

1989

Maine Department of Mental Health and Mental Retardation Report, 1989, Volume 8, Number 5

Maine Department of Mental Health and Mental Retardation

Follow this and additional works at: http://digitalmaine.com/osamhs_docs

Recommended Citation

Maine Department of Mental Health and Mental Retardation, "Maine Department of Mental Health and Mental Retardation Report, 1989, Volume 8, Number 5" (1989). *Substance Abuse and Mental Health Services Documents*. Paper 8.
http://digitalmaine.com/osamhs_docs/8

This Text is brought to you for free and open access by the Health & Human Services at Maine State Documents. It has been accepted for inclusion in Substance Abuse and Mental Health Services Documents by an authorized administrator of Maine State Documents. For more information, please contact statedocs@maine.gov.

John R. McKernan, Jr., Governor

Ronald S. Welch, Acting Commissioner

PARKER LEAVES FOR D.C.

Number 5

Volume 8
MAINE

1989
DEPARTMENT OF MENTAL HEALTH AND MENTAL RETARDATION

REPORT

MEYER LEADS AMHI TEAM

STAFF:

Ronald S. Welch
Associate Commissioner
for Programs

Ralph Lowe, Editor
Director
Information & Public Affairs

Jane Morrison Bubar
Associate Editor

Jane Malinowski
Clerk Typist II
Text Preparation

NON-DISCRIMINATION NOTICE

In accordance with Title VI of the Civil Rights Act of 1964 (42 U.S.C. §2000d et seq.) and 45 C.F.R. Part 80, Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794) and 45 C.F.R. Part 84, the Age Discrimination Act of 1975, as amended (42 U.S.C. §6101 et seq.) and 45 C.F.R. Part 91, the Maine Human Rights Act (5 M.R.S.A. §4551 et seq.), and Title IX of the Education Amendments of 1972, the Maine Department of Mental Health and Mental Retardation does not discriminate on the basis of sex, race, color, national origin, handicap or age in admission or access to or treatment or employment in its programs or activities. Our Department's Affirmative Action Officer coordinates our efforts to comply with the U.S. Department of Health and Human Services regulations and the U.S. Department of Education implementing these federal laws. Inquiries concerning the application of these regulations and our grievance procedures for resolution of complaints alleging discrimination may be referred to our Affirmative Action Officer, State House Station #40, Augusta, Maine 04333, telephone number: (207) 289-4289 (Voice) or (207) 289-2000 (TDD), or to the Assistant Secretary of the Office of Civil Rights, Washington, D.C.

Volume 8

1989

Number 5

MAINE DEPARTMENT OF MENTAL HEALTH AND MENTAL RETARDATION

REPORT

AS WE GO TO PRESS:

Word has been received that the Joint Commission on Accreditation of Health Care Organizations (JCAHO) has awarded three-year accreditation to the Augusta Mental Health Institute.

The accreditation means that Maine will continue to receive nearly \$3 million in state General Fund monies from health insurance reimbursements.

The next issue of the REPORT will carry more details.

On the cover:

Top, Susan B. Parker and Ron Welch share a laugh at her Farewell Tea.

Bottom, William Meyer answers reporters questions at an introductory press conference.

Photos by Jane Bubar.

IN THIS ISSUE:

| | |
|--|----|
| Parker Leaves for D.C. | 3 |
| Meyer Leads AMHI Team | 4 |
| Davenport Resigns | 5 |
| Idea Exchange | 6 |
| Sweep Away Stigma Update | 8 |
| From the Office of Substance Abuse Services | 9 |
| Community Mental Health Forums Training of Staff to Provide Services to Homeless Persons Who Are Mentally Ill | 10 |
| Support Staff Seminar | 12 |
| In Memoriam: Dr. William E. Schumacher. | 13 |
| Profile on Programs Bureau of Mental Health Intern Program | 14 |
| Boards & Committees Concerned with Mental Health: A Pull-out Section | 15 |
| Food for Thought | 19 |
| So You'd Know: Legal Services Coordinator. | 20 |
| Maine Street '90 | 21 |
| Parent Empowerment Conference | 22 |
| From BMR Region V | 23 |
| Honors and Openings. | 24 |
| BCSN Regional Review | 26 |
| Systemwide | 28 |
| Briefly | 32 |

Printed Under Appropriation # 1340.1020

STATEMENT BY GOVERNOR JOHN R. McKERNAN, JR. September 22, 1989

PARKER TO LEAVE ADMINISTRATION FOR WASHINGTON POST



Susan B. Parker says farewell to Department staff at Central Office as Acting Commissioner Ron Welch looks on. Photo by Jane Bubar.

State Mental Health and Mental Retardation Commissioner Susan Parker is resigning her post effective October 13 to take a high position with the Bush Administration in the nation's capital, Governor John McKernan said today.

In a resignation letter to the Governor dated today, Commissioner Parker said she would be formally leaving her job October 13.

The Governor said that officials in Washington would be making a formal announcement regarding the specifics of Parker's new position in the next several weeks.

In accepting Parker's resignation, the Governor said he believed that the Commissioner had made many contributions to mental health during her twenty-six month tenure.

"Commissioner Parker has helped put mental health on a new course in Maine. The program to move towards community-based mental health services was largely a result of her leadership, and that effort will have a profound effect on the services delivered to our state's mentally-ill population in the years to come.

"There's also no question that AMHI has been a troubled institution over the last nine months. That institution is one which has been neglected for years, and, under Commissioner Parker, we made the transition from ineffectual leadership to new strong leadership, and brought in some much-needed outside expertise in the form of the private hospital consortium and interim AMHI Superintendent Bill Thompson. Additionally, we have installed new leadership at our Bangor institution, and I think that these institutions and their patients will be better served because of these changes.

"I'm confident that, in her new role, Susan Parker will continue to make solid contributions in the disability field," the Governor said.

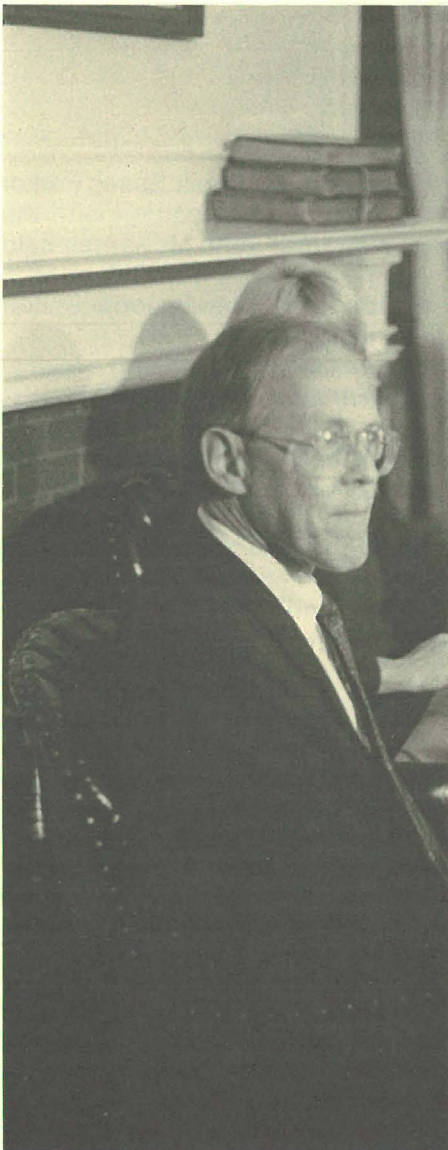
Associate Commissioner Ron Welch will be named acting Commissioner following Parker's departure, the Governor said. Welch's appointment as acting department head is required by statute.

The Governor said a group has been formed to consider a replacement for Commissioner Parker. He said that group was convened several weeks ago when Parker informed him that she was under consideration for a Washington post, and that a formal offer could be forthcoming in the near future.

STATEMENT BY COMMISSIONER SUSAN B. PARKER

September 5, 1989

WILLIAM L. MEYER ACCEPTS AMHI SUPERINTENDENCY



William L. Meyer answers the questions of the media in his new office at AMHI. Photo by Jane Bubar.

I am delighted to confirm that William L. Meyer has informed me he will accept the superintendency of Augusta Mental Health Institute.

William L. Meyer will report on Monday, September 11.

This is a salutary turn of events. It enables us to accelerate the momentum that William Thompson started toward providing top-flight management and care at our largest state-run mental health institution.

It's the culmination of an intense search, much analytical study of credentials by a superb search committee, legislative support which allows us to upgrade a competitive salary level to 89,200 dollars, and constant encouragement by Governor McKernan and his staff.

William L. Meyer is a skilled hospital administrator who is used to handling resources in an era of tight fiscal restraints. He has experience in mental health matters and legislative relations.

Above all he is used to working as a contributing member of the executive team approach in management operations, which helps in defining effective strategies and objectives in the mental health field.

William L. Meyer comes to us after almost three years as Chief Executive Officer of Broadlawns Medical Center in Des Moines, Iowa. Broadlawns is a 216 bed public, teaching hospital, the leading primary care and mental health provider in that state.

He is 49. He and his wife, Elizabeth, who in her own light has considerable experience in nursing, have three children: Kay 19, Beth 16 and Sarah 14. Kay attends Drake University. Beth and Sarah will be a junior and freshman at Cony High School.

Prior to his Broadlawns Medical Center tenure, he was President and Chief Executive Officer of Mercy Hospitals of Kansas, Inc. from 1983 to 1986.

That was preceded by five years as Administrator at Physicians Memorial Hospital in La Plata, Maryland, a 130 bed community hospital.

He is a native of Yonkers, New York. Originally his academic studies were directed toward the priesthood at St. Mary's Seminary in Baltimore, Maryland. He then switched to health care administration, earning his master's degree at George Washington University in Washington, D.C.

He is community involvement-minded through various organizations and service club memberships, augmenting his dedicated professionalism in his chosen field.

Personally, I feel it is a significant coup in attracting such a brilliant administrator to Maine, and bodes well for attaining the goals we have set for improved delivery of quality care at Augusta Mental Health Institute and throughout the system.

STATEMENT BY COMMISSIONER SUSAN B. PARKER

September 26, 1989

DAVENPORT RESIGNS

I am sorry to announce that Maine's mental retardation system is losing one of its foremost figures.

Betsy J. Davenport of Litchfield has submitted her resignation and will be leaving state service as Director of the Bureau of Mental Retardation on October 13th to pursue a career change.

Davenport has logged over a decade of distinguished service on behalf of Maine citizens with mental retardation. During her three years and eight months of directorship for the bureau, she has guided the care and growth of some four thousand Maine citizens with varying developmental disabilities.

