



The Iris

Support, Education, Advocacy

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NAMI NC Helpline

1-800-451-9682; M-F 8:30am-5pm

The famous artist, VanGogh, understood his illness as "an illness like any other." He painted, *Iris*, while institutionalized. It has become a symbol of hope and courage for people with mental illnesses.

From the President's Desk

-- Gerry Akland, President

May was another eventful month. The Achieving Wellness and Recovery luncheon on the 23rd will be one of the highlights for the year. Over 100 people attended and heard Dr. Michael Fuller of UT Galveston explain how recovery is possible for those stricken by mental illness. He shared his experiences with mental illness and provided proven ways to help make recovery possible through symptom management, developing a treatment/recovery oriented plan, setting realistic goals, and communicating with others about feelings and needs. The program was made possible through Janssen Pharmaceuticals.

Many of those who were able to attend were members of local psychosocial programs, including Club Horizon (Knightdale), Fellowship (Raleigh and Cary) and the Drop In Center (Raleigh). The following comes from Dan McLaughlin of the Drop In Center:

"Just a quick note to thank you and NAMI for putting together, from what I've heard, a spectacular event yesterday. My schedule was such that I was unable to attend but a group from the Drop In Center did go and they loved it. Yesterday afternoon a number of them lined up at my office door to tell me how good the program was and they could tell me specifics about what in Dr. Fuller's presentation that impressed them. I don't recall many other events where I've had clients so excited to share. I just wanted to let you know that the presentation made an impression on the folks from here that attended and hope that in the future other presentations like this be considered."

Quite a different activity involving our Board of Directors was to develop a position statement regarding the offer by WakeMed to purchase Rex Hospital. This became a matter of concern when the CEO announced that if the General Assembly allowed this purchase, he would spend **up to** (emphasis added) \$50 million on an inpatient psychiatric unit (location unspecified). NAMI Wake has been encouraging him (Dr. Bill Atkinson) and his Board to add an inpatient psychiatric unit for over 5 years, all without success. The answer was always the same, WakeMed could not break even on psychiatric patients. So what is different today? Might Dr. Atkinson be using people suffering from mental illness as a bargaining chip to remove competition. The position of NAMI Wake's Board of Directors is "Any action that jeopardizes the financial stability of UNC Healthcare is a disservice to all citizens of Wake County and NC including people with psychiatric illness."

NAMI WAKE OPPOSES SALE OF REX HEALTHCARE TO WAKEMED

The NAMI Wake County Board of Directors is against the forced sale of Rex Healthcare to WakeMed as well as any reduction in state funding to UNC Healthcare or changes in Medicaid rates charged by UNC Healthcare practitioners.

NAMI Wake County would welcome UNC Healthcare establishing a regional psychiatric hospital in or near Raleigh to care for patients with “high acuity” needs in the central region of the state.

NAMI Wake is dedicated to improving access to quality psychiatric care for citizens of Wake County. Beginning in 2003, this Board has been trying to persuade officials of both UNC Health Care and WakeMed to establish a psychiatric hospital in Wake County. Neither hospital has been willing to forego more profitable lines of business to care for the thousands of people who need inpatient care. In spite of special incentives offered by Wake County including funding for the construction, neither was willing to enter into an agreement with the County—either singly or in partnership.

Instead they put their support behind an agreement with Holly Hill Hospital. While this arrangement has been beneficial in reducing the number of people who need admission to psychiatric hospitals outside Wake County and has reduced the number of admissions to state psychiatric hospitals, it has left a gap in care for many patients including those who need medical care. HHH is not a medical facility. Patients needing even low-level medical treatment cannot be admitted. Even more patients, those insured by Medicaid, are routinely sent outside Wake County for care because federal law does not allow private, stand-alone psychiatric hospital to bill Medicaid for most adults.

Wake County Government has made mental health a high priority during the past decade, including investing millions in beds for indigent patients at HHH and building a new state of the art crisis facility and substance abuse treatment facility. There is no doubt that the Triangle area, including Wake County, needs additional capacity to serve psychiatric patients, especially those who considered “high acuity” and those with co-

occurring medical needs, and most adults insured by Medicaid.

Both WakeMed and the UNC Health Care system care for many psychiatric patients in their emergency departments including assigning specially trained staff and creating special beds within the ED. As large regional hospitals, both admit large numbers of psychiatric patients into their EDs. In addition, UNC Healthcare has a world renowned psychiatric department, a Center of Excellence in Community Mental Health and several inpatient psychiatric units for children and adults. These units provide care for both crisis admissions and psychotic disorders.

