The Tennessee Department of Mental Health and Substance Abuse Services (TDMHSAS) and the Tennessee Department of Correction (TDOC) have officially opened the first statewide residential Recovery Court in the nation, effective August 1.

The court is located in the Morgan County city of Wartburg, which is about 45 miles west of Knoxville. A special ribbon-cutting ceremony was held on July 30, with Governor Bill Haslam, State Senator Ken Yager of Harriman, Criminal Court Judge Seth Norman, TDMHSAS Commissioner Doug Varney, TDOC Commissioner Derrick Schofield, Department of Safety & Homeland Security Commissioner Bill Gibbons, and many others in attendance.

The 100-bed program has been established to allow the state to divert people in need of substance abuse treatment or mental health services from hard prison beds to effective treatment programs that are evidence-based and proven to have a larger impact on reducing recidivism. It will also allow for prison beds to be reserved for those violent offenders who are in most need of them.

The Morgan County Recovery Court is different from the other Drug Courts and Recovery Courts currently in operation in that this one is more intensive than the current programs and offers services on a 24-hour-a-day, 7-day-a-week basis. It will be operated by the Davidson County Drug Court Support Foundation, a private foundation.

The Morgan County Recovery Court will cost much less per person than an

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More than 80 Department employees attended a recent “Brown Bag” Lunch and Learn presentation that focused on the East Tennessee Community Behavioral Health Transformation that has been in place since the closure of the Lakeshore Mental Health Institute (LMHI) more than one year ago.

Commissioner Doug Varney opened the event by talking about all of the planning, dedication, support, and hard work that went into the closing of a state-run mental health hospital that had been open for more than a century, and how none of this could have been done – or could continue to be done – without the amazing dedication of the Department employees, especially those who worked at LMHI.

“The hardest part was telling the state employees that they would no longer have a job,” he said. “But as I’ve said a number of times, I am so proud of all of the state employees who – to the last person, to the last day – stood their post and maintained the highest level of care for the patients.”

Deputy Commissioner Marie Williams highlighted all of the different divisions within the TDMHSAS that were integral in the process, emphasizing that none of this would have been possible if we didn’t utilize a whole-team approach made up of good leaders.

“We couldn’t have done any of this if we didn’t have a good plan, a good strategy, a strong goal, and an amazing team,” she said. “And that’s exactly what we have – an amazing team.”

The project was originally undertaken for a number of key reasons: to move people back into the communities, where they could get the behavioral health care that they needed; to keep people out of the state hospitals who didn’t need to be there; and to spend state dollars in a better way that would ensure people who needed it would get the best care possible.

One of the most important aspects of this move was the fact that most of the funds that had been devoted to LMHI would now be used in the community, something that had never happened before. As Assistant Commissioner Heather Gundersen showed, the amount of community mental health funding increased from $135.5 million in FY 2012 to $156.3 million in FY 2013, while the amount of RMHI funding dropped from $152 million to $127.1 million.

This funding was reinvested in the community for one main reason, as Assistant Commissioner Sejal West said: to provide people with a choice. Many people who had been at LMHI had lost their choices over the years, but the reinvestment of funds and focus on community support would bring this freedom of choice back to them, through a number of community programs that were set up, including:

• A 15-bed Crisis Stabilization Unit (CSU) was created in partnership with Cherokee Health in Morristown
• 28 Intensive Long-term Support Service Beds were created in partnership with Helen Ross McNabb Center and Frontier Health
• Funding to serve approximately 600 individuals annually was added to the Medically Monitored Crisis Detox (MMCD) program
• Funding was provided for an additional 16 Criminal Justice Case Manager positions, promoting collaboration and interaction between the criminal justice and mental health systems
• Funding was provided to allow up to an additional 3,800 individuals to be served by the Behavioral Health Safety Net of TN (BHSN of TN)
• Funding was provided to the Inpatient Targeted Transitional Supports (ITTS) program, which assists individuals awaiting discharge from state-contracted private psychiatric hospitals and RMHIs and returning to community living situation in East Tennessee
• Funding was provided to continue operation of 10 Peer Support Centers

Through these programs, approximately 17,000 more people were served. And in the upcoming year, a number of new programs are expected to help even more people, including supported employment initiatives, new peer wellness coaches, a peer-run call...
Department Highlights

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center, expansion of the school-based mental health liaison program, juvenile court screening, and substance abuse treatment for women who are at risk of having infants born with Neonatal Abstinence Syndrome (NAS).