Her most telling contribution has been her rapport with and advocacy on behalf of families and friends of individuals with mental retardation. On a personal level, she has maintained a direct working relationship with families and relatives of persons with mental retardation and, in so doing, made them a very real part of the service and advocacy system.

She and the late William Twarog were the impetus for "A Plan for People," which has been and will continue to be a vital blueprint and guide for effective and responsive planning in the field of mental retardation for both the public and private sectors.

This year she was the co-recipient of the Commissioner's Award for her tireless devotion and superlative leadership, making her one-of-a-kind in contributing significantly to Maine's public policy affecting improvements in the lives of citizens with disabilities.

I am confident that, whatever she undertakes in future responsibilities, she will bring the same dedication and skill which are so much a part of her character.

Roger Deshaies of Auburn, currently Regional Administrator of Region 3 (Kennebec), has been named acting bureau director. He was co-recipient with Davenport of the Commissioner's Award in June, an honor bestowed for "Exceptional Over-All Performance of Duties and Assignments."

A search committee will be established shortly to recommend a permanent bureau director. Ronald S. Welch, Associate Commissioner for Programs, will chair that effort.



Betsy J. Davenport

Photo by Jane Bubar

IDEA EXCHANGE

(Editor's note: In this issue, we present the debut of a new column. It's intent is to feature thoughts, comments, questions by readers on issues and matters of interest concerning the mental health/mental retardation/children with special needs services system. It's not a "bitch session." We all get enough of that. Rather, it's to be an outlet for legitimate inquiry, for clarification on policies, trends and programs. We welcome ideas from readers, requests for specifics on any material carried within these pages, and sometimes without. Names will be withheld if letter-writers so request. Replies will be printed, along with the letters, from the most authoritative source person available in this department or its satellites.)

Ralph Lowe, Editor
Director of Information and
Public Affairs
411 State Office Building
Station #40
Augusta, Maine 04333

Dear Mr. Lowe,

I read with interest the article "Governor, Legislature Provide Unprecedented Support for Citizens With Mental and Developmental Disabilities," in the volume 8, number 4 issue of Maine Department of Mental Health and Mental Retardation REPORT.

It is wonderful to see that more funding is being provided to serve those with mental health concerns. Perhaps the enormous growth cited in the scope and number of services is also a reflection of the years of neglect this segment of our population has had to deal with regarding the provision of services.

I was also interested in reading about the Family Support Legislation. It appears that the Bureau of Children with Special Needs received all of the money, although the original bill also looked to provide funds to the Bureau of Mental Retardation. What happened to the additional money sought through this bill for the Bureau of Mental Retardation? L.D. 1117 (Family Support Legislation) looked to provide funds to "develop community recreational opportunities for families of Children with Special Needs, provide respite care services in family homes, and establish a pilot placement preservation project in the Cumberland and York area to maintain persons with mental retardation in home and family settings threatened by unacceptable behavior."

Another statement in the article mentioned that, "In mental retardation the Department will be able to fund day habilitation services for which federal funding has lapsed." I am under the impression that this is not true. My sources have indicated that the state legislature provided the funds to continue program slots for those mental retardation clients who were being paid for with federal money. The quote above from the article indicates that the Department is providing these funds. I was told that Department money is being used to pay to transport those individuals, who were previously paid for with federal funds, to their programs.

This money used for transportation has been taken from the Bureau of Mental Retardation regional budgets. Word is out that because of this no new day or residential programs will be developed for at least two years.

To further deal with this situation, I have been told that if a client leaves a day program, in most instances the slot will not be refilled. In this manner it is felt that additional money will be saved. Is this unprecedented support?

I have been led to believe that the statements I have made here are factual. It is not the glowing picture of unprecedented support for citizens with developmental disabilities that evidently some would have us believe.

I would greatly appreciate a response to my understanding of the Bureau of Mental Retardation funding situation.

Thank you,

Janet May
Hampden, Maine 04444

Dear Ms. May:

Thank you for your letter to Ralph Lowe, Editor of the Department's REPORT. It reflected thoughtful reading of the magazine. We appreciate your time and effort in responding. I know that many people, like you, are concerned that mental health issues have consumed so much of the energy and attention of the Department, the Maine Legislature and the Office of the Governor during the past year.

You are right on target in your observation that the growth in funding for services for persons with mental illness was the heaviest portion of new support for Department programs and equally correct in noting that this population has suffered years of neglect in the



provision of services. I admire your determination to unite all disability groups by acknowledging this need. Working together to promote services for all people with disabilities, I believe, we can more effectively petition the Maine Legislature and other decision-makers for the necessary programs and the funding for them.

Years of neglect in services for people with prolonged mental illness were brought to public attention by increasing overcrowding at the two publically supported psychiatric hospitals and, unfortunately, through several tragic deaths at the Augusta Mental Health Institute. Because of legislative and administrative interest in services to people with prolonged mental illness, other Department programs were, indeed, put on a back burner during this legislative session and have not seen the same significant growth in funding for services.

The fate of L.D. 1117, the family support bill which you mention, was meted out in an Appropriation Committee subcommittee session. When available funds are limited, such subcommittees are charged with the task of finding a compromise between obvious need and available funds. Governor McKernan included some of the monies called for in L.D. 1117, those covering the first two items in the bill, in his budget. The remainder of the items in L.D. 1117 remained in the bill, and L.D. 1117 was carried over into the next session.

The carry over gives this Department and people like you who advocate for services to persons with mental retardation an opportunity to speak out to the 114th Legislature when it reconvenes. We have not been entirely successful in explain-

ing to legislators that families of children with mental retardation are not eligible for respite services from the Bureau of Children with Special Needs after the children reach the age of six and become clients of the Bureau of Mental Retardation. Therefore, many legislators may assume that respite funds to BCSN cover the families of all children with disabilities.

We have had great success in convincing legislators of the need for respite care, probably because they, as members of families, understand the need for "babysitting" services and can, thus, realize the more extreme need for specialized "babysitting" by families of children with special needs. We now must demonstrate the need for other family support services which may be more difficult for them to understand.

One success for the Bureau of Mental Retardation and the people whom it serves in this session was the appropriation of funds to the Bureau to replace the federal funding for day rehabilitation programs. As you noted, transportation services were not included in this appropriation to the Bureau and must be culled from already existing funds in each regional office. This does not mean, however, that "no new day or residential programs will be developed for at least two years." We expect that new programs will be forthcoming, albeit more slowly, as we continue to seek alternative funding sources.

We do not intend to deal with this situation by not funding the refilling of slots in day programs when clients leave. Although money may be tight, there are no restrictions on filling existing slots and, certainly, no intent to save money at the

expense of adults with mental retardation who would benefit from day habilitation services.

Yes, the support for people with mental retardation was not glowing. Overall, though, support for people with developmental disabilities was, as the REPORT article indicated, "unprecedented." Those people who are developmentally disabled by prolonged mental illness, as you suggested, have not enjoyed the services and supports that they so desperately need. Hopefully, the concerned response of the Legislature to them this past year bodes well for all persons with developmental disabilities, their families and advocates.

Please, continue your strong and committed advocacy for persons with developmental disabilities, particularly those with mental retardation. When L.D. 1117 again comes before the 114th Legislature, it will be a fine opportunity for you and other advocates to inform senators, representatives and the public about the family support needs of children and adults with mental retardation and their families.

Thank you again for your letter. Please feel free to call or write the office, the Bureau of Mental Retardation or the Department Office of Information and Public Affairs if you have further concerns or need more information.

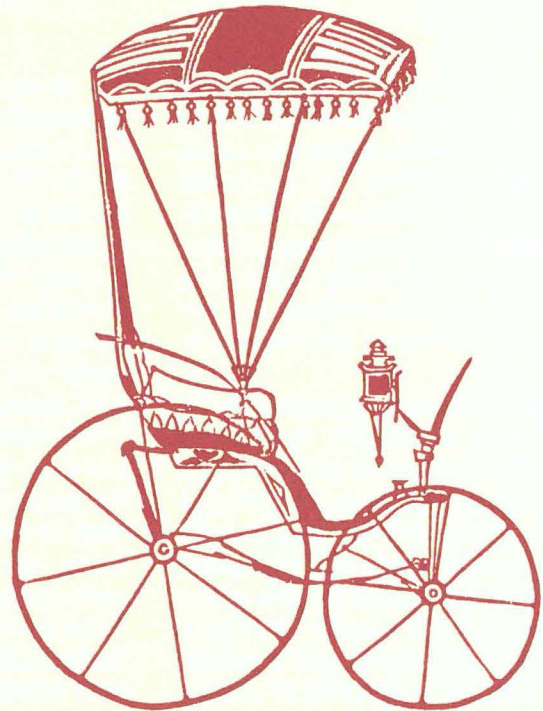
Sincerely,

Susan B. Parker

SWEEP AWAY STIGMA UPDATE

The first radio/television public service announcement, produced under the contract signed between the Maine Association of Broadcasters and the Maine Department of Mental Health and Mental Retardation, has been finished and distributed to member stations of the Broadcasters Association across the state.

The spot was produced by WCSH-TV, Channel 6, in Portland, under the direction of Gordon Wark. The entire project is being coordinated by Michael Lawrence for the Maine Association of Broadcasters. Michael Lawrence is station manager, WKZS/WJBQ, Lewiston-Auburn.



Public Service Announcement: SPOKESPEOPLE

30 sec.

Video:

Side view of a colorful surrey. The front and rear wheels project out slightly from the poster painting, allowing them movement. Spaces between the spokes are cut out. The spokes bear a label. The three spokes of the front wheel read:

**TRAINING
JOBS
TRANSPORTATION**

The three spokes of the back wheel read:

**FAMILY SUPPORT
HOUSING
FRIENDS**

A hand appears, fingers resting on the spokes. The hand sets the first wheel spinning. Then, the second. Caption: (superimposed)

**MAINE DEPARTMENT OF
MENTAL HEALTH AND
MENTAL RETARDATION**

**MAINE ASSOCIATION OF
BROADCASTERS**

STATION ID

Audio:

Very few of us are given the chance to make an impact on the world to match the invention of the wheel. But to make the wheel function at its best, it needs spokes.

That's what we can be: **spokespeople**.

The wheel of life encounters many ruts and bumps. Those persons whose lives encounter mental illness need us as **spokespeople** to turn away prejudice and fear.

Do somebody a good turn!

Help Sweep Away Stigma by speaking up!

