thoughtfully adapted to these changes, and we are fortunate that our agency has

the breadth and depth of services to be able to do so. This includes clinic-based services, such as Outpatient, Substance Use Disorder and Psychiatric Services that are provided on site in Skowhegan, Waterville, Augusta and Winthrop.

KBH also provides a wide range of community-based services. Case Management for both children and adults is offered throughout the mid-Maine area including Farmington and Pittsfield. Home & Community Treatment and Multi-Systemic Therapy are evidence-based practices for youth and families and are provided right in the family's home.

Gaining momentum is Behavioral Health Homes, which is a very effective way of providing services to children, adults and families. It's not a physical "home" as the name suggests - it's a model whereby a team of providers cares for the individual or family. Together they address and coordinate mental health, substance abuse, and primary care services as well as other community and social services that a family may need.

Housing and Outreach Services provides a wide range of services - from Rental Services, for persons with mental illness who can live independently, to Residential Services where persons with mental

illness can live in their own home but have 24 hour professional staff available for assistance. Other services offered include Developmental Case Management and vocational services.

Kennebec Behavioral Health regularly evaluates community and system needs and works to address service gaps within the communities we serve. One project currently underway is the development of residential services in the Augusta area for young adults who are 18-24 years old and also have a diagnosed mental illness.

Similarly, KBH is working toward filling another critical gap- the lack of residential care services for aging, medically compromised mental health consumers. While we expect more changes and challenges on the horizon, we are steadfast in our resolve to provide a broad spectrum of services as well as high quality care to the people we serve throughout mid-Maine.

A handwritten signature in blue ink that reads "Thomas J. McAdam".

Thomas J. McAdam, MBA  
Chief Executive Officer

**ONE IN FOUR PEOPLE  
HAVE A MENTAL ILLNESS...  
YOU CAN BE THE ONE WHO  
HELPS.**



Kennebec Behavioral Health is a non-profit 501 (c)(3) corporation providing mental health care. KBH provides evidence-based care to children, families and adults with experienced practitioners. Help us support the people we serve by contributing to our mission and make a donation today! You can make a one-time gift, annual gifts, gifts in stocks or bonds or as part of planned giving. Gifts can also be restricted to a specific program or purpose.

Help us continue to provide care to the uninsured and underinsured. Please call Tina Chapman (873-2136 x 1905) or Elizabeth Keane (873-2136 x 1005) in the Communications Office or visit [www.kbhmaine.org](http://www.kbhmaine.org) to learn how your gift can make a significant difference in a neighbor's life.

# KBH SPOTLIGHTS & NEWS



## RADIO AD CAMPAIGN

This year, KBH has created and aired a radio ad campaign on 92 Moose and B98.5. One week each month a recruitment and general services ad is played. In addition, every Wednesday KBH has created a Wednesday Wellness Tip. Wednesday Wellness Tips are written by KBH employees to help promote physical and mental wellness.

Do you know how to screen for mental illness or how to deal with bullying at school? KBH wants to help educate and advocate so tune in every Wednesday to learn more about how to live a healthier life for you and your family!



## ANNUAL RACE TO BENEFIT KBH

PFBF CPAs is hosting its seventh annual race with a 5K Walk/Run and Kids Fun Run. This year, proceeds will support KBH. Over the past seven years, PFBF CPAs has raised over \$60,000 for various Maine charities with the generous support of race participants, sponsors and the community.

**When:** Saturday, June 18, 2016

**Kids Fun Run** 8:30 am

**5k Walk/Run** 9:00 am

**Where:** 46 First Park Drive, Oakland

**How to register or learn more:** Visit [www.pfbf.com](http://www.pfbf.com) or [www.kbhmaine.org](http://www.kbhmaine.org).

## VOICES OF YOUTH COUNT



*Brandi Farrington, Director of Community Housing Resources*

KBH has been asked to participate in a point-in-time and qualitative survey style, homeless youth count in Kennebec County. The University of Chicago, Chapin Hall, has randomly selected twenty-eight counties nationwide to participate in this count. Twenty-two of the counties have signed on to participate.