“When I look back on my career at all the good things I’ve been able to do,” Commissioner Varney said, “I will think about this – taking all the money and reinvesting it in the community, where it will be better able to help thousands of people who desperately need that help.”

Most people who need this kind of care can be best served close to their family and friends, not in an institution. That said, there are still some people who need to be in an institutional setting for various reasons, and the work being done at all of our Regional Mental Health Institutes is absolutely essential to help care for some of our most vulnerable citizens.

Similarly, a number of partnerships were created with the private hospitals in East Tennessee – Woodridge in Johnson City, Peninsula in Knoxville, and Ridgeview in Oak Ridge – that have allowed people without insurance to continue to receive high-quality behavioral health treatment.

Also, an additional 25-bed unit was established at Moccasin Bend Mental Health Institute, which ensures that people from East Tennessee who needed to stay in a hospital setting could do just that. However, it should be noted that in the 12 months since the closing of LMHI, only 539 patients were admitted to MBMHI from the region of East Tennessee formerly covered by LMHI, compared to 2,182 admissions to LMHI in the previous year.

“That difference of 1,643 patient admissions represents the extent to which the community and private hospitals have successfully expanded services under this initiative,” said Assistant Commissioner John Arredondo. “We are not just transforming the mental health field – we have changed the entire landscape.”

Mental Health Facility on Lakeshore Campus is a New Model of Clinical Care

By Lorene Lambert

This spring, a new mental health facility called Willow Cottage opened on the former campus of the Lakeshore Mental Health Institute in Knoxville. The facility represents a new level of mental health care known as Intensive Long-Term Support (ILS) and is a voluntary adult residential program. Patients are expected to live independently while being given long-term 24/7 hour clinical care. The facility can accommodate 12 patients in a home-style setting that includes bedrooms decorated with colorful comforters, carpeting, and many other features that exude a home versus hospital atmosphere. It was leased from the state and is operated by the Helen Ross McNabb Center.

Those now living at Willow Cottage were once residents of the Chota Building at LMHI, which closed in June 2012. According to Leann Human-Hilliard, vice president of adult services for the McNabb Center, it is anticipated that Willow Cottage will become for patients a place “as homey and as comforting as anybody’s home would be.”

For more information about the Willow Cottage, contact the Helen Ross McNabb Center at www.mcnabbcenter.org.

First Recovery Court Opens

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average prison: While prison costs an average of $65 per prisoner per day, the Recovery Court will cost an average of $35 per person per day.

“While incarceration is expensive, this isn’t just about saving dollars,” said Commissioner Varney. “It is about doing what is best for public safety.”

Nationally, people who participate in evidence-based community programs that met their needs recidivate at about one-third the rate of people who don’t. Alternative sentencing should be reserved for those offenders that are most in need. Drug offenders have been proven to have success in drug court programs that effectively address their needs.

“This program should not be considered being soft on crime,” said Commissioner Schofield. “What it says is that we’re going to place people in the best option to ensure they don’t re-offend. But also, we’re going to make sure we have a prison bed available for people who commit violent offenses that harm our communities.”

TDMHSAS and TDOC are working on this project in partnership with the Tennessee Department of Safety and Homeland Security, the Tennessee Department of Health, and the Davidson County Drug Court.
Children’s Cabinet Unveils kidcentraltn.com Website

The Governor’s Children’s Cabinet has officially introduced kidcentraltn.com, Tennessee’s one-stop shop for families to raise healthy and happy kids.

Departments in state government offer a wealth of important information and resources for Tennessee families. The website kidcentraltn.com is a helpful, easy-to-use tool for families to connect with these resources. The site collects and organizes content from across multiple state departments—including TDMHSAS—and has a built-in, simplified search process that pulls related content, and even related services, so a family can find what they need with only a few clicks. In addition to topics relating to health, education, development, and support, kidcentraltn.com features a comprehensive directory of state-operated and state-funded services for children and families.

In the My Profile section, parents will have access to enhanced features of the website including the ability to tag articles that are important for their child and to explore unique developmental milestones based on their child’s age. Parents can also receive recommendations for articles and services that might be relevant for their family. In Tennessee, we know it’s important to keep up with technology. The My Profile feature provides an opportunity to engage families in an interactive way.