From the Office of Substance Abuse Services

FADE CAMPAIGN UPDATE "It Takes Two To Make A Better One"

A new public service announcement emphasizing the mutual responsibility couples share helping the pregnant mom to avoid using alcohol and other drugs during pregnancy has been developed with the assistance of the Department's Office of Public Information and Channel 8 in Auburn. Bumper stickers supporting this message have been developed and can be obtained by calling 289-4203.

The Department has submitted draft legislation for the Governor's approval which would require individuals applying for a marriage license to receive a brochure warning of the potential dangers of alcohol and other drug use during pregnancy. States with similar legislation already in place include New Hampshire, Rhode Island, Wisconsin and Oregon.

Dr. Barbara Berkovich, Ed.D., Director of the Learning Development Clinic, presented a three hour workshop on learning disabilities and fetal alcohol and drug effects from 9-12 on Tuesday, November 7, 1989.

Substance Abuse Services for Persons With Cognitive Limitations

Marginal Ways is the name of a new multi component program for persons with cognitive limitations who are living independently in the greater Portland area. The program offers a social club setting, work services assistance and an educational component which includes a men's and women's group on drug and alcohol abuse. Additional information on Marginal Ways can be obtained by contacting the program's Director, Gail Collin, at 879-0847.

Mental Illness and Substance Abuse

The Department's efforts to provide quality training and technical assistance to mental health and substance abuse providers on state of the art treatment options for individuals with a dual diagnosis received a boost recently with the award of a grant from the Alcohol Drug Abuse and Mental Health Administration (ADAMHA) called "States Helping States." This grant of \$24,900 will allow for follow up consultations for agencies who implement the information provided in trainings on Assessment and Psychoeducational Groups.

To date three trainings targeted at enhancing the skills of mental health and substance abuse professionals have been held:

- | | |
|------------|--|
| July 20th | A day long seminar of Assessment of Individuals with a Dual Diagnosis by Bert Pepper, M.D., and Hilary Ryglewicz, MSW. |
| Sept. 18th | A day long seminar on Facilitation of Psychoeducational Groups by Bert Pepper, M.D., and Laura Anello, MSW. |
| Oct. 2, 3 | A two day workshop on Relapse Prevention by Tami Bell, MSW, LCSW. |

Each of these trainings have been videotaped and audio taped. Detailed summaries of each session will be forwarded to participants. Access to these materials can be gained by contacting Pam Boucher at 289-4203.

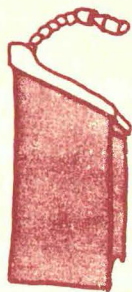
The new bumper sticker.

Help Your Mate Stop Drinking During Pregnancy!

It takes Two
to make a better One!



Substance Abuse Services
Maine Department of Mental Health & Mental Retardation



COMMUNITY MENTAL

Training of Staff to to Homeless Persons

FOOD and SHELTER:

These two simple words are commonly viewed as basic necessities of life.

Adequate housing is considered such a basic need that it is assumed to be a "right" for members in our society.

For a particular class of citizens, however, this is becoming especially difficult to secure.

The general non-availability of affordable housing for people of average means and resources is difficult enough; for people with mental illness with all of the difficulties and stigma associated with that disease, the situation is even more difficult.

For these reasons, the Bureau of Mental Health was the recent recipient of a grant to address the special needs of the people who are homeless and mentally ill. The grant allowed for a cadre of people to be hired and placed in agencies around the state to work with this population.

Those agencies are: Motivational Services in Augusta, Shalom House in Portland, Holy Innocents in Portland, York County Counseling Services in Saco, and the Area IV Mental Health Services Coalition in Lewiston.

Specialized training was a separate component of this federal grant awarded to the Bureau of Mental Health to provide assistance to homeless people with mental illness.

This training component was viewed as critical in order to provide and reinforce the necessary skills and knowledge for the workers.

The training responsibility was undertaken by the Human Resource Development function of the Bureau of Mental Health in cooperation with the University of Maine at Farmington rehabilitation program.

The curriculum for this training was not pre-defined and there were widely different views in the field as to what the content of this training should be.

After much research and deliberation, it was decided the best way to design a specially tailored training pro-



Bob Pullo, Betsy Kalau, Rachel Olney, Cathi Long.

gram for a highly specialized staff such as the homeless mentally ill workers would be to survey them directly.

Accordingly, this was done and on-site interviews were conducted by Bob Pullo, Associate Professor of Rehabilitation and the conference coordinator at the University of Maine at Farmington.

These surveys were conducted over a period of time at each of the agencies and were in-depth. The areas with the highest level of interest were:

- mental illness — nature and cause of;
- in-take and interviewing strategies;
- relationship development for trust and motivation;
- assessment and diagnosis techniques; and
- planning.

In addition, general areas of information were included, such as an over-view of the community mental health programs and housing programs available in the state.

HEALTH FORUMS

Provide Services Who Are Mentally Ill

The two-day workshop was then developed around the issues identified and the concerns that were expressed in each of those field visits. The curriculum evolved with the following sessions being delivered:

- Session 1: Overview of the Mental Health System, the Housing Options Available and the Community Support Agencies in Existence in the State of Maine
- Session 2: Rehabilitation as a Concept
- Session 3: Mental Illness and What it Means
- Session 4: Basic Interviewing and Bonding Methods and Approaches
- Session 5: Interviewing Issues
- Session 6: Teaching Basic Skills
- Session 7: Community Support Systems
- Session 8: Networking
- Session 9: Team Building



David Bigelow, Sarah Mawhinney, Bob Pullo, Mary Williams, Diane Cote. Photos by Peter Ezzy

This extensive two-day program was completed on July 24th and 25th at the newly completed Ricker Addition at the University of Maine Farmington campus.

In spite of high heat and humidity, the attention and the enthusiasm of the participants was very high and evaluations were very positive. The coordinator for the session, Bob Pullo, Associate Professor of Rehabilitation, was instrumental in pulling the session together and was assisted by Doug Dunlap, Associate Professor of Rehabilitation, and Paula Morris, Director of Conferences and Special Projects.

The enrichment to the curriculum and the exposure of the University faculty and their willingness to participate in this service related area is very beneficial and stimulating.

The benefits, to our newly hired workers and veterans equally, is to expose them to an intensive two-day session away from the normal distractions of their day-to-day job.

With the continuing concerns for adequate housing for the population in general, the needs of this population are especially critical.

In particular, people with mental illness do not have the normal resources often at their disposal or knowledge of the system to secure even the most basic housing.

In addition, the stigma of mental illness closes many doors to them that may normally be available to the average citizen.

This highly successful conference may be cited as another example of better living through HRD brought to you by your friendly Bureau of Mental Health.

*by Peter Ezzy, Director
Human Resource Development
Bureau of Mental Health*

Support Staff Gets It Together

The Department of Mental Health and Mental Retardation and Pineland Center jointly sponsored a seminar for support staff professionals on September 25th at the Senator Inn in Augusta. "Getting Your Personal and Professional Self Together" welcomed approximately one hundred secretaries, account clerks and clerical aides. Gathered from around the state, they participated with facilitator Victor Walton from Connecticut, a private leadership consultant and trainer in the areas of human relations, management/leadership skills, and organization development.

Welcoming remarks were offered by Betsy Davenport, Bureau of Mental Retardation Director. She observed that the Department had looked forward to this much needed event for a long time and was pleased so many people were able to participate.

The seminar focused on work environments which constantly change. Changing environments, Walton asserts, are nearly always stressful environments. The seminar was an "opportunity to step back and put things in better perspective both in your personal and professional life and to offer you strategies for gaining greater clarity regarding who you are, what you are doing and where you are going," he said. Role definition, time management, and strategies for mediating stress were some of the highlighted topics.

Kathryn Cook, Quality Assurance Manager and conference coordinator for BMR, commented that professional support staff are absolutely key in the daily accomplishment of effective office operations. "Offering them the opportunity to gain a fresh perspective on their personal and professional responsibilities encourages the development of positive attitudes as well as extends respect and appreciation for all they do."



Victor Walton

Photo by Jane Bubar

Positive attitudes were apparent in the majority of the seminar participants, according to one Department of Mental Health and Mental Retardation account clerk. "I heard a lot of people say it was the best day like this they'd ever had," she reported.

For starters Walton announced his belief that one person can't teach another anything but that a facilitator simply presents the material and other people are free to learn it or not. The material presented was extensive, according to participants; but the day was "too short." "I never wished I wasn't there," said one attendee, obviously surprised that she hadn't been bored by the long session.

Many seminar participants were interested in the "color" segment of the presentation during which each person selected the words which best fit his or her personality from 24 pairs of statements. These choices revealed each person to be a "blue," "red," "yellow" or "green." Designed to help the participants recognize some of their own traits and the personalities of their co-workers, the exercise was touted as "the best of the seminar" by both a "red" and a "yellow." "There's nothing wrong with anybody in this system," said the "red."

A discussion of "assertiveness" versus "aggressiveness" was also a popular part of the day. "Aggressive people will step on others and be unkind. Assertive people are honest and able to say no," explained a secretary in attendance. Maintaining one's personal integrity is an outcome of assertiveness, according to Walton, but there could be repercussions such as people not liking the assertive one at first.

"If the response and seminar evaluations continue to be this positive," said Cook, "we hope the seminar will become an annual event."



Seminar participants listen intently to the facilitator.
Photo by Jane Bubar

IN MEMORIAM

William E. Schumacher, M.D.

1921-1989

William E. Schumacher, M.D., began his public service in mental health in September 1960 as Director of the Bureau of Mental Health within the Department of Mental Health and Corrections, a position which he held until he retired in 1978.

In his capacity as Bureau Director, Dr. Schumacher functioned as Acting Commissioner of the Department and Acting Superintendent of the Augusta Mental Health Institute and Bangor Mental Health Institute.

Dr. Schumacher's innovative use of federal funds was the primary force behind the establishment of community mental health centers throughout the state of Maine.

He was also a strong proponent of the use of paraprofessionals to help rehabilitate people with mental illness, and he was responsible for the establishment of the paraprofessional as a viable resource for contributing to the rehabilitation of people with mental illness in Maine.

Governor John R. McKernan, in his letter to the widow and family of Dr. Schumacher said, "As Director of the Bureau of Mental Health in the Department of Mental Health and Corrections, Dr. Schumacher was instrumental in improving the lives of many of Maine's most vulnerable citizens. His positive influence continues today through the annual lecture series on mental health issues which bears his name."