A NAMI Wake analysis of data collected by the NC DHHS for the period Jan-August 2010, revealed that UNC had 86 people who were forced to wait 2 days or more to be admitted (or considered for admission) to a state psychiatric bed. Of those, 36 waited 5 days or more in the ED. Many of the psychiatric patients cared for at UNC Healthcare in Chapel Hill are from Wake County. WakeMed, on the other hand, has not invested in inpatient psychiatric units. During the same period, the WakeMed main campus had 149 people who waited for 2 days or more, with 56 who waited 5 days or longer. And these numbers do not even include the patients who are waiting for a bed at a regular psychiatric unit as opposed to a state psychiatric hospital.

UNC Healthcare has a history of providing quality care for all people who need services, including patients with psychiatric illness. They are a state-owned hospital entitled to bill higher rates for Medicaid. This puts them in a much better position to save the state funds while caring for people who need complex medical care, including help for perplexing psychiatric illnesses. This improves the availability of Medicaid providers for the elderly and people with disabilities. NAMI Wake is opposed to reducing Medicaid rates for the UNC Healthcare system as proposed by WakeMed. There are too few providers who will care for Medicaid patients because of the low reimbursement rates. Having UNC Healthcare doctors who will accept more Medicaid insured patients is good for the patients, good for Wake County and good for North Carolina. Any action that jeopardizes the financial stability of

Where would Wake County be without Holly Hill Hospital?

By Ann Akland

Do you ever think about what would happen if Holly Hill Hospital closed? Our three general community hospitals--WakeMed, Rex Healthcare, and Duke Raleigh--have made it clear on more than one occasion that they are not interested in providing psychiatric treatment, i.e. establishing an inpatient unit. Even with enticing incentives offered by Wake County government back in 2005 including a brand new building none of these hospitals was interested in serving the thousands of people in Wake County needing inpatient care.

In fact, WakeMed ran a 28-bed psychiatric unit called Ashby Hall in the 1970s. Raleigh Community Hospital -- now Duke Health Raleigh -- closed its 19-bed unit in 2003 to concentrate on more profitable care in surgery, cancer and heart disease. And Rex Hospital has never operated a psychiatric unit. In 2005, Wake County Government issued a Request for Proposal (RFP) for community hospital partners to develop psychiatric beds. In spite of extensive efforts to convince the three acute care medical hospitals to work with the County by politicians, advocates, and County Officials, only one psychiatric hospital, Holly Hill, responded and signed an agreement with the County to operate 44 beds for poor and uninsured patients.

Those 44 beds go a long way to filling a gap in care for people who are uninsured, and we have both HHH and the Wake County Commissioners to thank. In fact, Wake County admissions to expensive state psychiatric hospitals has declined by 40% concurrent with opening those beds at HHH.

Even with the 44 bed addition, Wake County continues to have significant gaps in care for people who are aggressive/violent, i.e. "high acuity" patients

as well as those with co-occurring medical conditions that require concurrent treatment. In addition, HHH cannot bill Medicaid for most adult patients because of a provision in federal law targeted to hospitals that predominantly treat mental diseases. The result is that most adult Medicaid patients are transported outside Wake County for psychiatric care.

NAMI Wake continues to advocate to the county, state, and health care providers to find and implement solutions to fill these gaps including reopening beds at Dorothea Dix Hospital.

Granted, our system of mental health care in Wake County is filled with pot holes. Without HHH, I'm afraid we would be staring at sink holes. With such a competitive health care environment among the general hospitals and the closure of state hospital beds, it is advantageous to have HHH, a hospital dedicated to behavioral health, demonstrating enhanced capacity to serve more people with serious psychiatric illness. We hope HHH will be in a position to expand to close even more service gaps.

For family members and mental health providers, having a psychiatric hospital conveniently located is so important. NAMI Wake looks forward to advocating with HHH as they expand and interface with more and more people with mental illness, family members, and community service providers.

WakeMED & Rex Healthcare (continued from page 2)

UNC Healthcare is a disservice to all citizens of Wake County and NC including people with psychiatric illness.

NAMI Wake County would welcome UNC Healthcare opening a regional psychiatric hospital in or near Raleigh. Such a hospital could be operated in partnership with the NC DHHS on the Dix campus (or elsewhere) and fill all the gaps for inpatient care in the existing psychiatric healthcare system for the entire central region of the state and solve the problem of people waiting for weeks in hospital EDs and local crisis facilities. The higher state

Medicaid rates available to UNC could reduce the state cost of these beds and result in state of the art diagnosis and treatment for people who are falling through the cracks of a broken healthcare system.