Also, through the kidcentral tn mobile app, families can search for services from their phones, review tagged articles, and keep helpful information at their fingertips.

Not only is kidcentraltn.com a great resource for families, but it is also a valuable tool that doctors, case managers, teachers, childcare providers, librarians, and other professionals can use to help educate, engage, and empower Tennessee families.

“I am grateful to the many parents, teachers, childcare providers, state employees, and other stakeholders that participated in these projects,” Governor Bill Haslam said. “Our goal is to make these resources and information more accessible and useful to Tennessee families.”

Along with TDMHSAS, the five other state departments that make up the Governor’s Children’s Cabinet are Children’s Services, Education, Health, Human Services, and Health Care Finance Administration (TennCare). The Cabinet is co-chaired by Gov. Haslam and First Lady Crissy Haslam, and is directed by Executive Director Jude White.

Visit kidcentraltn.com today to learn more.

Advocates Gather for First Statewide System of Care Conference

Symposium Focuses on Expanding Reach Around Tennessee to Improve Children’s Mental Health

More than 80 people gathered recently for the first Statewide System of Care Conference, hosted by the TDMHSAS Office of Statewide System of Care Initiatives. A highlight of the event was the national perspective on System of Care Expansion presented by Beth Stroul, M.Ed., president of Management & Training Innovations and pioneer of the System of Care approach. Her speech, titled “What if You Could Improve the Lives of Children and Families: Building Systems of Care,” presented some key statistics and facts and discussed the role that Systems of Care can play in helping communities to address the mental health needs of children to better prepare them for school and for life.

There also were a series of breakout sessions, focusing on topics including Wraparound 101, Cultural and Linguistic Competency, Successful Strategies for Engaging School Systems, the Tennessee Infant and Early Childhood Mental Health Initiative, Collaboration Lab, and Family-Driven/Youth Guided Care.

In the afternoon, Jude White, Executive Director of the Governor’s Children’s Cabinet, spoke about the new Tennessee School Readiness Model as well as kidcentral tn and its website, kidcentraltn.com, a new one-stop shop for families to raise healthy and happy kids. The site collects and organizes content from across multiple state departments and has a built-in, simplified search process that pulls related content, and even related services, so a family can find what they need with only a few clicks. Following the presentation, TDMHSAS Commissioner Douglas Varney presented Jude with a plaque to honor her leadership of the Early Childhood Advisory Council, her dedication to the Children’s Cabinet, and her commitment to improving the lives of children and families in Tennessee.

Also, Commissioner Varney presented Linda O’Neal, Executive Director of Tennessee Commission on Children and Youth (TCCY), with a plaque to honor her for her leadership of the Council on Children’s Mental Health and her commitment to improving the lives of children and families in Tennessee.

Commissioner Varney also honored the Project Directors of the three System of Care initiatives currently operating in Tennessee:
• Dr. Altha Stewart of the JustCare Family Network
• Belinda Jones of the K-Town Youth Empowerment Network

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SOC Conference  
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- Dr. Bill Weathers of the Early Connections Network

Plans are already in the works for next year’s Statewide System of Care Conference. If you would like to get on the mailing list, send an email to Andrea Reed, Project Director of System of Care Statewide Expansion, at Andrea.Reed@tn.gov.

Tennessee Programs Win Awards

K-Town Youth Empowerment Network (in partnership with Centerstone Research Institute) recently won two “Excellence in Community Communications and Outreach (ECCO)” national awards through the Substance Abuse and Mental Health Services Administration’s 2013 Recognition Program.

K-Town was recognized for its “Data Dinner Theatre,” a play that uses real outcomes from the organization to demonstrate the challenges and hope for youth with mental health diagnoses during their transition into adulthood.

For more information, call Mallory Tomlin at the K-Town Youth Empowerment Network in Knoxville, at (865) 523-0701, ext. 6680.

In addition, the JustCare Family Network won the Bronze for Media Outreach in SAMSHA’s ECCO awards. Their entry, “Help Is Here,” is a 30-second public service announcement (PSA) produced in 2012 by Optimum Studios to highlight the coordinated system of care that the network provides in Shelby County. The PSA aired as a local television commercial during May for Children’s Mental Health Awareness Month.