DR. WILLIAM E. SCHUMACHER

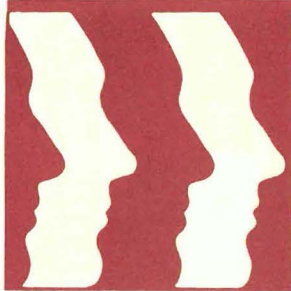
Dr. William Emil Schumacher, 68, died at the Maine Medical Center on September 27. Before his retirement in 1978, Dr. Schumacher served as Director of the Maine Bureau of Mental Health. He has been acclaimed for his vision and commitment in caring for people with mental illness. "Bill is the Dean of mental health in Maine," stated Carmen M. Celenza, Director of the Kennebec Valley Mental Health Center. "He is clearly responsible for developing community mental health services in Maine and was talking about community services at a time when the only alternatives for the mentally ill were the state hospital, the private sector or no treatment at all." Celenza noted that it was Schumacher's strong sense of humor and resourceful creativity that helped the program grow through the tough times of limited funding and support.

William E. Schumacher was born in Westwood, New Jersey, on November 17, 1921. He received a BA from Dartmouth College in 1943, attended Dartmouth Medical School, and graduated with an MD from the University of Vermont College of Medicine in 1945. He conducted post-doctoral study in Psychiatric Administration and Community Psychiatry at Columbia University, from 1958-59.

Dr. Schumacher served in the United States Navy from 1943-54 when he resigned his commission. During his naval career he served in New Orleans, Louisiana; San Diego, California; and at the U.S. Naval Hospital in Philadelphia, Pennsylvania. He was Chief of Neuropsychiatric Service at the Naval Hospital in Camp LeJeune, North Carolina; and served as Division Psychiatrist for the 3rd Marine Division in Japan.

Dr. Schumacher served as president of The National Association of State Mental Health Program Directors, The Maine Psychiatric Association, and the Kennebec County Medical Association. He was a Fellow in the American Psychiatric Association and a member of the Maine Medical Association.

In private life, "Schu" loved nature and was one of the founders and supporters of the Dartmouth Outing Club at his alma mater. He was a skilled fisherman and hunter and enjoyed skiing, sailing and tennis. He was also a master handyman and there were few things "Schu's" resourceful hands could not fix.



PROFILES ON PROGRAMS

Bureau of Mental Health Intern Program

The Bureau of Mental Health is once again sponsoring an intern from the University of Southern Maine this fall. Christopher Jacques is a Senior History Major at U.S.M. and has worked as a psychiatric technician at Jackson Brook Institute in South Portland for the past two years.

Mr. Jacques is working with Peter Ezzy, Director of Human Resource Development, on Tuesdays and Thursdays and is performing a variety of tasks for the Bureau.

William Coogan, a Political Science Professor at the University of Southern Maine, is the coordinator of the internship program. Students are required to work a minimum of 16 hours a week at their respective office and receive a total of 6 credit hours from the University.

The criteria for acceptance into the program was based upon personal interviews, past academic performance, and a written paper explaining how the student would benefit from the internship.

Ten interns are currently involved in the program and work at a variety of locations.

Several students work for Senator George Mitchell at his local offices in Biddeford and Portland.

Other interns work for Representative Joseph Brennan, Pine Tree Legal Services and the World Affairs Council.

Students are required to maintain a weekly log of their experiences and attend six seminar sessions where group discussions take place regarding the work involved at each office. During these sessions, the discussions will focus on a variety of political issues, including values, office norms, and leadership roles.

Several papers relating to these topics are also required of the students.

The internship program has proven to be a valuable experience for the students who have participated in it in the past.

First and foremost, the intern benefits from the practical work experience gained in the office.

Another important aspect of the program is that it allows for a headstart on careers. By meeting individuals and collecting recommendations, the student is enhancing his or her chances for future employment and acceptance to graduate school.

The Bureau of Mental Health also gains from having an intern in its office. Besides the fact that no monetary cost is incurred by the Bureau, a new face, along with fresh ideas gives the Bureau an added perspective from a student's point of view.

The program also serves as a valuable recruitment tool for administrative sections within the Bureau.

This program, along with other joint efforts between the Bureau of Mental Health and the University of Maine System, reaffirms the ever present goal of the two organizations to improve the quality of education within the State of Maine.

More importantly, this program serves as a valuable recruitment tool by exposing prospective future workers to the administrative dimensions of mental health programs.

BOARDS & COMMITTEES

Concerned with Children &
Adults Whom the
Department of Mental Health &
Mental Retardation Serves



The Scalawags are volunteers at the Bangor Mental Health Institute.

Photo by Central Photo Services

The mission of the Department of Mental Health and Mental Retardation is to support, empower and enable individuals and their families to enjoy an improved quality of life through our services and through strengthening the capacity of families, natural networks, and self-help groups to provide support to the individuals we are mandated to serve. This mission and the strategies used to implement it are based on the values of individualized services, consumer and family choices, fostering self-sufficiency, and flexibility to change.

Even more significant than our mission statement, the manner in which we actually serve and support children and adults with disabilities is a powerful voice for the dignity of the individual.

Appointed and volunteer boards, commissions and committees of the Department are a vital part of the work of the Department of Mental Health and Mental Retardation. The members of these groups come from all walks of life and bring a wide variety of perspectives on the Department's mandate to serve children and adults with mental illness, mental retardation, autism and other disabilities.

This insert to the Department's bi-monthly magazine briefly describes the groups which are concerned with Department issues. Besides these large, on-going organizations, the Department forms time-limited task forces and smaller groups which focus on very specific issues. In most cases a contact person is listed for the boards and committees outlined here. To learn more about subcommittees or task forces, please call the Department's Central Office, 289-4200.

Supported Employment Commission

The Supported Employment Commission was appointed by Governor John R. McKernan to promote the fullest possible employment of persons with developmental and psychiatric disabilities through a focused and collaborative effort of individuals with disabilities and their families, business and industry, state government agencies, community service and development agencies and institutions for education and training.

All those groups are represented in the Commission membership.

Commission staff is Nancy Warburton, 289-4223.

Committee on Transition

The Committee on Transition (COT) was established by the Legislature to promote and coordinate statewide development of programs to smooth the transition of persons with disabilities from school to adult life.

The COT oversees regional transition programs and advises the governor, the legislature and state agencies on the concerns of young adults in transition.

Staff to the Committee is Larry Glantz, 780-4501.

Mental Health Planning Council

The Mental Health Planning Council is, for federal purposes, the mental health planning body for the Bureaus of Mental Health and Children with Special Needs. Federal Law 99-660 mandates that each state have such a planning group including consumers of mental health services, family members, providers of mental health services and representatives of relevant State agencies.

The State Plan required by PL 99-660 records the current system of services, the needs documented through the community forums held annually, and the direction of the Department of Mental Health and Mental Retardation plans to take to meet those needs. It is typically formulated by the Planning Council which makes use of its specialized sub-committees to work on sections of the Plan.

The Department of Mental Health and Mental Retardation staff person designated as liaison to the Planning Council is Mike Fleming, 289-4286.

Maine Advisory Committee on Children with Special Needs

The Maine Advisory Committee on Children with Special Needs is composed of parents, private providers of services, and public agency representatives. The Committee advises the Director of the Bureau of Children with Special Needs.

The state statute which formed the Bureau directed that such an advisory group be formed. Although it has no legal mandate to plan or to direct the operations of the Bureau, the Advisory Committee participates in service planning and delivery by providing a forum in which individual members can offer their perspectives on the strengths and needs of the system of services.

The contact person for the Maine Advisory Committee on Children with Special Needs is Ed Hinckley, 289-4250.

Joint Advisory Committee on Mental Health Services to the Elderly

This is one of two committees which advise the Bureau of Mental Health on special populations. The committee is not legislatively mandated but was established as the result of the 1984 Elderly Mental Health Task Force Report which recommended that BMH and the Bureau of Elderly and Adult Services of the Department of Human Services have such an advisory group.

The fifteen to twenty members are service consumers, family members, public and private agency representatives, educators and physicians.

Joyce Harmon is committee staff from BMH, 289-4230; and John Baillargeon staffs the committee on behalf of the Bureau of Elderly and Adult Services, 289-2561.

The Advisory Committee on Mental Health Services to Deaf Persons

This Committee advises the Department on all developments in mental health services for persons who are deaf. It also plans and sponsors education and training activities statewide which provide interdisciplinary training for mental health clinicians and interpreters.

Composed of deaf persons, family members, public and private agency representatives and individual service providers, the Committee was formed in response to state law which mandated services to people who are deaf by the Department. That law called for the Bureau of Mental Health to consult with the individuals and organizations which are represented on the Committee.

The Department's Deaf Services Coordinator staffs the Advisory Committee: 289-4230 (voice), 289-2000 (TTY).

Systems Assessment Commission

The Systems Assessment Commission was formed by the 114th Maine Legislature to review costs of the Augusta and Bangor Mental Health Institutes and to evaluate and formulate specific proposals for alternative systems of care. The Commission is authorized to determine how best to use state money in providing the most appropriate treatment for persons with severe, long-term mental illness.

The Systems Assessment Commission is charged with developing a long-range plan for AMHI and BMHI, including the creation of a smaller acute care facility or facilities to take the place of current facilities.

The Commission is comprised of seven voting and five ex-officio members. It must submit a preliminary report to the legislature by January 15, 1990, and a final report by April first.

Commission Chair is Don Nicol, 772-1289.

Maine Committee on Mental Retardation

The Maine Committee advises the Director of the Bureau of Mental Retardation on issues that concern the children and adults the Bureau serves and their families. Committee members include family members, service providers and a state senator and representative.

The Committee is established in state statute and meets monthly. With the Bureau, the Committee produces a quarterly newsletter, "For Families and Friends," intended to bring families and friends of people with mental retardation closer together to discuss issues and share information and support.

The Bureau Director acts as staff to the Committee, 289-4242.

Consumer Advisory Board

The Consumer Advisory Board (CAB) was established by the Consent Decree which was signed to settle the class action suit brought against the Department of Mental Health and Corrections, as it was then known, by residents of Pineland Center. Now that the Department is no longer under the court-ordered scrutiny of a court master, the CAB monitors the Department's compliance with the mandates of the Decree in both Pineland Center and the community.

Consumer Advisory Board members are both parents and professionals who, in turn, represent and support correspondents all over Maine. Correspondents are volunteers who are friends and advocates for persons with mental retardation who have no family members to advocate for them.

The CAB is staffed by an Executive Secretary and can be contacted by calling the Bureau of Mental Retardation, 289-4242.

