

In This Issue



Outpatient case managers make positive impact
Page 3



Baldwin County staffers comment on merger
Page 5-9



BayView serves community in time of grief
Page 10



At the Pointe
Scale Back Alabama 2015
Join in the fun!
Weigh-In Week:
Jan. 19-25
Weigh-Out Week:
April 6-12
Learn more at 665-2532.

AltaPointe's Annual Meeting & Star of the Year Awards Lunch
Wednesday, Mar. 11, 2015

Former BCMHC operated independently for 40 years before merger Honoring the past, building for the future

It was a goal, a promise, a wish and a requirement during the merger process: To honor the history and culture of each organization, while emerging with the best of both. Six months after the merger, AltaPointe celebrates Baldwin County Mental Health Center's past as we chart a course for the future.

In August of 1974, the BCMHC was established to provide community-based services to residents and quickly became integral to their health and well-being. **Craig Cruikshank**, Environment of Care Compliance Specialist, saw the impact on residents in his 25 years with BCMH.

"Prior to 1974, most Baldwin County residents requiring mental health services had three options: deal with the situation as best you can, pay dearly for private treatment or drive to a neighboring county with resources and lie about your residency," Cruikshank said. "When BCMH opened its doors, access to needed care was available on a sliding fee scale."

One of the first employees, **Roberta Speh**, offered the following harrowing account of the early years: "We had some setbacks. We nearly had to close our doors in '76 and '77 due to insufficient funding. Employees were getting reduced paychecks, and we weren't certain the

doors would be open when we got to work. That's when State Senator Albert Lipscomb pushed through the cigarette tax providing a stable funding source."

Bay Minette Mayor Bob Wills was a longtime member of the BCMH Board of Directors and now serves on the AltaPointe Board. "BCMHC always had great support from our county commission and an excellent board of directors that provided great oversight and direction," Wills said. "I think the merger will be a very good marriage that benefits everyone. It will certainly enable Baldwin County to expand its services to match our population growth."

According to former BCMH Executive Director **Robin Riggins**, who is now AltaPointe's executive director of community behavioral health services, BCMH had a significant presence and great success in the community thanks to its caring and dedicated staff.

"Now, we are a more robust organization prepared to successfully meet the new demands of Medicaid Managed Care and the new Regional Care Organization," Riggins said.

See Baldwin County staff members perspective on the merger pg. 5-9



Corporate offices' expansion in Mobile make room for growing organization

Construction is coming along at AltaPointe's corporate offices. The project will increase office space, enlarge the Admin A Board Room, photo at left, and provide better parking. Completion is expected Spring 2015.



At right, Kevin Markham, AltaPointe Chief Financial Officer, and Robert Carlock, AltaPointe Environment of Care Director, survey the progress made at the Admin-B Building shortly before Thanksgiving.

We must pull together to adapt to change, fulfill our mission



Tuerk Schlesinger,
CEO

The behavioral healthcare environment is undergoing the most radical changes in the history of healthcare. Many of these changes are not easily understood, and the degree to which we will be affected is somewhat uncertain. However, we do know this: all of AltaPointe's staff members must pull together to make us as strong as possible so we can adapt to changes and continue to fulfill our mission.

For many businesses, a mission may be little more than ink on paper. For AltaPointe, our mission is much more. It is a call-to-action anchored by core values. Our mission is to identify the mental health and substance abuse service needs in the communities we serve and to make sure those needs are met. It guides our every direction and decision.

Even as we focus on that mission, we must be able to adapt to this dynamic environment. Changes created by new healthcare laws and mandates will affect how we deliver care and how we are reimbursed for services. AltaPointe is not alone in this; every mental health center and behavioral healthcare organization in the country is affected.

In addition to these changes, state legislatures and departments of mental health are not increasing funding; nor are they keeping current funding levels consistent. Actually, funds are decreasing for mental health services that once were completely dependent on public money. The funding situation causes a dilemma for us.

So, we have had to answer a couple of questions: "How do we best operate this organization in the midst of massive changes and continue to sustain our mission?" And, "If we wait for public funding allocations that we know are no longer adequate to sustain service demands, how can we meet the growing needs?"

Both questions yielded the same answer: We use a business approach rather than depending solely on unsustainable public funds to meet our responsibilities.