“This national recognition encourages us to continue working to ensure that all children, with a mental illness in Shelby County, will have access to the best health services, and that they are not stopped by the stigma and discrimination that surrounds these disorders,” said Dr. Altha Stewart, executive director of Just Care Family Network.

‘HEALTHY TENNESSEE’ INITIATIVE FOCUSES ON STATE EMPLOYEES THROUGH ‘WORKING FOR A HEALTHIER TENNESSEE’ PROGRAM

G overnor Bill Haslam recently announced the launch of “Healthier Tennessee,” an initiative to encourage Tennesseans to be more physically active, to eat nutritious foods in healthy portions, and not to use tobacco products.

To go along with that, a program focused on state employees has also been announced, called “Working for a Healthier Tennessee,” which will operate in collaboration with the ParTNers for Health Wellness Program.

The goal of Working for a Healthier Tennessee is “to encourage and enable state employees to lead healthier lives.” In all kinds of ways, Tennessee is one of the best places in the world to live. But when it comes to our health, we don’t always fare so well. In recent surveys of health and well-being, Tennessee ranked as low as 47th and no higher than the 39th healthiest state in the country. A growing number of Tennesseans are overweight, and about 30% are classified as obese. And about 23% of Tennesseans who are over 18 still regularly use tobacco products.

Working for a Healthier Tennessee will focus on three key areas: physical activity, healthy eating, and tobacco cessation. This isn’t a short-term effort; rather, it is an organized program that will give state employees the tools and support they need to lead healthier lives for years to come.

Each department in state government will be set up under a Site Champion program, which aims to create a healthy, positive workplace. This program will show how taking small steps can help achieve a larger goal.

Site Champions work to:

- Spread the word about Quarterly Wellness Challenges and other Wellness Program and Employee Assistance Program (EAP) activities through meetings, social media, posters and other marketing material.
- Organize at least two healthy events each year for your workplace.
- Use the online Site Champion Web Portal at www.tnsitechampions.com for information, tools and resources.
- Share experiences with the ParTNers

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National Recovery Month serves to educate Americans on the fact that addiction treatment and mental health services can enable those with a mental health issue and/or a substance use disorder to live a healthy and rewarding life.

The theme this year is “Prevention Works, Treatment is Effective, People Recover.”

The observance’s main focus is to laud the gains made by those in recovery from these conditions, just as we would those who are managing physical health conditions such as hypertension, diabetes, asthma, and heart disease. Recovery Month spreads the positive message that behavioral health is essential to overall health.

The celebration, now in its 24th year, highlights individuals who have reclaimed their lives and are living happy and healthy existences in long-term recovery. It also honors the prevention, treatment, and recovery service providers who make recovery possible.

Recovery Month promotes the message that recovery in all its forms is possible, and encourages people to take action to help expand and improve the availability of effective prevention, treatment, and recovery services for those in need.

For more information about Recovery Month, or to download additional resources that have been created by the Substance Abuse & Mental Health Services Administration (SAMHSA) to help local communities reach out and encourage individuals in need of services, go online to www.recoverymonth.gov.

Share Your Recovery Month Events!

Getting the word out is important, and we at TDMHSAS can assist you in letting others know about your event through our website. Visit our “Upcoming Events” page at http://www.state.tn.us/mental/up_events.html and see what information we need to promote your next meeting, event, awards dinner, or celebration. While online, please complete our new submission form and email it to us. Be sure to use the online form, and don’t forget to include any necessary attachments with your email, such as flyers or logo files. Please don’t forget to detail any website that will need to be included to link others to your event. If you have any questions, email Lorene Lambert at Lorene.Lambert@tn.gov or call (615) 253-4812. If you need to fax your submission form, please use (615) 253-1846.

Healthier Tennessee

for Health Program.
• Serve as screening site coordinator for the Partnership Promise.
• Encourage a culture of health with your leadership, positive attitude and teamwork.
• Serve as an advocate for the EAP.

