

# Change Agent News

*"You Must Be the Change You Wish to See in the World" ~ Mahatma Gandhi*

Winter 2011

## Change Agent UnConvention

The UnConvention is a bi-annual event sponsored by Zia Partners (Ken Minkoff and Chris Cline). This year it was held on October 24 & 25 at Asilomar, a beautiful retreat center on the Monterey coast. There were over 250 Change Agents present from around the US and even some from other countries. It was inspiring to see so many people committed to positive change and eager to learn more and share information about their experiences. Below are comments from some of our Alameda County Change Agents who went to the UnConvention.

The UnConvention was most useful to me in that I learned about new resources around peer-operated services, and trauma informed care. I was reminded that there is so much work going on all over the world that is always changing and improving our field and most of it is easily accessible on-line. By utilizing these model resources and trial tested experiences, we can save ourselves the hassle of reinventing the wheel in our community based agencies and programs.

**Stephanie Downs, MFT , STARS, Telecare**

I felt that the "Give and Take" format in the break-out sessions this time was much more conducive to productive and engaged discussion. I was fortunate to have participated in a very lively session on harm reduction in which providers from many different settings honestly and directly shared their challenges in working with co-occurring clients from a harm reduction approach. I learned that this issue has many sides and that people are passionate about their beliefs and practices. I also learned that even when we differ we can usually join together around wanting to provide better services for our clients.

**Carla C. Danby, LCSW,  
Eden Community Support Center**

*continued on page 2*



## BHCS Welcoming Toolkit

The Welcoming Toolkit offers providers practical, no-cost, and low-cost ways to integrate key elements of three BHCS Initiatives into daily operations. These Initiatives are Co-Occurring Conditions, Cultural Responsiveness, and Wellness, Recovery and Resiliency. The Toolkit is designed as a menu of practices that can be used by programs serving all ages. Providers are invited to choose welcoming practices from three categories: physical environment, staff roles, and paperwork & procedures.

The Welcoming Toolkit builds upon the work of the Co-Occurring Conditions Steering Committee to develop a Welcoming Policy for BHCS. This resource was created collaboratively by BHCS Quality Improvement Team members, utilizing their extensive experience with Co-Occurring Conditions, Cultural Responsiveness, and Wellness, Recovery and Resiliency. Extensive provider input from all four Systems of Care and Substance Use Disorders (SUD) was collected, analyzed, and applied to help shape the checklist of practices offered.

*continued on page 3*

## Inside This Issue

- 2 Vicki's Story**
- 3 Spotlight on St. Mary's Center**
- 3 Change Agent Planning Group**
- 4 BHCS Psychiatrists Trained**
- 4 Welcoming Words**

*continued from page 1*

The Trauma Informed Care workshop with Paula Panzer and Laurie Markoff was especially meaningful for me. They were from an agency in New York that is doing some transformative work for the staff around diversity and multiculturalism. It is important to experience the willingness of agencies, systems and governments to grow and evolve. I also really enjoyed learning about the mental health, co-occurring issues and services in Canada, Singapore and Australia. It was important to note the strengths and challenges of different countries in their attempt to provide effective services for people living with co-occurring diagnoses.

**Barbara Staten, Bonita House**

What I found useful and meaningful was the sharing of ideas that were so freely given with an ease of conversations that had no leaders per say just kind of topic directors. That gave each group a certain freedom to talk about and ask questions without the barriers of an “expert”.

**Wendy Fox Rankin**

I found the information around Integration of BH and Primary Health meaningful and very important especially since we are trying to treat the whole person. Hearing everyone's idea, thoughts and strategies around this was invaluable.

I was inspired by the TAY group that attended and how thankful they were for the work we do. I think its very important for anyone to know what they do is important and appreciated. It helps to recharge you to keep doing what you are doing and want to do it better and for more people. So, if nothing else, I have learned that it all matters.

**Tanikka Williams, Pathways to Wellness**

This was a very positive experience for me. I made some strong connections with other Change Agents, both from here in Alameda County as well as from other parts of the country.