The count will be conducted later in June and will be implemented with the input and support from young people with lived experience with this issue of homelessness. The goal of the count and project is to identify as many young people, ages 14-24, who are experiencing homelessness or housing instability, often called couch surfing, and understand what leads to these circumstances.

Our hope is that participating in the count will help gain awareness and ideally funding to support young people experiencing this challenge. KBH, as the Lead

Organization for Kennebec County, in conjunction with Chapin Hall held focus groups in Augusta and Waterville on May 18 and 19. The goal of the focus groups was to identify "hot spots" where young people congregate, how to engage youth in the count and project and identify locations and times when outreach can occur during the count.

Youth were actively engaged and voiced their opinions in both the Waterville and Augusta groups. Some of these youth, those over the age of 18, will be actively involved in conducting the count in June. Community partners, including KVCAP, Maine Children's Home, AOS 92, New Beginnings, JobCorps, The Augusta Boys and Girls Club and the Waterville Public Library came to the table to help plan for the count. We are so grateful for all who have supported the count.

For more information or for young people interested in participating in the process, please contact Brandi Farrington: (207) 873-2136 X1241.

# DBT: WHAT IS IT?

*Destiny Dow, Adult Case Manager*

Dialectical Behavior Therapy, or DBT, was developed by Marsha Linehan in the 1970s. She created the program because of her own personal struggle with dysregulated symptoms associated with borderline personality disorder. DBT is designed to help people "change their behavioral, emotional and thinking patterns" that are causing misery and distress in their daily lives.

Individuals learn four modules that will help guide them to effectively manage their overall physical and mental health. The four modules are Mindfulness, Interpersonal Effectiveness, Emotion Regulation and Distress Tolerance.

Mindfulness skills are the foundation or the building blocks for all skills learned in DBT. As Marsha Linehan states, Mindfulness is "how to observe and experience reality as it is, to be less judgmental and to live in the moment with effectiveness." Through Interpersonal Effectiveness skills, group members learn how to communicate with others in a way that reduces conflict, maintains self-respect while obtaining personal goals and improving relationships (i.e. friends, family, providers, and even strangers).

Emotion Regulation can help members to gain more control of their emotions, in particular the ones that are "not effective in helping you achieve your goals in life." Members also learn "emotions are neither good nor bad, they just are." It's what we do with them that can cause problems in living.

Members also learn to identify emotions and their usefulness which is important in regulation. Distress Tolerance is a set of skills that can help a person "survive crisis situations without making them worse." This is achieved by learning techniques that will allow members to "tolerate painful events, urges and emotions when they cannot be fixed right away."

Kennebec Behavioral Health's DBT program provides weekly groups in a safe and confidential format. There are currently three locations that offer DBT groups, they are located in Augusta, Skowhegan and Waterville facilities. DBT is continuing to expand, so please talk with your provider today to learn more about joining a group near you.

## CAPITOL CLUBHOUSE ACCREDITATION

*Clubhouse Staff & Members*

Capitol Clubhouse recently went through Clubhouse International Accreditation. Accreditation is a process that a clubhouse goes through that helps the clubhouse learn what areas they need to improve upon. It is a rewarding and educational experience for clubhouse members and staff.

Accreditation works as a kind of quality control to keep all clubhouses true to the Clubhouse International Standards, as well as a means to further develop and improve the community. The work involved in preparation makes for a great variety of opportunities for members and staff to learn about their clubhouse and reflect on strengths and opportunities for growth within their community. Our preliminary findings report was very positive with no formal recommendations, but with some helpful suggestions.

One suggestion we will be incorporating is mass emails of clubhouse events to all members. This will provide young adult members a chance to assist others with setting up email accounts and help others be better equipped for the modern world.

Our faculty guests observed our vibrant community and gave us feedback as to how we can keep things interesting. One suggestion was to make place mats with a different Clubhouse International Standard on each to keep the Standards in people's minds. Another suggestion was to install an elevator to make all floors and units accessible to all members. We are confident that we will receive a full three year accreditation as we have in past years, and await the final report from Clubhouse International.