The members of the TDMHSAS Wellness Team consist of employees from Central Office and each of the Regional Mental Health Institutes. They are:

• Sue Karber, Wellness Council Chair (Central Office)
• Alex King, Site Champion (Central Office)
• Karen Colyer (Central Office)
• Anthony Jackson (Central Office)
• Jerry LaCourse (MBMHI)
• Diane Lafferty (WMHI)
• Jamma Law (MTMHI)
• Liz Ledbetter (Central Office)
• Katie Lee (Central Office)
• Michael Rabkin (Central Office)
• Charles E. Taylor (MMHI)
• Vivian Verran (Central Office)

Each of the RMHIs has been tasked with creating their own Wellness Teams, too, so be on the lookout for emails and other announcements coming soon! And feel free to contact them if you have any questions.

We hope to have the Department’s kickoff events – both at Central Office and at each of the RMHIs – on Monday, September 16, as part of National Wellness Week.

You can also connect with “Working for a Healthier Tennessee” on Facebook and Twitter.
The Department has announced a plan to co-locate a number of behavioral health services that the state contracts with Southeast Mental Health Center (SEMHC) for residents of Memphis and Shelby County in a single location at Memphis Mental Health Institute (MMHI), effective July 1.

The affected services – all of which are voluntary services – are:

- **Walk-in Services**: Assessment, referral and follow-up for individuals in need of outpatient behavioral health services or immediate, limited, crisis intervention services.
- **Mobile Crisis Services**: Assessment, triage and referral of individuals experiencing a behavioral health crisis. The assessment can be within the facility or elsewhere in the community.
- **Crisis Stabilization Services**: An alternative to inpatient hospitalization providing up to 96 hours of assessment, care, and supervision, including group therapy and medication management.
- **Respite Services**: Short-term support in a setting with limited supervision allowing for individuals to de-escalate or resolve an environmental crisis.
- **Medically Monitored Crisis Detoxification (MMCD) Services**: Safe detoxification from chemical dependency for individuals in a behavioral health crisis may utilize this level of care for up to seven (7) days. Priority is given to pregnant women and intravenous (IV) drug users. Individuals are transitioned from MMCD Services to long-term substance abuse rehabilitation.

“Co-locating these services in one centrally located facility will provide the community with a ‘safety net hub’ where people who are in need can potentially access any level of care that might be appropriate,” says Commissioner Douglas Varney. “This will be a better use of resources and provides more opportunities for integrating services in one location. It will also help us improve patient care by integrating the acute-care services and crisis services in one location.”

Since February 2012, the average daily census of MMHI has not exceeded 55 patients, even though it has capacity for 75. This move will reduce the number of beds at MMHI by 20 but will not reduce the license capacity for the facility, which allows for improved efficiency, a better use of state resources, and the “right-sizing” of the hospital based on the census and the community’s needs.

“We believe the citizens of Shelby County would be served more efficiently and effectively through the co-location of contracted TDMHSAS crisis services within the Regional Mental Health Institute,” wrote Gene Lawrence, Executive Director of SEMHC, and Lisa A. Daniel, CEO of MMHI, in a letter to Commissioner Varney, requesting this change.

The Department anticipates that this move will save the state about $2.5 million; that projected savings will be used to help develop local community placements for people in West Tennessee – especially from Memphis and Shelby County – who have long-term care needs instead of having to keep them in other state-run hospitals. The TDMHSAS staff is in the process of working with community behavioral health partners to create up to 32 new or enhanced supportive housing options in Memphis and Shelby County, in addition to other community mental health and substance abuse services.

As part of their due diligence, TDMHSAS officials met with Memphis Mayor A.C. Wharton, Dottie Jones of Shelby County Mayor Mark Luttrell’s Office, and Dr. Reginald Coopwood of The Regional Medical Center at Memphis (The MED), who were all supportive of this idea and recognize how integral the crisis services system is.

“This co-location is critical for our law enforcement agencies, who encounter citizens with substance abuse and mental health disorders on a daily basis,” said Dottie Jones, Director of the Shelby County Division of Community Services. “It is often difficult to differentiate between substance abuse and mental illness, and this location allows law enforcement officers to bring people in need to one location for assessment and help.”

**SHARE YOUR EVENTS**

A new form online will allow mental health agencies and organizations to share upcoming events on our Website. Visit TDMHSAS’ Upcoming Events page at [http://www.state.tn.us/mental/up_events.html](http://www.state.tn.us/mental/up_events.html), complete the form, and email to Lorene.Lambert@tn.gov or fax to her attention at (615) 253-1846.
In a behavioral health culture driven by performance-based outcomes and evidence-based practices, the possession of data and the ability to appropriately apply it are of profound value. The TDMHSAS Office of Research offers data analysis and evaluation of policy and program issues to help Department staff make decisions on which programs to prioritize and identify potential needs for new programming.