In Alabama and across the rest of the country, public mental health centers that are choosing to rely on public funding allocations as their only method of bringing in revenue are more than likely underperforming. They are not continuing to meet community demands.

AltaPointe has the responsibility to meet these demands and to do this in the wisest way. In fact, we believe the public should demand we take a business approach rather than risk being an underperformer.

Taking a business approach means that we must use economies of scale, which means that we maximize revenue and reduce costs by increasing the size of the organization and expanding the number of services we provide. In addition, a business approach

uses advanced technology to monitor and reduce costs and achieve maximum revenue. It also will help our staff members to reasonably achieve the highest possible productivity levels.

How we are achieving economies of scale can be illustrated best by our merger with Baldwin County Mental Health. This merger helps us indirectly fund the growth required by the public to meet its behavioral health service needs. The merger was a response to the drastic changes both organizations faced as community mental health centers.

Dr. James Dill, president of the Alabama Council of Community Mental Health Boards, said in a recent conversation that mental health centers statewide are facing, or will face, big challenges.

"Mental health workers should pay close attention to the trend to create larger behavioral healthcare systems," he said. "Mergers and consolidations are the trend across the country due in part to the

Affordable Healthcare Act and changes in state-run and federally funded Medicaid. With the merger of AltaPointe and Baldwin County Mental Health, that trend has made its mark in Alabama."

Dill says our merger is the first of many he anticipates within our state. Here's why: larger systems will be the most viable when Medicaid managed care and deadlines for federal mandates become reality. "Small and

rural mental health centers will find it hard to hit the mandates, such as the electronic medical record mandate that is expensive to implement," he said.

In addition, fee-for-service will be phased out and replaced by evidence- and outcome-based reimbursement models that determine how organizations are reimbursed. This process could take up to two years to play out, but the changes are inevitable.

As chief executive officer of AltaPointe, it is imperative that we are at the forefront and paying close attention. It is important to me that our staff members are guaranteed that our leadership and management teams are doing the best they can to be ahead of all these changes, including everything related to the changing reimbursement model.

We think after all these changes are implemented, and we look back at where we began, we will see that all our efforts made it possible for us to come through this historic era of behavioral healthcare changes in a very positive way.

We want AltaPointe to be known as the best system of behavioral healthcare in the United States. Every night when we go to sleep we've got to be thinking that we must be better the next day. When we speak of pulling together, we mean staying focused on the patient's care and recovery. Our success depends on our staff members giving their best. We want to be the leader, and we want to be here for you and your family for years to come.

'How do we best operate this organization in the midst of massive changes and continue to sustain our mission?'

Case managers affect outpatient care in positive way

Editor's note: AltaNews focuses on the role of case managers and acknowledges their contributions by featuring two outpatient case managers in the following article. AltaPointe thanks all of its case managers for the bond they create with and support they give to patients and families.

Children's outpatient case manager is a 'positive face'

"AltaPointe may be the only positive influence in their lives," **Maggie Howard**, child and adolescent case manager, said.



Stephanie Pope, school-based therapist, assists Maggie Howard, child and adolescent case manager, with preparing a turkey cookie activity for their students at Robert E. Lee Elementary School.

Howard was referring to her "babies," the 35 students attending school in the Saraland and Satsuma school districts and to whom she provides services.

Every day, especially around lunchtime, there's a crisis at a school—a child's emotions exploding, a shutdown, elopement, or fight. She describes her role as being the safe person, a positive face, and a change for so many students who only know of bad.

Howard doesn't sit behind a desk all day; instead she paints with students, learns new dance moves, listens to aspiring guitar players, and plays Simon Says with the students to see how they follow rules. She explained that if she's doing something fun while meeting with her students, they're more likely to talk so she can help them break the norm and set positive goals. Once Howard identifies the issues, she goes out to access essential services for both the student and parent through a network of community resources, which includes housing.

"One 16-year-old student is homeless, and her mom does the best she can," Howard said. "But, she always said she wanted to be better than how she was raised. I told her, 'You are going to break the norm. If you want to be better, let's do it.'"

The student created a resume so she could get a job and Howard helped her locate suitable positions where she could apply.

"Parents just need help," Howard said. "And students just want to make someone happy."

When students mention their embarrassment of going to church or Walmart in their school uniform because that's all they have to wear, she collects donated clothing for them.