# ACCESS CENTER

Dennis Dix, Director of Access Center

Over the years, Access Center (including our call center, web based referrals and walk in clinic) has been many things to many people.

Consistently, Access Center has been the first point of contact for entry into care at KBH. By properly aligning a patient's needs with the skills and credentials of our clinicians, we ensure better outcomes for the patient and mission success for the agency.

Providing centralized access to services at all KBH locations, the Access Center accepts referrals from a variety of sources. Further, the Center gathers information for service matching, obtains releases of information and guardianship

verification, verifies insurance and more.

This past year has seen an increase in potential barriers to care and that increases the work we do in the Access Center in order to guarantee continuity of care for our patients.

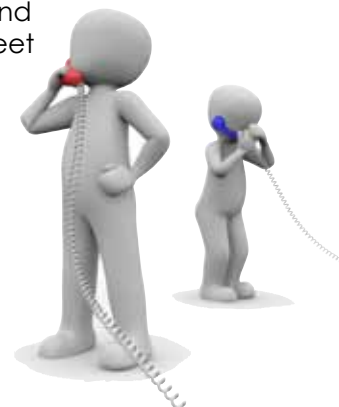
In addition to processing referrals in a timely fashion, Access Center staff have been taking additional steps to engage patients in care, enhance agency show rates, and most recently, we have been applying a triage model to improve the efficiency of care delivery by getting the right amount of care to patients at the proper time.

As such, all of our staff have become Level of Care Utilization System (LOCUS) trained and either have received, or will soon

receive, their rater ID numbers and certificates. This is another important step towards our goal for improving our patient care navigation and triage capabilities.

Our Capacity meeting structures regular and ongoing review of our processes and continued systemic alignment of the behavioral health care needs of Somerset and Kennebec County and surrounding communities, and our ability to meet those needs.

Contact the Access Center by calling 1-888-322-2136.



**Expansion** of our Thomas College and AmeriCorps partnerships, to include a host site office for Community Health Workers in Skowhegan.

KBH has just accepted our fourth **Veteran** in two years, into an Access Center internship placement.

Operational supervision has been added to our clinical supervision to **enhance** the balance of our effective clinical skills with an efficient business model

Most patients are seen within the first **30 days** of a requested service, with certain specialized care delivered even **faster**.

## 2015/2016 ACCESS CENTER ACCOMPLISHMENTS

Access Center is **launching** a host site Maine Military Community Network in Somerset County.

Five interns initiated Access Center placements in 2015, six will **graduate** in May 2016, one of whom will return for an **advanced** placement in September.

Successful internship job placements in KBH programs, as well as successful **job placement** of interns at Maine PreTrial, Acadia Hospital, and Maine DHHS.

In 2015, we also expanded our web based capabilities to include **self-referrals** on KBH's website: [www.kbhmaine.org](http://www.kbhmaine.org).



## IF YOU WANT YOUTH TO STOP ACTING OUT, UNDERSTAND THEM FIRST. THEN HELP THEM DO WHAT THEY LOVE

Ryan Kneeland  
Reprinted from Bangor Daily News

“How can we better engage some of our harder-to-reach young people?” This question was posed to me by BDN editor Erin Rhoda, who wrote a shocking yet disturbingly familiar story of a young Maine man named Garrett Brown. He made poor choices as an adolescent, developed an addiction to heroin and ultimately died of an overdose.

We've all heard similarly horrific stories before and likely know someone who has traversed a similar path. We've felt hopeless in the moment, watching someone self-destruct. Yet in hindsight, we see those crucial junctures and warning signs that are as obvious as the back of our hand. Therein lies the real tragedy.

On the spectrum of where youth make seriously poor decisions, I fit in toward the beginning. I coordinate a youth diversion program called Diversion to Assets, or “D2A” for short, a partnership among the Maine Department of Corrections, Spurwink and Kennebec Behavioral Health (and many donors and supporters in the community). Forward-thinking student resource officers, local police, school administrators, judges, assistant district attorneys and juvenile probation officers make the key choice to refer young people, between ages 11 and 17, to me after they've committed a summonsable infraction.