The Mental Health Rights Advisory Board

The Mental Health Rights Advisory Board is legislatively mandated to advise the commissioner of the Department of Mental Health and Mental Retardation on the rights and regulations concerning consumers of mental health services managed by the Department.

The Board is a watchdog in the area of non-enforcement of rights, advises on the expansion of those rights, and explains rights to consumers and the general public. The Board is not concerned with individual cases, as is the Office of Advocacy of the Department, but advises the commissioner's office from the point of view of the consumer.

Primary consumers, family members, providers and a representative of the Office of Advocacy sit on the Board. The Attorney General's Office is often asked to participate and the Department's Legal Coordinator is the staff person, Helen Montana-Marson, 289-4203.

Boards of Visitors

Boards of Visitors for each of the Department's institutions and residential facilities oversee their operations and the care of the clients who reside there. Boards of Visitors are composed of family members of people who reside at the facility and people with expertise appropriate to the treatment programs of the people whom each facility serves. The Boards of Visitors of Pineland, Aroostook Residential Center, Levinson Center, and the Bath Military Naval Children's Home can be contacted through their respective facilities.

Maine Commission on Mental Health

The Maine Commission on Mental Health was established by the 114th Legislature to oversee the operations of the Department of Mental Health and Mental Retardation as they concern persons with mental illness. The Commission is mandated to monitor services, both in the community and in the institutions which are under Department management.

The Commission advises and reports not only to the Department of Mental Health and Mental Retardation but also to the Governor and the State Legislature.

The Commission membership consists of family members of persons with mental illness, people who work in the public and private service delivery systems, state legislators and other concerned citizens.

The Commission, which meets monthly, is a body entirely separate from the Department and receives funding directly from the State Legislature. The Executive Director of the Commission is Reid Scher, 626-3018.

Planning and Advisory Council on Developmental Disabilities

The Developmental Disabilities Council is a federally mandated and funded, gubernatorially appointed body. Like the councils in other states, it is mandated to monitor the services provided to persons with developmental disabilities and to develop plans to foster the integration, productivity and independence of those persons.

The Department is the Administering Agency for the Maine Council and representatives from the Departments of Educational and Cultural Services and Human Services also serve on the Council. By federal law one half the Council membership is comprised of consumers of services, either people with disabilities themselves or their parents or guardians. Private service providers are also Council members.

The Executive Director of the Council, Peter Stowell, 289-4213, is primary staff.

Food For Thought

Throughout 1987 and 1988, the Food and Nutrition Services Division of the Department of Mental Health and Mental Retardation was busy preparing for two successful dietary surveys by the Joint Commission on the Accreditation of Health Care Organizations and routine inspections by the Department of Human Services.

All this while providing approximately 1,405,250 meals equivalent per year to approximately 1,000 residents within AMHI, PC, BMHI, ARC, Levinson Center and the Military and Naval Children's Home and while establishing nutritional standards of care.

The Division has supported training programs for all echelons of dietary staff, enhanced quality assurance within the Dietary Departments, worked to develop a comprehensive new coordinated menu, and striven toward more fluid operating dietary entities at each facility.

We are proud of our accomplishments and thank each individual staff member for their invaluable contributions to patient care on a daily basis.

While delineating and implementing nutritional standards of care, the dietitians discerned a significant area of need within our institutional settings. As state facilities, we are responsible for the proper nutritional care of our institutional residents; many are on modified diets and many more are on regular or consistency modified diets with dietary concerns.

Throughout the system, we estimate that nearly 50% of our residents have some sort of specialized dietary regime and, furthermore, tolerances (likes/dislikes) are reflected in nearly 90% of our residents.

No longer is it a case in which the majority of patients all receive the same food items; individualization has definitively taken precedence. Much time is spent by many staff members to integrate care plans for optimal services to be provided to the residents.

Dietary staff spends a tremendous amount of time preparing special food items and customizing nutritional care plans to meet resident needs. The discerned concern area surrounds the residents right to refuse a nutrition intervention as agreed upon by the interdisciplinary team.

Possible occasions which may foster non-compliance with the diet order include activities utilizing food, unit special occasions, cooking programs, picnics, edible reinforcement and behavior modification programs, vending, canteen/cafeteria, eating out in the

community, food gifts, food from home, and other available sources of food within the institutional unit, to name a few.

It is the position of the Food and Nutrition Services Division of the Department of Mental Health and Mental Retardation that we are responsible practitioners in a health care environment and that those entrusted to our care should at least be requested to comply with dietary prescriptions while being reinforced by unit, facility, and dietary staff so as to promote a healthy, nutritionally sound environment.

While it is not our intent to "police" our patients, we defeat our purpose if Dietary staff goes to great lengths in assuring the service of proper diets while the resident can elect to ignore that dimension of treatment. As a health care team, we are committed to finding a good "middle ground" whereby proper food choice and the cognizance of proper nutrition are foremost concerns in the minds of all.

The basic questions which present themselves are: "Is it the resident's rights to consume a variety of non-prescribed food items obtained from various sources beyond dietary?" OR "Is it our responsibility to try to maintain residents on their prescribed dietary regime?"

Through interdepartmental meetings at the three major institutions, we hope to define the policy which addresses the extent to which staff will intervene to assure compliance with therapeutic diets ordered by the physician. Resident desires and staff responsibilities will be topics of discussion. Training needs for staff and residents will be identified as well as concerns as basic as meal milieu and meal variances.

Needless to say, we do appreciate daily support of unit staff members in assisting in diet compliance. This proactive policy development is to assure nutrition into consideration.

Food is an important aspect of all of our lives and together we can assure strong commitment to food and nutrition support into the future.

If you are interested in being involved in this policy development, please feel free to call your facility dietitian. We welcome your input.

*by Daniel D. Spofford
Director
Food and Nutrition Services*

SO YOU'D KNOW:

Department Gains New Legal Services Consultant



Helen Montana-Marson

Photo by Jane Bubar

Helen Montana-Marson has joined the Central Office Staff of the Department of Mental Health and Mental Retardation as the Legal Services Consultant. Her job, she says, "is to help professionals and line staff in providing service delivery which is supportive of client rights." She consults with staff on legal issues and Department concerns surrounding both direct service provision and legislative or regulatory activity.

A graduate of Marquette University, Milwaukee, Wisconsin, with a B.A. in psychology, Montana-Marson obtained her law degree at Fordham University in New York City. Having practiced in New York since 1984, she moved to Maine in 1987. She worked in the law offices of Kenneth Cobb in Augusta before assuming her duties as the Department's legal consultant in April.

Montana-Marson was born in New York City and grew up on Long Island. A ballet and opera fan when she lived there, she has turned much of her attention to her family, home and community in Richmond.

Sharing the 100-year-old home are her husband Steven, their son Brian, age two, and her step-son, Anthony, age 4. The Marsons have already restored the

second floor of their home and created recreation spaces in an adjoining barn. They recently began restoration work on the first floor.

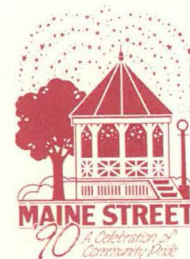
Montana-Marson lists horseback riding, cross stitch and stencilling among her hobbies along with her two springer spaniels, Jacob and Jasper. She is also a trustee of the Richmond Revolving Loan Fund.

As part of her support for direct service staff, Montana-Marson begins a regular column for the REPORT with this issue. "Briefly . . ." will tackle topics which are of importance in working with the people whom the Department serves. The first topic is confidentiality which the columnist feels is a problem for many staffers. "Our ability to network through databases has changed the reality of confidentiality," she asserts.

"Confidentiality is one of the fundamental rights of recipients of Department services. Our complex task (as Department staff) is to protect this right while balancing the legitimate needs of other individuals, mental health professionals, and governmental agencies who assert the need or right to our information."

MAINE STREET '90:

Involving All The Community



Governor John R. McKernan has asked all departments of State Government to assist communities in his Maine Street '90 initiative. Maine Street '90, developed to foster pride in the past and hope for the future of Maine communities, can be, I believe, a vehicle for community integration by people with disabilities. The Maine Street '90 video emphasizes the inclusion of all members of the community in these projects.

Maine Street '90 is funded by corporate sponsors, including Hannaford Brothers, and private donations. (Hannaford Brothers, you may recall, sponsored the "Be an Angel, Buy an Angel" project in which the RSVP group at Pineland participated.)

The office, located in Portland, links participating communities with state agencies which may be able to assist with Maine Street '90 projects. Towns planning to construct recreation facilities and parks have been linked to the Maine National Guard. Communities interested in planting and beautification projects are steered to the Department of Conservation. The Department of Economic and Community Development assists in revitalization projects and industrial expansion. We hope that Mental Health and Mental Retardation can assist communities to integrate people with disabilities into Maine Street '90 and other community activities.

Towns and cities across Maine have signed up to enhance their communities both with special one-time projects and by adding Maine Street '90 concepts to annual celebrations and events. Reviewing the Maine Street '90 list of projects and events, I noted that many communities are undertaking downtown revitalizations, building or improving playgrounds and parks, restoring historic buildings and cemeteries, and beautifying towns with clean-up campaigns and plantings.

Several communities have undertaken projects which might be of particular interest to people whom the Department of Mental Health and Mental Retardation serves and their families and friends. Below are some examples of these Maine Street '90 projects.

Presque Isle wants to participate more fully in arts activities, including bringing groups to the city for concerts. Artists with disabilities might want to become involved in bringing the arts to their local communities.

Van Buren is having a "most repulsive tie" contest and awarding the winner a hand-woven tie from Madawaska Weavers. Works by people with disabilities might be used as "awards" in other Maine Street '90 towns.

Brunswick is sponsoring a festival of community services, including cultural, social, educational and health. This would be an opportunity for private and public organizations which serve people with disabilities to promote themselves in the community.

Farmington is seeking assistance from the Maine Street '90 organization in recording oral history. People with disabilities, particularly those with experience in using tape recorders, might want to volunteer to help with such activities in Farmington and other communities.

Wilton is making improvements to its public library, including a handicapped access. It was the only community on the Maine Street '90 list which specifically mentioned such access. People with disabilities could promote accessibility in all the local restorations and new constructions. It could be particularly important to make parks, playgrounds and other recreational facilities accessible.

Augusta is planting tulips all over the city in a "Paint the Town Red" project due to bloom in the spring of 1990. A group of people with disabilities might want to sponsor such a movement, inviting all other members of the community to join in the planting.

Camden and Dover Foxcroft are exchanging fire departments, students and teachers in an effort to learn about the differences and similarities between coastal and inland communities. Perhaps such exchanges could include agencies which serve people with disabilities, adding even more breadth to the "differences and similarities game."