"Case managers are instrumental in determining the basic needs of a family and linking it to essential services so that treatment can be effective," **Olivia Nettles**, children's outpatient director, said. "Without case management, families with extensive deficits in basic needs are not able to benefit from therapy."

There are 16 case managers who see kids once or twice a week in Mobile and Baldwin counties for AltaPointe Children's Outpatient. A case manager is assigned to each of the schools that have patients attending and with whom AltaPointe has a contract.

Adult outpatient case manager advocates for and teaches patients

Advocating for patients is second-nature to **Petrice Brown** because it's very similar to what she did in her role as a parent for her seriously-ill daughter who needed a heart transplant.

Brown is a case manager in Supportive Housing, a program under AltaPointe Adult Community Services that allows patients to transition out of group homes or foster homes to their own apartments.

"I notate everything when I first meet with a patient," Brown said. "I pay attention to their surroundings. I watch when they're stable and watch how they change, and I check to see if they've been taking their meds." She observes these behavioral patterns so she can spot when something's wrong.

She also ensures that their physical health is good. "A lot of my patients haven't had a medical check-up in years," Brown said. She's established relationships with healthcare providers and can easily get a doctor's appointment scheduled for the patients.

Every Tuesday she teaches money management, showing patients how to make grocery lists and shop for nutritious meals as well as bargain shop for clothing. And, Brown steps in to protect against marketers who try to take advantage of the patients. For example, some may offer a cable bundle deal with Internet services that a patient might purchase even though the patient doesn't own a computer.

In addition to teaching basic living skills, she makes job and school referrals on their behalf. "They're never left without a source," Brown added. "I assist them with improving their lives so they can get back to where they used to be."

Once patients master their independence, Brown remains their case manager for an additional three months on an as-needed basis.

"Sometimes the case managers are the only consistent person in their lives," **Megan Griggs**, adult outpatient director, said. "Their main goal is to get a better picture of the patient's environment, surroundings, and overall needs, and then provide services for the consumer to become self-sufficient and move toward recovery."

AltaPointe Adult Outpatient has 53 case managers who see patients up to twice weekly; they have an average case load of 16-20 consumers.



Petrice Brown, case manager in Supportive Housing, arrives to meet one of her consumers at his apartment home.

People & Positions at the Pointe



Charlette Solis

Charlette Solis has joined the AltaPointe Office of Public Relations as Customer Relations Coordinator, a newly created position that is responsible for the Five-Star Customer Service program. Solis most recently worked at the Mobile County Health Department as Emergency Preparedness Coordinator. Previously, she also worked as public relations and marketing specialist at North Baldwin Infirmery and as assistant director of experiential learning for the University of West Florida Career Services

Department. Solis earned her bachelor's in business administration from the University of South Alabama and a master's in health communication from Boston University.

Nicolette Harvey has joined AltaPointe as the new BayPointe Hospital Coordinator of the acute units. Harvey earned a bachelor's in social work from Auburn University and a master's in social work from Florida State University. She comes to AltaPointe from New Orleans where she worked as the clinical director for a substance abuse facility.

PROMOTIONS



Phil Cusa

Phil Cusa has been named the EastPointe Hospital Administrator, after serving as the hospital's assistant administrator. He joined AltaPointe in 2013 as the hospital's assistant administrator. Cusa came to AltaPointe via Thomas Hospital where he served as administrator until June 2011.

Melissa Parker has been promoted to the AltaPointe Human Resources Employment Assistant having previously worked as the HR receptionist. Parker earned a bachelor's in psychology from the University of Alabama and is working on a master's in counseling psychology at the University of West Alabama. Cusa received his bachelor's degree in accounting and business from Florida Atlantic University. He has been active in the Alabama chapter of the Healthcare Financial Management Association since 1993.



Cella Walker

Cella Walker has been promoted to AltaPointe Assistant Director of Consumer Needs and Training and Education. She previously held the position of Performance Improvement Coordinator. Walker started with Mobile Mental Health in 1996. She earned an associate's nursing degree from Bishop State Community College, a bachelor's degree in health and human science from the University of Southern Mississippi and a master's in rehabilitation counseling also from USM.

Brandi Williams has been promoted to AltaPointe Consumer Needs Coordinator having previously served as consumer needs specialist. Williams earned a bachelor's in sociology with a minor in psychology from the University of South Alabama. She has been with AltaPointe for more than five years starting as a behavioral specialist at AltaPointe Adult Residential Services at Lakefront.