In brief, we work together to create an intervention plan — lasting

at least 18 hours — of strengths and what I call needs-based engagement (as opposed to what is traditionally considered “community service”). Once the young person has completed the plan, the summons is torn up and shredded as if it never existed.

The easy choice would be to simply push the summons along, punish the young person, possibly expel him or her, and carry on. In the moment this is less work for officers and administrators because they may assume the young person will learn from his or her experience and not repeat the behavior.

However, we've discovered that zero-tolerance policies are not very effective. In fact, they are a leading contributor to sustained criminal behavior and are a first step into the obscenely expensive school-to-prison pipeline. It costs the state more than \$150,000 per year to incarcerate a juvenile. Many schools and police have taken a stance against pushing young people into the criminal justice system. Admirably, they are adding even more to their already-overstretched workloads by helping agencies such as D2A treat offenses as a symptom of what are often larger challenges in the youth's life.

These challenges range widely but include undiagnosed substance use and mental health disorders, untreated and unrecognized traumatic events, family issues (necessitating functional family therapy, multisystemic therapy, or home and community-based

treatment).

Some youth have been neglected, abused and felt invisible to adults — very much earning the right to mistrust adults. They may feel like there's no place for them. Many feel particularly disengaged from employment opportunities, school clubs and general recreation. (Constructive use of time is often a major part of our intervention plans.)

For instance, I am developing a plan with a youth who was caught at a local junior high with a vaping device with peers — a classic case of caving to peer pressure and getting caught. The school could have simply suspended her, but instead the administration offered her the choice of a lesser suspension and D2A.

She elected to try the latter, and her intervention plan includes education around tobacco and vaping, plus things she is pining for — opportunities — so she can spend less time at home alone. Her father, who has sole custody, does an admirable job taking care of his daughter, but he works in Augusta, averaging 60 hours per week.

There is significant trauma due to her mother's actions and a family death in her life, so she'll likely receive counseling as part of her plan, which she thinks may be helpful...

To continue reading, please visit:  
[www.kbhmaine.org/Latest-News](http://www.kbhmaine.org/Latest-News)

The **mission** of Kennebec Behavioral Health is to **promote** the well-being of children, adults and families in central **Maine** who experience mental illness, emotional difficulties or behavioral challenges.

To be added to the list for e-news, contact  
ekeane@kbhmaine.org or  
call (207) 873-2136, ext. 1005



## LOCATIONS

### **Waterville Clinic & Administrative Offices**

67 Eustis Parkway  
Waterville, ME 04901

### **Augusta Clinic**

66 Stone Street  
Augusta, ME 04330

### **Skowhegan Clinic**

5 Commerce Drive  
Skowhegan, ME 04976

### **Winthrop Clinic**

736 Old Lewiston Road  
Winthrop, ME 04364

### **Family Visitation Center**

66 Stone Street  
Augusta, ME 04330

### **Community-Based Service Hubs**

16 Caldwell Road  
Augusta, ME 04330

37 Stone Street  
Augusta, ME 04330

5 Commerce modular  
Skowhegan, ME 04976

1-888-322-2136

### **High Hopes Clubhouse**

26 College Avenue  
Waterville, ME 04901  
207-877-0038  
[www.highhopesclubhouse.org](http://www.highhopesclubhouse.org)

### **Looking Ahead Clubhouse**

646 Main Street  
Lewiston, ME 04240  
207-376-1711  
[www.lookingaheadclubhouse.org](http://www.lookingaheadclubhouse.org)

### **Capitol Clubhouse**

37 Stone Street  
Augusta, ME 04330  
207-629-9080  
[www.capitol-clubhouse.org](http://www.capitol-clubhouse.org)



67 Eustis Parkway, Waterville, ME 04901  
[www.kbhmaine.org](http://www.kbhmaine.org)