I felt that compared to the last UnConvention in San Diego this event felt more comfortable on many levels. I felt as though the Special Guests were more approachable and open to discussion on various issues – even their issues of expertise.

I am not sure if it's because this was a better event or because I felt more confident and comfortable in my role as a Change Agent. I am looking forward to applying some of the new information that I have learned on topics like “Harm Reduction” both at work and at the larger Change Agent meetings.

**Jimmy Isch, Second Chance**

I was really impressed by the number of individuals from agencies across the country who are consciously participating as Change Agents. Each one brought a noteworthy perspective, passion and excitement on what they are doing which was insightful. In some cases there appeared to be lone rangers within organizations who are aware that it takes one (few) to start a movement of many. I was reminded that each one of us makes a difference which dissipates any value placed on what one may be doing.

**Sandi Smith, Alameda Community Support Center**

---

## Vicki's Story

Vicki started using methamphetamines in her 20s to lose weight. She got busted and stopped. But it wasn't long before she starting using again intermittently. Three years later she started smoking crack to numb the pain of cancer of the uterus.

Although she had some difficulties and felt “different” all her life, she didn't know she had a mental illness. She had bouts of uncontrollable anger, couldn't calm down, couldn't sleep, but didn't seek help for her symptoms until she was 37 when she had an altercation with her mother and her brother told her she should try getting some medication to help her. She went to Kaiser off and on for five years, but didn't really get a diagnosis until she went to Eden Community Support Center. Doctor Rojas diagnosed her with Bi-Polar II and she finally got on some medication that worked for her.

Vicki never thought of herself as a drug addict until she was arrested for possession of crack cocaine and spent 7 days in jail 3½ years ago. When she got out she had nothing. She was broke, had no one to turn to and felt utterly hopeless. The police had “lost” her purse so she had to break into her own house when she was released. On top of everything, her dear cat was in very bad shape having survived on it's own for a week. She resolved to stop using. She enlisted the help of her psychiatrist and case manager. And she asked to be drug tested every time she came in as a way to hold herself accountable.

It's clear her psychiatrist and her case manager have had a very positive affect on her life. What has made a difference to her is that they listen; they believe in her; they ask her what she wants; and, she say's “they're willing to work with me”.

*continued on page 4*



## Spotlight on St. Mary's Center

Interview with  
Carol Johnson, Executive Director, and  
Gretchen Blais, Clinical Coordinator

St. Mary's Center has a wide range of programs serving low-income seniors and preschoolers in Downtown and West Oakland. About 70% of their homeless clients have struggled with mental illness, substance abuse or both. St. Mary's Center is one of the few programs BHCS contracts with that get both alcohol and drug funds as well as mental health funds.

### Why is St. Mary's Center involved in the Co-Occurring Conditions Initiative?

Because we want to be responsive to the seniors who come to the Center. Those that have substance use issues often also have mental health issues. Even before the COC Initiative, we realized we needed more clinical mental health capacity. We got a grant and hired some clinical staff. Our involvement in the Change Agent trainings has further enhanced our understanding of people with COC and our effectiveness in working with this population.

### Who are the St. Mary's Change Agents?

We really consider our whole case management team Change Agents: Mary Nolan, Shirley Cheney, Reese Craighead, Jeannie Kim, Gretchen Blais, and Andria Levine. They've all been involved in the Change Agent meetings at some point and participated in many trainings, but Gretchen is our designated Change Agent at St. Mary's.

### What has changed about your program since joining this Initiative?

We had already developed some expertise about Co-Occurring Disorders before the Initiative, but through the Change Agent meetings/trainings we've become more

*continued on page 4*

## Change Agent Planning Group



*Jimmy Isch, Eva McRae, Carla Danby, Maxine Heiliger*

These enthusiastic people are the Change Agent Planning Group (formerly the Transitional Leadership Group). Eva McRae (Mental Health Association), Adrienne de Santos (BHCS Consumer Relations), Jimmy Isch (Second Chance), and Carla Danby (Eden Community Support Center), all volunteered to help Jen Mullane guide the Change Agent process when the consulting contract with Chris Cline and Ken Minkoff ended in May this year. Since then Maxine has replaced Jen and Adrienne recently moved on. This group meets shortly after each Quarterly Change Agent meeting to debrief the meeting and plan the agenda for the next one. If you have ideas for the Change Agent meetings and/or would like to participate in the Planning Group, please contact Maxine at [mheiliger@acbhcs.org](mailto:mheiliger@acbhcs.org).