Bravo! Bravo!

Robert Carlock, Director of Environment of Care, recently earned the Certified Healthcare Engineer (CHE) credential by the Alabama Society of Healthcare Engineers, which is part of the Alabama Hospital Association. Carlock was also cited in the recent 'Environment of Care Leader', a publication for hospital engineers. Carlock was spotlighted for his diligence to make sure AltaPointe stays at the forefront of safety initiatives. "Staying up to date on the latest safety guidelines and best practices requires a combination of networking and vigilance," Carlock was quoted. "When we get together with other hospital engineers and EOC leaders, information flows freely."

The Alabama Department of Mental Health recently recognized **AltaPointe's Transitional Age** program for a presentation about its services during an ADMH site visit. In a note to **Kathy Rouse**, TransAge coordinator, DMH representative Angie Astin said, "It is obvious everyone that works in this home has a genuine passion in caring for this age group...We appreciate the dedication that you and your staff demonstrate."

Steve Dolan, Chief Information Officer, has been selected as a member of the 2015 Leadership Mobile Class. The program seeks,

trains and empowers leaders who are committed to supporting and leading community growth and progress through networking and collaborative problem solving.

AltaPointe staff members donated 2,800 pounds of clothing and goods during the Goodwill Easter Seals Donation Drive this fall. In return, AltaPointe residents and patients received \$660 in vouchers to spend at Goodwill.

Events held at **BayPointe Hospital, Children's Outpatient Services** and **Admin C** raised nearly \$600 for breast cancer awareness. **AltaPointe staff members** held a bake sale, participated in the *Making Strides Against Breast Cancer Walk* and donated money for the cause. Way to go!

AltaPointe's annual Benefits Fairs drew 350 staff members to the seven events held at five different locations. The **AltaPointe Human Resources Department** plans and sponsors the fairs, which offer staff members a chance to talk to the benefits vendors and HR staff. Congratulations to **Patrick Stewart**, who was the lucky winner of this year's grand prize a big screen television.

The Merger: Baldwin County staff members give their perspective



Krista Thronson left, Tyra Cresswell center, and Mary White-Spinner.

Krista Thronson, Coordinator of Intensive Services, Fairhope Adult Outpatient

I am the supervisor of our ACT (Assertive Community Treatment) Team, our discharge team and case managers. I worked with BCMH for about two and a half years before the merger.

What were your initial thoughts on the merger?

I didn't know much about AltaPointe, so I did some research. AltaPointe offered a few more services that would benefit our patients over here in Baldwin County, so that was really positive.

How do you feel about the merger now?

We had to deal with a lot of change at once, so it's been exhausting; but there have been so many good aspects for sure. The more things smooth out, the more we enjoy it.

How has your job changed since the merger?

The merger opened up the opportunity for me to advance. Before the merger, I was an adult outpatient therapist and saw consumers on a daily basis. Now I supervise about 10 employees and don't work with patients as often. It's completely different, but I enjoy it.

What impact has the merger had on your patients?

AltaPointe's homeless program was a great addition, and we now have a few more group homes available to our consumers. AltaPointe has therapists certified in Dialectical Behavior Therapy, a form of cognitive behavior therapy that works well with borderline personality disorders. These disorders are particularly difficult to treat, so being able to offer this therapy has really benefited some of our patients.

What has been the most pleasant surprise as a result of the merger?

BCMh had paper charts so AltaPointe's electronic system has been a big improvement. Now that we've got the hang of it, we all enjoy

having easy access to the data we need. For example, if a member of the discharge team is in court and needs to access a document about a consumer, they can just pull it up on a computer screen. It has really increased our efficiency.

What is the best thing your department brings to the new AltaPointe table?

I think our biggest contribution is our love for the consumers. They've always been our focal point and that's something that mergers or promotions or technology will never change.

Tyra Cresswell, Registered Nurse, Fairhope Adult Outpatient

I am the adult outpatient RN and had worked for Baldwin County Mental Health for more than six years before we merged with AltaPointe.

What were your initial thoughts on the merger?

I was a little fearful – mostly of the unknown. I was concerned about my job security because AltaPointe has plenty of nurses. But I also was excited because change can be exciting.

How do you feel about the merger now?