The Office of Research has posted multiple data sources online through the TDMHSAS website at http://www.tn.gov/mental/policy/tdmhsas_data_rpt.shtml. There, you will find data books that feature behavioral health prevalence estimates based on the frequency of mental health and substance abuse disorders in Tennessee. Data is sorted by Planning and Policy Council region, and also provides state and national totals, which shows perspective on the most dominant issues and needs. Data is color-coded to easily interpret the comparative value of the estimates.

Because there are many sparsely populated counties within Tennessee, the research team is diligent to ensure that potentially identifying information is not discernible when displaying county-level data. The information is easily accessible to stakeholders, researchers, and the general public. It may be used to support grant applications, as well as to substantiate the need for a particular program or service.

Additional information can be found online, along with links pertaining to prescription drug abuse in Tennessee. The Department’s annual needs assessment process is also chronicled online, with all relevant documents available. The needs assessment process is administered to ensure priorities are aligned with those issues identified as most pervasive in Tennessee.

The Office of Research is led by Karen Edwards, Ph.D., and is housed in the Division of Planning, Research and Forensics under the leadership of Assistant Commissioner Marthagem Whitlock.

For questions about the data displayed online, send an e-mail to Karen Edwards at Karen.Edwards@tn.gov.

A new documentary tells the inspiring stories of nine children and young adults who are fighting to overcome their mental health issues.

“Hear Our Voices: Transforming the Children’s Mental Health System,” a film by award-winning filmmakers David & Patricia Earnhardt, in association with Tennessee Voices for Children (TVC), makes the case that when children with mental health challenges are treated in their own homes and communities, they develop skills that better prepare them for the future. The stories in this film are framed by some of the nation’s top mental health experts, who contend that children’s mental health issues are real, they are treatable, and they occur with much greater frequency than most people imagine.

Charlotte Bryson, executive producer of “Hear Our Voices” and TVC executive director, began this documentary project with the vision for it to promote awareness of children’s mental health issues and to help end stigma surrounding mental health.

“It is our goal that this film will be used to educate and spread awareness about the important topic of children’s mental health,” she said. “It is crucial that each of us help to spread the message that mental health problems in children are real and treatable, and I hope that this film will be a helpful tool in doing so.”

The official world premiere of “Hear Our Voices: Transforming the Children’s Mental Health System” was August 29, at the Belcourt Theatre in Nashville. DVD copies of the film are available online at www.HearOurVoicesFilm.com.

For more information about Tennessee Voices for Children, go online to www.tnvoices.org, send an email to tvc@tnvoices.org, or call (615) 269-7751.
Mothers and Infants Sober Together (M.I.S.T.) Services Expand in East Tennessee

The number of newborns being exposed to drugs, even prescribed medicines with unintended consequences, is rising at an alarming rate across the state. A new group called Mothers and Infants Sober Together (M.I.S.T.) works with pregnant women in East Tennessee who are addicted to drugs before and after delivery, and with their babies who are born with neonatal abstinence syndrome (NAS).

M.I.S.T. began in 2009 when Ridgeview Behavioral Health Services was awarded a grant to support and serve drug-exposed infants and their families in Roane and Anderson counties. Now, a new M.I.S.T. program has been created in Campbell County that utilizes an approach to integrate health and behavioral health care.

In Campbell County, M.I.S.T. services are being made available to mothers-to-be through a two-year, $290,000 grant from the BlueCross BlueShield of Tennessee Health Foundation. Ridgeview is partnering with Dayspring Family Health Center, Jellico Community Hospital, and BlueCare Tennessee to work with mothers who demonstrate a desire and commitment to staying drug free and providing a safe and stable home for their babies.

The M.I.S.T. team helps create a stable, drug-free environment for the infant and family by teaching positive parenting skills and providing treatment which is based on proven evidence based practices. The Ridgeview team works with the parents and their child intensively for approximately six months. Staff also works closely with hospitals, primary care physicians, pediatricians, foster parents, the Tennessee Department of Children’s Services (DCS), juvenile court judges, and family members through a six-month intervention period, which culminates with weekly support groups and b-weekly therapy sessions. Emphasis is placed on transitioning to appropriate outpatient services to help the mother and infant maintain the progress they achieved while in the program.