Newry and Peru are both interested in substance abuse prevention programs for Maine Street '90. Communities wanting to promote awareness would be great opportunities for fetal alcohol and drug effects education as well as public education about dual diagnoses of substance abuse and other disabilities. The Department Office of Substance Abuse Services (289-4203) has materials available for such education efforts.

Maine Street '90 county representatives have information on programs within their counties. The Maine Street '90 Office or the county representatives can supply you with the contact persons in your local community who are planning projects. If you are interested in finding out how you or your group might participate, call or write Maine Street '90, 80 Middle Street, Portland, Maine 04101-4250, 874-1990.

by Jane Bubar, Maine Street '90 Liaison

Parent Empowerment Conference Builds Confidence

Last year the Maine Parent Federation applied for and was awarded a grant from the Maine Developmental Disabilities Council to build confidence and competence in parents of children and adults with disabilities who serve, or may wish to serve, on boards and committees which effect services to their children.

The Federation surveyed parents who were currently members of or had served on boards and committees to determine what their needs were when they served. Most parents had both emotional and practical requirements. They needed information and skills to help them contribute to the group, but they also needed confidence and emotional support in order to acknowledge and express their unique perspectives as parents.

As a kick-off for what it hopes will be an on-going program, the Maine Parent Federation organized a conference for parents who serve or wish to serve on boards and committees concerned with their children's services. The Augusta Civic Center was the setting September 25 and 26 for two days of workshops and panel discussions about needed skills and appropriate support for parents.



Conference participants listen intently to Jan Waite-Austin, Maine Parent Federation President.

From "Jargon & Acronyms: Learning a New Language" to "Beyond Committees: Avenues for Action," the parents in attendance not only gathered information but shared experiences and ideas with one another.

Of particular interest was the notion that parents, even when they are new to the service system, have valuable knowledge to share with the professional service providers whom they encounter. The mere fact of living with a child with disabilities lends them a perspective that people who do not live with disabilities need to understand in order to plan and deliver services.

One answer suggested for the problems of parents who lack background information and confidence in assuming an active role on boards and committees was a parent mentor system. Such a mentor system has been successful in several states, and several Maine parents have been studying its possibilities. Although mentor models vary somewhat, most use the concept of a parent who expects to join a board or committee "shadowing" a parent who has been a member long enough to "know the ropes." Both practical information about the structure of the service system and expectations of committee members and emotional support is delivered through this mentor relationship.

Although funding for the Parent Empowerment Project has lapsed, the Maine Parent Federation hopes to continue to explore the mentor system and other ways of supporting parents on boards and committees. The Federation can be reached by calling 800-235-0220.



*Caroline Hyde presents on mentorship.
Photos by Jane Bubar*

From BMR Region V

The week of July 23, six people, served by Region 5, enjoyed an unusually normalized summer vacation.

The planning began approximately twelve months ago when Martha Tukey and Dean Bailey were discussing real vacation options for people with mental retardation.

The idea to pursue the rental of a lakeside cottage came about. In June Martha responded to an advertisement for a cottage rental at Brandy Pond in Naples at the mouth of the Songo River.

Six people thoroughly enjoyed the hottest week of the summer at the lake. Supervision was provided by Region 5 staff.

Martha brought her motor boat. Everyone enjoyed swimming, boating, cookouts, a ride on the Songo River Queen, meeting neighbors, and making new friends.

Most of all, everyone wanted to relax at the cottage and enjoy the lake. Comments on the vacations included, "It's the best vacation I've ever had. Can we do this again next year?"

Martha and Dean are available to speak with other people interested in offering a similar experience at very reasonable cost.

*By Susan McKowen
BMR — Region 5*

Volunteerism: One Person's Contribution

I first met Bill nine years ago when I introduced myself to him as his caseworker. We worked together for approximately four years.

Our paths crossed again in July when I met him at the Replica of the Viet Nam War Memorial Exhibition at the Portland Exposition Building where he was working as a volunteer.

Two weeks ago he came to the regional office showing us a recognition plaque for volunteer work he had done. Honored by the recognition, he said, "It takes a lot of hard work to be proud. I am proud."

Bill has been living in a Portland rooming house for a year and presently is looking for a job.

He learns of volunteer opportunities from television advertisements.

He recently was contacted by an agency for which he previously did volunteer work to fill an upcoming volunteer need.

His volunteer efforts this summer include The Names Project Quilt sponsored by the AIDS Project. He stuffed over 1,000 envelopes with brochures.

At the Replica of the Viet Nam War Memorial Exhibit he greeted people and handed out brochures over an 18 hour period.

At the Maine Festival and at the Deering Oaks Family Festival, held in Portland at Deering Oaks Park, Bill volunteered daily, bagging garbage and picking up trash.

About volunteering Bill said, "I thought it was something nice to do." He goes on to say he has met some really nice people and is glad to help out. He is looking forward to his next volunteer assignment.

So to Bill, thank you for your time and energy. Your efforts are greatly appreciated.

*by Susan McKowen
BMR — Region 5*



HONORS &

Three-Year Million Dollar Grant Helps Citizens with Mental Illness Gain Access to Community Services

For the average person to gain access to needed community resources is daunting enough given the complex nature of society today, but what happens when your condition is complicated by mental illness?

That very problem will be addressed over the next three years by the Department of Mental Health and Mental Retardation through over-a-million-dollar grant approved by the National Institute of Mental Health.

The funds, totalling over \$353-thousand dollars for the first year, will go to a research project which will detail how persons with mental illness fare in finding housing, appropriate job opportunities, social contacts, meeting health problems and how many persons are forced to return to institutional environments.

The project, under the directorship of Ruth Ralph, Ph.D., in the Office of Planning in the Department, will use already proven case management models, training materials, policies, procedures and recordkeeping which meets the varied needs of citizens with severe disabilities.

The field work will be based on two well-specified case management models for serving persons with long-term psychiatric disabilities. The models are called the Broker Model and the Rehabilitation Model. Boston University's Center for Psychiatric Rehabilitation will provide extensive training to two groups of five case managers each. One group will receive training in the Broker Model; the other in the Rehabilitation Model. A third group of five will continue to provide services in the current way.

The grant will provide for three additional case managers at Holy Innocents.

"The long-range implications of this special grant are extremely important in improving the likelihood that people with severe psychiatric problems can find the on-going linkage to community resources that can keep them out of hospitalization," said Susan B. Parker, Commissioner of the Department.

"It substitutes substance for theory, and will give our citizens with disabilities and their families, a viable way to meet their needs. The results are expected to set a standard in how services are delivered in states across the country."

Penobscot County CASSP Project Committee

Members and former board members of the Southern Penobscot County Child and Adolescent Service System Project were recently presented with certificates of appreciation from the Bureau of Children with Special Needs.

Receiving certificates from Geneva Bensman, representing the Bureau, were Jacqueline Allen, Phyllis Borns, Lillian Cameron, Katherine Carter, Josephine Chasse, William Donahue, Richard J. Eddy, Grant Golden, Raymond Hart, Charlene Milliken, Donna Murchison, Annette Nelligan, Patricia Phillips, Beverly Shumaker, Christine Spurr, Bartlett H. Stoodley, Jr., Holly Stover, Deborah Tuck, and Frederick N. Webber, J.D., M.D.

The certificates were presented "in appreciation of your time, energy, and dedication to the collaborative effort of the Child and Adolescent Service System Project in Southern Penobscot County." The committee dissolved as this CASSP Project and two in the southern part of the state were removed from federal funding. The work of the three sites will be carried on by Bureau of Children with Special Needs staff.



Holly Stover, left, of Project Atrium and Phyllis Borns, right, of Downeast Big Brothers/Big Sisters accept certificates from Geneva Bensman, Director of the Elizabeth Levinson Center.
Photo by Jackie Dodge

OPENINGS

Foster Grandparents Recognition



Pearl Snow and Lois Rousseau from the Foster Grandparent Advisory Council.

Governor John R. McKernan declared September 28th as Foster Grandparent Day. On that day, honor was given to the 80 plus volunteers who give their time and love to children with special and exceptional needs.

The Maine State Foster Grandparent Program has been around for 17 years, providing useful placements for low income senior citizens.

One of those special volunteers is Pearl Snow, who celebrates her eighth year with the Foster Grandparent Program. Pearl volunteers at Perry Hayden Hall at Pineland Center and has gained widespread respect from the staff and clients with whom she works.

Her quiet and caring manner have brought her other rewards along the way, including special recognition at the Department of Mental Health and Mental Retardation Volunteer Services Recognition ceremony at the State House in May 1987. She celebrated her G.E.D. diploma that same year.

*by Betty Wurtz, Director
Foster Grandparents Program*

Camp Tall Pines Beach Dedication and 20th Anniversary of Tall Pines Foundation

Camp Tall Pines celebrated its 20th Anniversary on Tuesday, August 22, with a tribute to the late Charles Connor, an Auburn businessman and Camp Tall Pines benefactor. Mrs. Clementine Connor was presented a plaque dedicating the Camp Tall Pines waterfront as "Connor Beach."

Twenty years ago Charles Connor and other volunteers organized a committee to raise money to buy six acres of land on Lower Range Pond in Poland to provide a summer camp facility for residents of Pineland Center. The Camp Tall Pines Foundation became the governing body of this facility.

To date 35,000 Pineland residents have enjoyed arts and crafts, adapted aquatics, pontoon boat rides, home cooked meals, overnight and extended stays, the cry of loons, and the camaraderie that a Camp Tall Pines experience annually offers.

Today Camp Tall Pines continues to provide unique vacation experiences for Pineland residents and other individuals with disabilities. Facilities such as AMHI, the Maine State Center for the Blind, Amity Center, Gorham Special Education, and other organizations and group homes have taken advantage of the Tall Pines experience.

Groups seeking information on the facility may contact Mark E. Capano, RT, Camp Director, at Pineland Center, Recreation Therapy Department, Box E, Pownal, Maine 04069, 688-4811, ext. 350.



Clementine Connor receives a plaque honoring her late husband Charles Connor. At left is Blanche Heldman, Camp Founder, at right, Camp Director Mark Capano.