At first I felt pressure to make sure that my ducks were in a row the way that AltaPointe wanted them to be. Learning the Avatar system, the new protocols and the new expectations was stressful, very much like any "new" job would be. However, now that we're acclimated, we're becoming more comfortable with our performance.

How has your job changed since the merger?

I still perform the same nursing duties, just stepped up a notch in the areas of protocols and procedures. The volume of work is much heavier now. Whereas the doctor and I used to alternate seeing a patient every other visit, now we both see every patient every visit. I'm also seeing more patients who previously drove to Mobile for their appointments. With the addition of AltaPointe's medical staff, our doctor is able to stay here five days a week instead of dividing his time between Fairhope and Bay Minette. He is seeing more patients, so I am seeing more patients. Also, I think we're seeing more patients because AltaPointe's reach and reputation have increased awareness of the services we offer in our community.

What impact has the merger had on your patients?

We've become more productive and efficient, so we may not spend as much time with them that we once did. However, our patients now have access to so many more services can benefit them. There is more continuity of care, and the intake process has been streamlined. Since our doctor is here every day now, the time between intake and seeing the doctor has been reduced. All of these changes have resulted in better care, convenience and stability for our patients.

The Merger continued on page 6

What has been the most pleasant surprise as a result of the merger?

This change wasn't as hard as I feared. My immediate supervisor, Christe Ellis, is professional, patient and approachable. She met with all the nurses, answered all our questions and walked us through all the changes. We're so lucky to have had Christe to train us.

What is the best thing your department brings to the new AltaPointe table?

Wonderful employees. Baldwin County employees were a family of great people. Now that we're part of a much larger family, we can't lose by merging into one workforce with one mission.

Mary White-Spunner, Adult Outpatient Therapist, Foley Adult Outpatient

I see adult patients who live in the community and in two group homes for intakes, assessments, group and individual therapy. I had just completed my master's degree and had only worked with Baldwin County Mental Health for about nine months at the time of the merger.

What were your initial thoughts on the merger?

I worried that AltaPointe would want to hire its own clinicians, and I would lose my job. I didn't worry for long because my direct supervisor was so good about communicating with us.

How do you feel about the merger now?

As a new BCMH therapist who was still learning, I was probably more open to change than a long-term employee might have been. Before the merger, getting my LPC (licensed professional counselor) would have been very costly for me. AltaPointe offers the certification as a benefit. We also have so many more resources. Just being affiliated with EastPointe [Hospital] is a huge benefit.

How has your job changed since the merger?

My job has completely changed since the merger. I was the group home therapist with BCMH and traveled to all four group homes. Now the Baldwin County therapists' work load is split up geographically and patients come to us so it's more efficient. I spend less time traveling and more time providing services. And I've really enjoyed the addition of my community patients. Most are not chronically ill, and I can really improve their lives through therapy.

What impact has the merger had on your patients?

AltaPointe is much more disciplined about getting patients to pay their bills, so we've had to make them understand that without this type of fiscal responsibility, we couldn't offer the services we offer. But they have access to a pharmacy, a hospital, a crisis line and so many other resources that weren't previously available to them.

What has been the most pleasant surprise as a result of the merger?

I thought using electronic medical records would be miserable and take forever; we were so used to writing everything. Our paper

charts were our security blankets. Now I can see the whole history of care for patients who have been in the system for years. All the clinicians are on the same wavelength because we have access to the same data. It's been easy and really, really useful.

What is the best thing your department brings to the new AltaPointe table?

I think we brought a lot of really good clinicians and a dedication to teamwork. Now we're all one big team working together to keep our patients healthy and happy.



Jennifer Hornung left, and Melissa Ellis.

Jennifer Hornung, Assistant Nurse Manager, Adult Residential Services

I supervise the residential nurses in Baldwin County and Mt. Vernon and had only been employed with Baldwin County Mental Health for 10 months when we merged.

What were your initial thoughts on the merger?

I was apprehensive. I heard about the merger from the evening news, which portrayed it as a takeover. But within days, Tuerk met with all of us and relieved some of that apprehension.

How do you feel about the merger now?

While there were lots of moments of frustration and confusion, the transition was smoother than I anticipated. Kathy Kilcrease and David Beech made it a priority to keep us informed throughout the process.

How has your job changed since the merger?