*continued from page 1*

The practices included in this Toolkit are offered as guidelines. BHCS anticipates that providers will focus on practices that best match their program's operational culture and service population, as not all practices will apply to their specific program or the community they serve.

A group of Quality Improvement Team members, BHCS staff, and volunteer Change Agents have teamed up to rollout the Welcoming Toolkit and provide technical assistance regarding the checklist content and/or implementation of practices. Providers may access the Welcoming Toolkit under the *What's New* section of the BHCS Provider website at:

<http://www.acbhcs.org/providers/Main/Index.htm>

For more information, contact Sean Jara, Quality Improvement Coordinator, at 510-383-1776 or [SJara@acbhcs.org](mailto:SJara@acbhcs.org).

## Upcoming Change Agent Meeting

February 1, 2012

1:00 pm to 4:30 pm

2000 Embarcadero Cove  
Alameda Room, Oakland



continued from page 3

mindful of how we talk about clients; how we see our clients. This shift in attitude among staff has helped us become more welcoming and more respectful. We now focus more on strengths and we use the word “challenges”. The service plans have changed in a number of ways. One is that we now ask clients, “What it would take for you to have a satisfying life?”

### **How have these changes been helpful to the people you serve?**

Being more open and welcoming and respectful has made St. Mary’s Center an even better place to be. Offering a calm, orderly, pleasant environment helps people feel comfortable and safe. The service plan that is developed with each client is more focused on strengths which makes them feel more positive and hopeful.

### **What would you recommend to other program that are trying to become more co-occurring capable?**

It takes time, training and a concerted effort. Check out your own attitudes. Are you inclusive? Is there something in the way you act that separates you from other staff and/or clients? Put yourself in the client’s place. Watch how you talk about them. It helps if you convey “we’re all in this together” and we’re all struggling to be the best people we can be. Respect the whole person and their life experience. Be flexible. Realize that there’s a good chance they won’t follow through, but hold out hope to them that they will. Use peer staff.

## **BHCS Psychiatrists Trained on Co-Occurring Conditions**

On Wednesday, November 30, Dr. Judith Martin, Medical Director of the BAART Turk Street Clinic in San Francisco, provided a training for BHCS psychiatric staff entitled “**Medication Assisted Treatment of Patients with Co-occurring Opioid Addiction and Psychiatric Problems.**” This training provided psychiatrists with a description of opioid agonist treatments and gave examples of patient care coordination and management in co-occurring opioid dependence and psychiatric disorders. A similar training that will be open to all is under consideration. Maxine will send out any training announcements to all Change Agents.



continued from page 2

Vicki has recently been accepted to the CHOICES program and is enjoying all the classes she’s taking and the supportive environment there. She’s eager to work again and that’s her first goal. Her advice is: “give up old (drug using) friends, find new places to hang out, volunteer, be patient with yourself, forgive yourself and others”.

## **Welcoming Words**

Second Chance has developed the following welcoming statement.

It is printed on the back of the Support Group List which is given to all new participants.

*It takes a lot of courage to walk in the door of a substance abuse treatment facility and we are glad you have taken this important first step.*

*Most of the counselors at Second Chance are recovering addicts or alcoholics, so we have had to take that step ourselves. Some of use came here through the criminal justice system, some through our homeless shelter, others because our jobs or our families or our lives were falling apart.*

*While everyone’s story is unique, we understand that insecurity or anger or fear or regret you are feeling. We want to help you the way we were helped. You are not alone! There is hope here and there are answers here.*

*We welcome you to a special place where the miracle of recovery happens every day. If you are willing to work hard you will find a Second Chance at putting together a first class life.*