REGIONAL REVIEW

Bureau of Children with Special Needs ***FOCUS ON: REGION II***

CHILD DEVELOPMENT SERVICES PENOBSCOT COUNTY

CDS/Penobscot has just completed its first phase of restructuring. All personnel have been hired and are well entrenched in their duties. They are as follows:

- Bobbie Flynn, Director
- Marie McLaughlin, Admin. Asst.
- Jan Hickman-Morna, Service Coordinator (for greater Bangor area)
- Gerri Stinson, Service Coordinator (for outside the greater Bangor area)
- Monique Dalka-Nol, Screening Coordinator
- Evelyn Niles, Screening Asst.
- Edith Strout, Data Management Specialist

Jan and Gerri work with families and providers to assure that services are provided in the most appropriate and expedient manner. They provide case management services when needed and help families find funding for services. They also work with special education directors to assist families with transition into public school.

Screening:

Monique and Evelyn conduct in-office screenings for ages birth to 5 as follows:

Bangor Office, In Town Plaza,
376 Harlow Street, Bangor, Maine,
the first and fourth Tuesday
of each month.

Lincoln Office, Court House
Building, 66 Main Street,
Lincoln, Maine, the third
Tuesday of each month.

Community screenings for 3 to 5 year olds are a cooperative effort between CDS and local school systems. They are held annually at most of the public school systems in our area.

Group screenings are also provided for nursery and day care programs.

The screenings are designed to check vision, hearing, speech and language, fine & gross motor skills, nutrition, and cognitive development.

Group or individual screenings may be scheduled by contacting Monique. There is no fee charged for screenings.

Data Management System:

We maintain files for all referred children and will eventually be able to compile statistics that will assist providers with needs assessment information.

We accept referrals from all sources.

New Initiatives:

A nurturing course is being developed for the Lincoln area. The program will focus on parent/child

interactions and areas of concern identified by the participants. The program is slated to begin in November. Specific information will be distributed to providers and parents on our mailing list.

Preschool provider support services will be available to all licensed providers interested in working with the special needs preschool population. Training, crisis intervention, case management and assistance with transition will be offered through this program which is expected to begin in late November.

The Planning Team, a sub committee of our Local Coordinating Committee, is working on setting short and long term goals for the agency and will be implementing a plan to insure community input.

We welcome the opportunity to meet with individuals or groups to explain our services in detail.

Our office hours in Bangor are Monday thru Friday 8:00 a.m. - 5:00 p.m. An 800 phone line is being installed to make our services more accessible to parents throughout Penobscot County.

by Bobbie Flynn
Director

SPECIAL NEEDS PRESCHOOLERS ENROLLED AT MONTESSORI SCHOOL

B.C.S.N. has taken an innovative step toward better meeting the needs of special needs preschoolers in the greater Bangor area.

In recognition of the benefits and appropriateness of integration of special needs students into existing community programs, September 1989, 7 preschoolers with special needs began attending the Small Steps Montessori School in Brewer, Maine.

B.C.S.N. has supported these placements by providing a teacher, Ed Kowalzyk who will be a consultant as well as provider of direct therapeutic intervention to the students.

Other supports will include consultation with a communication therapist, behavioral psychologist, occupational therapist, and physical therapist.

Brenda Hughes who directs the Small Steps program has been very involved in advocating for as well as providing integrated early intervention services in the Bangor area.

She has also worked with B.C.S.N. and Child Development Services to provide training for daycare providers who are interested in including young children with special needs in home- and center-based daycare settings.

The school formerly known as Jump Start Preschool had its beginnings at the Elizabeth Levinson Center in the mid 1970's.

This program evolved into the Jump Start Preschool which became a community-based self-contained classroom for severely handicapped students, located at the Mary Snow School in Bangor.

*by Ed Kowalzyk
Preschool Teacher
and Ron Bridges
Regional Supervisor*

NON-AVERSIVE BEHAVIOR MANAGEMENT OF CHALLENGING BEHAVIORS

The Bureau of Children with Special Needs now has a resource for non-aversive behavior management.

Deb Brown, Program Director at the Elizabeth Levinson Center, recently completed a two-week training course in Non-Aversive Behavior Management of Severe and Challenging Behaviors.

The course was taught by Tom Willis and Gary LaVigna of the Institute for Applied Behavior Analysis in Los Angeles, California, and was attended by over thirty participants around the world.

Typically, a problematic behavior arises. The behavior is evaluated and programmed for, often with some sort of punishment technique. At times, the person with the behavioral difficulty adapts to the punishment and the behavior continues.

The punishment is made a little more severe. The person adapts. The behavior continues, and a negative treatment pattern is established.

Non-aversive behavior management programming aims at empowering the person to control his or her own behavior and begins with

a total assessment of all aspects of the person including health, history, family involvement, involvement of others involved, daily routines, the environment, etc.

The behavior is analyzed and the function of the behavior for the individual is determined. Hypotheses may be formulated when the function of the behavior is not clearly evident.

The non-aversive program would include recommendations for ecological changes, positive programming strategies such as teaching an acceptable alternative behavior which would fulfill the function of the inappropriate behavior, direct treatment strategies which would make it more worthwhile for the person to exhibit an acceptable alternative behavior when it occurs, and recommendations on how other people can help to ensure the success of the person.

Deb will be sharing her expertise statewide, responding to regional staff and children's program referrals.

by Deb Brown, Program Director

SYSTEMWIDE

Very Special Arts Maine is collaborating with the Infant Development Center of the Bureau of Children with Special Needs to bring arts programming to young children and their families. Very Special Arts Maine, a private, non-profit corporation, affiliated with the Kennedy Center in Washington, D.C., has traditionally brought adapted programming in all the arts to school-age and older children and adults with disabilities. The program in South Portland will serve as a model for projects in other parts of the state.



Over 300 workers from across Maine convened at the University of Maine in Orono for the third annual Direct Service Staff conference in August.

Representing every aspect of public and private services for people with mental retardation, the conference participants attended seminars, received awards, and took advantage of the opportunity to share information and ideas with others.

Participants were welcomed by Kathryn Cook, Quality Assurance Manager for the Bureau of Mental Retardation, who expressed her appreciation for people working in direct service roles.

In the keynote address Leslie Walker-Hirsch of New York encouraged workers to promote opportunities for independence and informed choice, rather than dependence and limited choices. Walker quoted, "Give me a fish, I eat for a day. Teach me to fish, I eat for a life time." She gave several examples of ways in which persons can make their own choices for themselves.

This year's conference theme was "Empowerment: Together We Can" in recognition that it is people working with people who actually accomplish what policies, regulations, and funding try to promote.

In addition to numerous workshop sessions on ways to assist people with retardation, the conference included sessions for staff to develop their personal skills in staff rights, stress management, assertiveness, and career planning.

A highlight of the two-day event was the presentation of recognition awards at the social hour following the first day's activities.

Personal commendations were presented by Ron Welch, Associate Commissioner of Programs for the Department of Mental Health and Mental Retardation, to Amy O'Connell, Creative Work Systems, Saco; Tami Larke, Pottle Hill, Mechanic Falls; Deborah Carney, Penobscot Valley Industries, Bangor; Gail Welch, Penobscot Valley Industries, Bangor; Lois Langille, Danforth Habilitation Center, Danforth.

The conference planning committee was chaired by Kathryn Cook, Quality Assurance Manager for the Bureau of Mental Retardation, and included Cheryl Guimond, Powell Memorial Center; Terry Hutchinson, Park St. Group Home; Paul Tabor, Bureau of Mental Retardation in Bangor; and Amy O'Connell, Creative Work Systems, Saco.

Commissioner Susan B. Parker has appointed three new task forces to work on topics concerning the Bureau of Children with Special Needs. The Task Force on Early Intervention will examine services to children birth to five. The Children's Mental Health Task Force is charged with studying the needs of school-age children and adolescents with emotional disturbances. The Commissioner's Task Force on Family Support will deal with the concerns of families who care for their children with disabilities birth to twenty years of age.

Each of the groups will develop recommendations for innovative program development, particularly in the areas of case management, crisis services, long term care, payment for services, prevention and family supports. They are also charged with identifying strategies that are proven effective, recommending funding strategies, and developing increased public awareness of the issues confronting children with special needs and their families.



Moore receives a plaque from William Booth, Chair of the Pineland Board of Visitors.

Dr. Spencer A. Moore stepped down as Superintendent of Pineland Center in August.

Dr. Moore informed Commissioner Susan B. Parker that he wished to resume his private consultancy practice and that he desired to spend more time with his family in Massachusetts. Prior to coming to Maine, Dr. Moore was a private consultant and clinical director of the Perkins' School for the Blind in Watertown, Massachusetts.

A search process began immediately for a permanent Superintendent. In the interim, Jeff Lee, Dr. Moore's assistant, will serve as acting superintendent.



Mental Illness Awareness Week, October 2 through the 8, was proclaimed by Governor John R. McKernan. It was celebrated with day-long gatherings in Augusta and Portland on October 4 and 5, respectively. The Second Step Players, a group composed primarily of consumers of mental health services, entertained audiences in both locations with skits such as their satiric "Staff Person from Hell I & II." The two celebrations were sponsored by the Bureau of Mental Health in conjunction with local alliances for the mentally ill and provider agencies. The Portland "Resource Day" was supported in part by grants from Maine Medical Center's Department of Psychiatry and from Jackson Brook Institute.



The 4th Annual Child Sexual Abuse Treatment and Prevention Conference was held on September 21 and 22 at the Bethel Inn. The approximately 60 participants wrote specific work plans for the development of a treatment system for juvenile sex offenders. Participants were divided into four groups, each working on a segment of the plan: primary prevention, early identification, initial response, and the juvenile offender. Most of the groups agreed to meet over the next year to complete and implement the plan. Dr. Susan Right-hand, formerly of the State Forensic Services, was recognized with an award for her outstanding contribution to a statewide system of assessment of sex offenders.



Freeport Towne Square, a complex of two group homes and a workshop for developmentally disabled adults, celebrated its 10th anniversary with an open house, barbecue and entertainment on September 29 and 30.

The September 29 program was for friends and customers of the workshop. The September 30 festivities were directed toward friends and relatives of the 12 group home residents.

Operated by the Pineland Center, Freeport Towne Square is housed in the former Beals Furniture Co. on lower Main Street. Pineland, Maine's principal state-run facility for the care and training of people with mental retardation, established the Freeport complex as part of its program to provide persons with disabilities living situations that are as "normalized" as possible.

The workshop, whose beginnings at Pineland go back more than 20 years, provides vocational training and sheltered employment to about 80 workers who are handicapped. And the workshop serves as a base for community-based employment at local firms.



Central Office staff is being treated to a new bi-weekly "Bulletin Board" which carries announcements of up-coming conferences, meetings and events. Another facet of the "Bulletin Board" was developed at the summer retreat of Central Office support staff. These staff were concerned that new personnel and other changes in Central Office were not being announced and so this dimension was added to the "Board" which is distributed to every desk in the office during the first and third weeks of the month.