Inpatient psychiatric beds at WakeMed could also fill a critical gap for those insured by Medicaid and those with co-occurring medical and psychiatric illness. NAMI Wake appreciates that WakeMed recognizes the importance of filling this need but is skeptical about WakeMed following through on such a proposal.

Obsessive-Compulsive Disorder

www.nami.org

This month, NAMI Wake's monthly education meeting will feature Obsessive-Compulsive Disorder. We have included this information from the NAMI website to set the stage for that meeting.

A woman visits her dermatologist, complaining of extremely dry skin and seldom feeling clean. She showers for two hours every day.

A lawyer insists on making coffee several times each day. His colleagues do not realize that he lives in fear that the coffee will be poisoned, and he feels compelled to pour most of it down the drain. The lawyer is so obsessed with these thoughts that he spends 12 hours a day at work -- four of them worrying about contaminated coffee.

A man cannot bear to throw anything away. Junk mail, old newspapers, empty milk cartons all "could contain something valuable that might be useful someday." If he throws things away, "something terrible will happen." He hoards so much clutter that he can no longer walk through his house. Insisting that nothing be thrown away, he moves to another house where he continues to hoard.

A 10 year old girl keeps apologizing for "disturbing" her class. She feels that she is too restless and is clearing her throat too loudly. Her teachers are puzzled and over time become annoyed at her repeated apologies since they did not notice any sounds or movements. She is also preoccupied with "being good all the time".

These people suffer obsessive-compulsive disorder (OCD). The National Institute of Mental Health estimates that more than 2 percent of the U.S. population, or nearly one out of every 40 people, will suffer from OCD at some point in their lives. The disorder is two to three times more common than schizophrenia and bipolar disorder.

What is Obsessive-compulsive disorder?

Obsessions are intrusive, irrational thoughts -- unwanted ideas or impulses that repeatedly well up in a person's mind. Again and again, the person experiences disturbing thoughts, such as "My hands

must be contaminated; I must wash them"; "I may have left the gas stove on"; "I am going to injure my child." On one level, the sufferer knows these obsessive thoughts are irrational. But on another level, he or she fears these thoughts might be true. Trying to avoid such thoughts creates great anxiety.

Compulsions are repetitive rituals such as handwashing, counting, checking, hoarding, or arranging. An individual repeats these actions, perhaps feeling momentary relief, but without feeling satisfaction or a sense of completion. People with OCD feel they must perform these compulsive rituals or something bad will happen.

Most people at one time or another experience obsessive thoughts or compulsive behaviors. Obsessive-compulsive disorder occurs when an individual experiences obsessions and compulsions for more than an hour each day, in a way that interferes with his or her life.

OCD is often described as "a disease of doubt." Sufferers experience "pathological doubt" because they are unable to distinguish between what is possible, what is probable, and what is unlikely to happen.

Who gets OCD?

People from all walks of life can get OCD. It strikes people of all social and ethnic groups and both males and females. Symptoms typically begin during childhood, the teenage years or young adulthood.

What causes OCD?

A large body of scientific evidence suggests that OCD results from a chemical imbalance in the brain. For years, mental health professionals incorrectly assumed OCD resulted from bad parenting or personality defects. This theory has been disproven over the last 20 years. OCD symptoms are not relieved by psychoanalysis or other forms of "talk therapy," but there is evidence that behavior therapy can be effective, alone or in combination with medication. People with OCD can often say "why" they have obsessive thoughts or why they behave compulsively.

Volunteers Needed

Would you like to help NAMI make a difference in our community?

Here is a way you can help.

Newsletter Crew – Ongoing Each Month

Do you have a few hours to spare to help get the Iris ready to mail out? It's an easy job but vital to our organization. We have a lot of fun – come join us!! We get together at Highland United Methodist Church to attach mailing stickers and organize the letters in the mailing boxes. The date for the mailing crew is usually the first Friday of each month.

If you are interested in helping, let me know.

Bazzel Creek Missionary Baptist Church Annual Health/Vocational Fair

The Annual Health/Vocational Fair will be held at the Bazzel Creek Missionary Baptist Church in Fuquay Varina on Saturday, June 18, 2011. The time for the set-up will be 9:00 AM and will begin at 10:00 AM. If you are interested, please contact me to let me know.

Facilitators Needed

Depression Support Group Volunteer Facilitators. Training will be provided. Contact Gerry Akland at gakland@nc.rr.com or 919 266 0766.