For information about M.I.S.T. or other Ridgeview programs, call (865) 482-1076 or (865) 882-8650, or go online to www.ridgevw.com.

Frontier Health Wins Silver, Merit Healthcare Advertising Awards

Frontier Health received Silver and Merit 30th Annual Healthcare Advertising awards sponsored by Healthcare Marketing Report. The agency’s 2012 annual report, “Recovery, Success & Independence” netted one of only 241 silver awards granted among more than 4,000 entries. The Healthcare Advertising Awards is the largest healthcare advertising awards competition and one of the 10 largest of all advertising awards.

Frontier Health’s newly redesigned external website, www.frontierhealth.org, received a merit award based on creativity, quality, message effectiveness, consumer appeal, graphic design and overall impact. Also, the company’s external newsletter, Impressions in Behavioral Health Care, received a merit award based on the same criteria. The newsletter reaches nearly 2,400 area businesses, industries, regional and state leaders.

Overall, only nine silver awards were presented for annual reports. Within the specialty category, there were only three merit awards presented for publications and only three merit awards presented for websites.

Frontier Health is the region’s leading provider of behavioral health, mental health, substance abuse, co-occurring, intellectual and developmental disabilities, recovery and vocational rehabilitation services, and has been providing services since 1957. For more information, contact Anne Newton at anewton@frontierhealth.org.

NAMI Tennessee Names New Executive Director

K. Jeff Fladen, MSW, was named Executive Director of NAMI Tennessee on June 1.

Most recently, Fladen was executive director of the Jewish Federation of New Hampshire and executive director of Jewish Family Service in Nashville, where he expanded the client base and profile of the agency. He has more than 25 years of experience in social services, including the mental health field, where he has been an Employee Assistance Program (EAP) Coordinator, a Managed Care Coordinator, a counselor and a manager of a hospital-based outpatient clinic providing mental health and chemical dependency programs for adults and adolescents. He holds a master’s degree in Social Work and a B.A. in Psychology from The Ohio State University.

NAMI Tennessee is a grassroots, nonprofit, self-help organization made up of people with mental illness, their families and community members and is dedicated to improving quality of life for people with mental illness and their families through support, education and advocacy. The National Alliance on Mental Illness and NAMI Tennessee are separate and distinct legal entities bonded by common transparency, accountability and responsibility to our members and the public. NAMI Tennessee is funded in part by an agreement with the state of Tennessee. For more information, send an email to bstaceyscott@namitn.org.
Hundreds Gather for Suicide Prevention Symposium

More than 270 people attended the Tennessee Suicide Prevention Network (TSPN) Suicide Prevention Symposium at the Trevecca Community Church of the Nazarene in July, including representatives from numerous nonprofit groups, state agencies, and companies across the state.

Representatives from five state departments participated in a panel discussion on suicide prevention initiatives within their departments: TDMHSAS Commissioner Doug Varney, Department of Health Commissioner John Dreyzehner, Department of Education Commissioner Kevin Huffman, Department of Human Services Commissioner Raquel Hatter, and Department of Veterans Affairs Deputy Commissioner Wendell Cheek.

New Law Provides Protection for Licensed Health Care Providers

A bill criminalizing the assault of health care providers has been signed into law by Governor Bill Haslam. The new law expands the punishment for assault and aggravated assault that currently applies to Tennessee law enforcement officers to also apply to health care providers acting in the discharge of their duties.

Starting on July 1, a person who commits assault against a health care provider will be subject to a maximum $5,000 fine and a person who commits aggravated assault will be subject to a maximum fine of $15,000.

The bill, (Public Chapter 325, HB 0306/SB0412), states that “for purposes of this section and § 39-13-102, ‘health care provider’ means any person or entity performing services regulated pursuant to title 63 or title 68, chapter 11.” Title 63 governs the professions of the healing arts. Title 68, chapter 11, governs health facilities and resources. Mental health nurses and providers who have been licensed by the Tennessee Department of Health are also covered by the new law.

All health care providers deserve to work in a safe environment. Criminalization of this type of violence is a key step toward ensuring the safety of health care providers and their patients. With this law, Tennessee joins 18 other states that have passed laws increasing penalties for workplace violence that affects nurses.