Three opportunities for learning more about the practice of infant mental health, and the emotional development of infants and young children, were available to clinicians as well as members of the general public in the Lewiston-Auburn area during September.

Nationally-known infant mental health specialist, Michael Trout, director of the Infant-Parent Institute of Champaign, Illinois, participated in three different activities during the three day period.

On September 26th, Mr. Trout offered a day-long clinical seminar to 36 pediatricians, psychologists, psychiatrists and other mental health and social welfare professionals whose clinical practice involves work with infants, young children and their families.

That evening, a panel and public forum featured local practitioners and Mr. Trout in a general discussion of "Infant Mental Health: Procedures and Practices."

Beginning at 7:00 p.m., the panel included Dr. John Hampshire (psychiatrist), Dr. Kathryn Moseley Grimes (pediatrician) and was led by Mr. Trout.

There was no cost or registration required for this activity and the general public was invited to participate in the discussion.

On Wednesday and Thursday, September 27th and 28th, a 10-hour workshop on "Separation and Loss" was offered to 36 enrollees.

Appropriate for anyone who provides services to infants or young children and their families (day care providers, preschool teachers, child protective and adoptive case workers, home health agency staff, and others), this activity began at 9:00 a.m. each day and ended at noon on Thursday.

Mr. Trout has been presenting infant mental health workshops in various parts of the state since 1982.

His most recent visit and activities were planned and sponsored jointly by the Maine Association for Infant Mental Health, Inc., the Lewiston-Auburn regional offices of the Department of Mental Health and Mental Retardation (Bureau of Children with Special Needs) and of Human Services, and by Tricounty Mental Health Services.



SYSTEMWIDE

Almost 450 Maine parents and families, who have to provide specialized around-the-clock care for children with developmental disabilities, now are finding welcome relief through the augmented Maine Respite Project.

Knowing that their children with special needs will be expertly cared for, 436 families, as of July 1st, are able to rejuvenate their energies through get-away weekends, having dinner out, taking trips, shopping and other pursuits through the program administered by the Bureau of Children with Special Needs in the Maine Department of Mental Health and Mental Retardation.

The 114th Maine Legislature has funded the program by \$900-thousand dollars to be used over the next two years to enable families with children from birth to twenty, whose needs require constant supervision, to enjoy a change of pace.

Especially trained respite care providers, who can come into the children's homes or some comparable certified setting, now number 224 statewide. Through contractual agreement, Pine Tree and Portland Area Chapters of the American Red Cross have conducted intensive training to assure that there would be certified care providers available in all 16 counties of Maine, with many individuals trained in the more rural sections.

Under the auspices of the Respitability program developed by United Cerebral Palsy Associations, hotels, motels and restaurants have joined the network offering accommodations and meals to families using respite services.

Recruitment of respite care providers also has been eased by a new liability insurance program, which protects against damages, losses to property and other mishaps caused by foster children and respite care clients.

"We conducted a survey jointly with the Maine Developmental Disabilities Council which showed that 54 percent of Maine families with children with special needs just weren't getting the respite care relief that would make such a difference in their lives," said Susan B. Parker, Commissioner of the Department. "These families dearly want quality respite care provided in their own homes in their own communities. With this intensified program, we are closing the gap daily between this legitimate need and our commitment to fulfill it."

Further information is available to the public through the toll-free number: 1-800-227-7706.

The State of Maine was able to recoup nearly six million dollars in underbilled hospital fees through the Department of Mental Health and Mental Retardation.

Additionally, through improved Medicaid reimbursement practices, the Department will be increasing revenue to Maine's general fund by some three million dollars each year for the foreseeable future.

The new initiative began shortly after Susan B. Parker took over the commissionership. Parker engaged Public Consulting Group, Inc. of Boston, to identify revenue opportunities and recommend recovery methods from third-party insurers and federal payment sources.

"I found, shortly after becoming commissioner, that Maine had not fully developed its capability to retrieve revenue legitimately owed it. That's true of many other states as well, given the complex and often changing regulatory rules and law changes. Once we finish fine-tuning our own computer-intensive billing and accounting operations, that deficiency will be a thing of the past," said Commissioner Parker.

The firm, which specializes in the financing of psychiatric and specialty hospitals and human service agencies, began in September of 1987 to study the Department's rates of payment over the past four years for ICFs, ICFs/MR and day treatment services.

Through cost accounting, cost reporting and rate setting which more accurately reflected actual patient costs, the firm was able to dramatically revise the rates upward and to verify that the State of Maine was owed back revenues.

For this highly specialized expertise, the Maine Department of Mental Health and Mental Retardation has paid a consultant's fee of \$138,000 dollars, which is 2 percent of the total funds recovered.

The Department has signed a new contract to continue its cost-redeeming initiative. Future efforts will involve a complete reorganization and streamlining of its reimbursement division.

Focus will be placed on better billing procedures for areas never billed before because the capability to do so was lacking.

Pineland Center will receive a state-of-the-art computerized billing system.

Medicaid payments for the outpatient unit at Bangor Mental Health Institute will be brought into line with actual costs.



Two public forums were scheduled by the Maine Department of Mental Health and Mental Retardation in early September to seek citizen comments regarding revisions to the state's Comprehensive Mental Health Plan.

Both sites were accessible for persons with handicaps. Sign language interpreters also were available for both forums.

Susan B. Parker, Commissioner of the Department, Robert E. Durgan, Director of the Bureau of Children with Special Needs, and Robert J. Harper, Director of the Bureau of Mental Health, led a contingent of Maine officials, instrumental in the planning process, in answering questions and discussing perspectives and concerns relating to mental health and special needs for children and adults.

"Public involvement has been crucial to making the plan an effective tool as we work toward improving services," said Commissioner Parker. "The Mental Health Services Plan is now being revised, as required by federal law. Although the changes do not represent significant policy revisions, we do need a free exchange of ideas about the future direction of those services."



Statewide public forums were scheduled to solicit recommendations to help the Bureau of Children with Special Needs plan essential services for the coming year.

All segments of the concerned public, parents, public officials and representatives of agencies which provide services to children with special needs, were given the opportunity to testify at the series of forums.

The Maine Department of Mental Health and Mental Retardation sponsored the public forums in conjunction with the Governor's Advisory Committee on Children with Special Needs, chaired by Jane Weil of Steuben. Commissioner Susan B. Parker and Associate Commissioner for Programs, Ronald S. Welch, were on hand to hear public comments, along with a representative from the Bureau of Children with Special Needs Advisory Committee.

Robert E. Durgan, Director of the Bureau of Children with Special Needs, who was present at all the forums, said information on existing services will be "most useful."

Durgan looked for statements expressing regional priorities concerning unmet needs. "These will be of particular value in assisting the Bureau in future planning and resource development activities," he said.



Hundreds and hundreds of Maine citizens with mental illness, who are being helped by community-based programs rather than hospitalization, are able to continue in home neighborhoods through new support resources.

The assistance is called Intensive Case Management. When it is fully operational statewide in October, up to 700 persons with the most severe mental illness and complex needs will receive special treatment at six agencies across the state.

The new programs are a follow-up to the crisis stabilization teams which have been able to find appropriate community placements for those persons who would have been admitted to Augusta Mental Health Institute and Bangor Mental Health Institute in the recent past.

Intensive Case Management provides "*special friends*" who can provide support, linkage and coordination with other agencies, check up on treatment effectiveness, who can work closely with families when appropriate, monitor medication usage and perform other functions which help persons with psychiatric difficulties to remain in their own communities.

The new Intensive Case Management system got off the ground in the 1988 September Special Session when the project received a legislative appropriation of some \$500-thousand dollars.

Holy Innocents of Cumberland County was the first agency to present the resource. Two other intensive case management programs came on-line in the spring of 1989 in Bangor and Waterville through the Community Health and Counseling Services and Kennebec Valley Regional Health Association respectively.

Recently York County Counseling Services of Saco/Biddeford began to see patients in July. Tri-County Mental Health Services of Lewiston/Auburn is preparing to join the system.

Another Bangor-based program is being developed at the Central Maine Indian Association. The program's initial efforts will be to gather facts on what needs exist among the Native American population concerning mental health institutes.

"As effective as I feel our crisis stabilization teams are, the crucial factor remains the follow-up," said Susan B. Parker, Commissioner of the Department. "Persons with mental illness must have a caring friend who, they feel, is interested in their well-being. Case managers become special friends, almost like family members, and that relationship can make the goal of quality living for persons with mental illness a reality."





BRIEFLY

One of the issues of serious concern to both clients and providers is the confidentiality of information pertaining to clients.

The law regarding confidentiality of information may be found at 34-B M.R.S.A. Sec. 1207. This statute protects the confidentiality of information about clients of the Department, with certain exceptions. These exceptions are limited to those provided for by the statute.

For instance, information could be shared if the client, or his guardian or parent, consents. Under certain circumstances, a court might order disclosure.

Information may be disclosed to the Department of Human Services, through inter-agency agreements for the purpose of assisting in child or adult protective services investigations.

Clients and providers who seek guidance in matters relating to confidentiality and access to records should consult the Department's regulations entitled the Rights of Recipients of Mental Health Services (effective June 17, 1989) and the Rights of Recipients Who

Are Children in Need of Treatment (effective July 1, 1989).

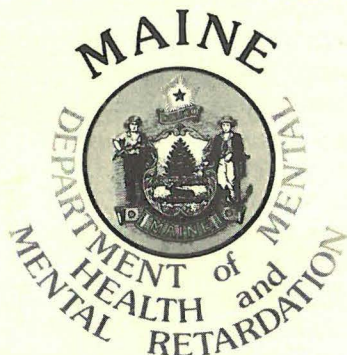
These regulations identify the rights to confidentiality and access to records and provide information, with particularity, about the rights and obligations of client and provider.

Any person may bring a grievance if they suspect or believe they have suffered some violation of this basic right.

Assistance in the protection of these rights, and any other rights provided by Departmental regulation and statute is available from the Office of Advocacy.

Copies of the statute and regulations are available from the Department of Mental Health and Mental Retardation, State House Station #40, State Office Building, Augusta, Maine 04333.

*by Helen Montana-Marson
Legal Services Consultant*



411 State Office Building
Station #40
Augusta, Maine 04333

JOAN SMYRSKI (RP)
OCSS/BUREAU OF MENTAL HEALTH
STATION #40
AUGUSTA, ME 04333

BLK RT.