Other Volunteer Opportunities

If you would like to become involved as a volunteer with NAMI-Wake and are not sure about how to get started, please give me a call or send me an e-mail. I am sure that we can find a good fit for your talent.

Rita H. Tolley
 NAMI-Wake Volunteer Coordinator
Ritatolley123@nc.rr.com
 919/215-0401 (Cell)
 919/420-0329 (Home)

Patient Wait Times for a Bed at Central Regional Hospital October 2010 - March 2011

	Average No. Of Days
October	3.88
November	4.11
December	2.38
January	3.27
February	3.56
March	3.08 (note 28 people on hold at end of month)

Average Number of people waiting to be admitted to CRH per month was 261

Monthly Education Meeting, June 27, 7-8:30 pm

Obsessive Compulsive Disorder

Speaker, To be Announced

Conference Room, 2nd Floor by Church Office, Highland United Methodist Church, 1901 Ridge Rd, Raleigh, NC

NAMI Wake Groups Meeting at

Highland United Methodist Church

1901 Ridge Rd., Raleigh, NC

FAMILY SUPPORT GROUPS

(Family & friends of people with mental illnesses)

Rooms 202 & 204

NAMI Connections Group

(People with mental illnesses)

Room 206

Both Support groups meet from 7-8:30 p.m. on the first three Mondays of each month.

For more information about support groups, contact:

- Gordon Gogola (gogolags@hotmail.com), phone 601-3996
- Jeanne Harris, phone 850-0406

**NAMI Wake Groups Meeting at
Garner United Methodist Church
Senior Center**

201 Methodist Drive, Garner, NC.

**NAMI Connections Group
(People with mental illnesses)**

**6:30 - 7:30 pm on the 2nd, 3rd, and 4th
Thursdays of each month.**

Call Marc Jacques for information

919-803-5813

Peer to Peer Classes Starting

Call Marc Jacques for information

919-803-5813

Support for Families of Children & Adolescents

Are you a family member or caregiver for a child under the age of 18? If so, NAMI Wake will be starting a new class soon which may interest you. In addition, there are monthly support group meetings. Contacts: Heidi Cranford heidi3623@nc.rr.com Chary Sundstrom chary@nc.rr.com

Les Girls Social

June 25, 12:00 noon

Golden Corral, 6129 Glenwood Ave.

This is a social opportunity for consumers and family members. Everyone is invited. Lunch is Dutch-treat.

While NAMI Wake accepts and publishes advertisements and articles from vendors regarding their products and services, NAMI Wake does not endorse those products and services.

Wellness Supports

*Maximizing Strengths...
Enhancing Lives*

A Premiere Counseling Practice

with locations in North Raleigh and Fuquay-Varina

Founded in 2005, we have a team of over 30 licensed therapists, psychiatrists, and psychiatric nurse-practitioners providing individual, couples, families and group services to children and adults

Some of our specialties are:

- *DBT(Dialectical Behavioral Therapy) individual and group*
- *Depression/Bipolar*
- *Anger Management/Impulse Control Problems*
- *DWI Services / Substance Abuse*
- *Post-Traumatic Stress Disorder (PTSD)*
- *Anxiety Disorders*

Contact our Intake Coordinator at (919)782-8730

Thanks to
Wendy Wenzel
& Wellness Supports for
placing the
first paid advertisement
in the Iris!!

Advertise your Mental Health Services

NAMI Wake County wants to help you advertise your company or organization's mental health services. This newsletter is distributed monthly to over 2,000 individuals, families, organizations, and businesses. Most of our subscribers are either people with a mental illness diagnosis, family members of people with a mental illness or mental health providers.

Each month, we will publish up to 2 pages of advertisements. All content must be related to mental health. Advertisements will be included on a first come, first serve basis. The following costs apply:

- ¼ page, 1 time, \$100 each (\$50 NAMI-Wake member)
- ½ page, 1 time, \$200 each (\$100 NAMI-Wake member)

Website:

- Display Advertisement (3.75 " x 4") and link on website:
1 month, \$100 each (\$25 member)

This statement will be prominently placed in the newsletter and on the webpage:

While NAMI Wake accepts and publishes advertisements and articles from vendors regarding their products and services, NAMI Wake does not endorse those products and services.

The above statement will also be placed on NAMI Wake's home page.
For additional information, contact Ann Akland, aakland@nami-wake.org.

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P.O. Box 12562
Raleigh, NC 27605-2562

Nonprofit Organization
U.S. Postage
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June 2011

THANKS TO YOU

**NAMI Wake has exceeded
our 2011 membership Goal!!**

WE HAVE **355** MEMBERS!