Department Provides Peer Recovery Specialist Training

The Office of Consumer Affairs and Peer Support Services is providing training across Tennessee through a SAMHSA grant to certify peers in recovery who have lived the experience of mental illnesses, substance abuse, and co-occurring disorders and wish to lend support to others at certified peer centers.

In addition to learning how to help others, the program ensures that services provided by Certified Peer Recovery Specialists (CPRS) and identified as medically necessary can be reimbursable by TennCare, Tennessee’s Medicaid agency.

Training was held in Memphis in August; additional training will be held in Chattanooga on September 9-13 and in Johnson City on October 21-25. There is no registration fee for participants. Training applications and additional details can be found at: http://www.tn.gov/mental/recovery/oca3.shtml.
COMMISSIONER’S CORNER

TDMHSAS Director of Pharmacy Named Pharmacist of the Year

Congratulations to Dr. Jason Carter, TDMHSAS Chief of Pharmacy, who received the Tom C. Sharp 2012 Pharmacist of the Year Award in a ceremony at the 126th Annual Convention and Trade Show for the Tennessee Pharmacists Association (TPA) in Chattanooga in mid-July.

Dr. Carter also serves as the State Opioid Treatment Authority for Tennessee and is actively involved in developing guidelines and training programs to be used nationally. He has collaborated with the Tennessee Pharmacists Association and served on multiple TPA committees, and as the Secretary/Treasurer for the Tennessee Society of Pharmacists.

The award was originally named for Tom C. Sharp Sr., who served as the TPA’s chief executive for 30 years. In 2001, the award was re-named to also honor the service of his son, Tom C. Sharp Jr., who also served as chief executive for 30 years.

The Tennessee Pharmacists Association, a professional organization of more than 2,700 pharmacists and student pharmacists in all practice areas across the state, promotes the delivery of quality pharmaceutical care and works to enhance the knowledge, ethics, and skills of pharmacists, as well as to protect and improve public health.

Licensure Office Adds and Loses Staff Members

The Middle Tennessee Office of Licensure has added Bob Payne, Beth Pinkerton and Suzanne Kay as new staff members. Pinkerton and Kay have prior investigative experience with other state agencies, while Payne previously worked at the Vanderbilt Psychiatric Hospital in Nashville. According to Cindy Tyler, TDMHSAS Director of Licensure, all three have “hit the ground running” to check on licensed facilities and assist people with compliance. They can be reached at (615) 532-6589.

The Office of Licensure also bid farewell via retirement on July 1 to two long-time employees, James Jones and Phil Brown. Brown, a coordinator, served in the West Tennessee office with 40 years, and Jones, a surveyor, served in the Middle Tennessee office with 35 years. Ashley Fuqua, assistant director for the Office of Licensure remarked that, “Both men contributed greatly to the work of their regional offices to ensure compliance with the rules and regulations that govern facilities and housing in Tennessee for people most in need in our society.”

Staff Added to Office of Crisis Services and Suicide Prevention

The TDMHSAS team welcomed Neru Gobin and Brandi Hamilton to the Office of Crisis Services and Suicide Prevention in July.

Neru will be serving as Assistant Director and comes to us with a wealth of experience and knowledge related to the crisis...
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Service delivery system. For more than 10 years, Neru served as a crisis responder at the Mental Health Cooperative. His extensive knowledge of the barriers and difficulties encountered by the crisis delivery system will further aid the team’s ability to identify and resolve the barriers encountered by front line responders. Neru has a bachelor’s degree in psychology. You can reach Neru at (615) 741-3528 or at Neru.Gobin@tn.gov.

Brandi will be serving as Crisis Services Specialist and also comes with more than 10 years of experience as a crisis responder. Coming from Volunteer Behavioral Healthcare Systems, Brandi has a master’s degree in Clinical Psychology and is a designated Mandatory Pre-screening Agent. Brandi’s data management skills and experience with children and youth will benefit the team in their ability to provide technical support to providers and help drive service delivery improvements. Contact Brandi at (615) 741-9259 or at Brandi.Hamilton@tn.gov.

SHARE YOUR NEWS AND AWARDS

Have something interesting that you want to include in an upcoming issue of this newsletter? Send your information and/or photos (in jpeg format) to Lorene Lambert at Lorene.Lambert@tn.gov, and call (615) 253-4812 if you have questions.

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