I was a residential staff nurse, but I did everything. I cooked lunches, drove a bus to patient appointments and even took patients to Walmart. Now our nurses perform the nursing duties we were trained for. When I was promoted, I was scared at first. But I've had really good mentors.

What impact has the merger had on your patients?

As nurses we have seen such a positive effect from the additional services that are now available. Our patients now have professionally planned recreational activities on campus. They've really benefitted from access to the AltaPointe pharmacy. Our consumers at the medical house have a brand new home, and all our facilities have been upgraded thanks to Robert Carlock's team.

What has been the most pleasant surprise as a result of the merger?

I would say the unlimited knowledge base that is available. I am relatively new to psychiatric nursing, so advice from my new, experienced co-workers is a giant resource pool that I can access. Information is just an email away.

What is the best thing your department brings to the new AltaPointe table?

I would say a positive attitude and the willingness to adapt. We're all dedicated to doing our best with no hesitancy or negativity. We're a team.

Melissa Ellis, Coordinator of Baldwin County Group Homes, Adult Residential Services

Before the merger I had worked for Baldwin County Mental Health for 9.5 years. I oversee the four adult group homes for the mentally ill in Baldwin County.

What were your initial thoughts on the merger?

I worked for Mobile Mental Health before taking a job in Baldwin County to be closer to home, so I knew a lot about AltaPointe and David Beech's huge residential program. Residential is a beast because it's 24-7, and you work where the consumers live. That day-to-day observation of care is critical. Shortly after the merger announcement, Julie Bellcase, David Beech and Robert Carlock came to Baldwin County and immediately began to alleviate our worries. From the very beginning they were so supportive of me and my managers. Once we heard our jobs were secure, we were able to focus on the transition.

How do you feel about the merger now?

Sure, it's been difficult at times, but both organizations had the same goals. The biggest change was getting used to the way that AltaPointe did things.

How has your job changed since the merger?

Prior to the merger I was the supervisor over all of residential, and now I report to David Beech. Previously I was on call 365 days a year, which had a negative impact on my personal life and professional life. My managers took call, too, and we were getting burned out. Just sharing the load with the Mobile employees has alleviated some of the stress. Initially there was some resistance to changing from eight-hour shifts to 12-hour shifts, but most of my team loves it now.

What impact has the merger had on your patients?

Living in a group home is not a permanent solution for our chronic-but-stable patients, but they got stuck there because BCMH didn't have a foster home system. It's been a challenge to convince some of our families that AltaPointe's foster home program is a more appropriate option for long-term care, but we're making progress. It is what's best for the consumer.

What has been the most pleasant surprise as a result of the merger?

The way we have been empowered through technology. With AltaLink, information such as hours, benefits, tax information and vacation accrued is at our fingertips. Now that our aides have email addresses, we're more efficient, and communication is so much better. Using electronic medical records has also been a huge improvement. And the scanner! I love my scanner!

What is the best thing your department brings to the new AltaPointe table?

No question, our biggest contribution to the merger is my team. We work well together and we "bust it" to get things right the first time. I'm proud to say there are no slackers on my team.



Anne Chipman left, and Eddie Pratt.

Anne Chipman, Assistant Director for Child & Adolescent Outpatient Services, Fairhope

I supervise our outpatient school-based therapists, the REAP home parenting program, outpatient therapists in the Foley and Fairhope clinics. I am a supervisor for licensure for marriage and family therapists and supervise prevention of alcohol substance abuse for Baldwin County. I also help oversee the child adolescent day treatment. I had worked for Baldwin County Mental Health for almost 13 years at the time of the merger.

What were your initial thoughts on the merger?

I was on Robin Riggins' leadership team and had knowledge of the potential merger in advance. During meetings between the

two organizations, I tried to objectively weigh the advantages and disadvantages. I was a little apprehensive due to the difference in cultures. Mobile is so urban, and we are so rural. Continuously Tuerk and the AltaPointe board members showed us that they honored our culture. There was no attempt to erase us and make us just like them. I also saw the potential. We had to grow to be competitive, so it was logical to link hands with our partners across the bay in order to provide the best services for our families. Now I have a sense of excitement that there's more to come.

How do you feel about the merger now?

Transitioning from a paper system to an electronic system while maintaining our job productivity was difficult, but the longer we use it, the smoother it gets. Capturing all the relevant data and having easy access to it has opened up a whole new world for us. And everyone has been so helpful. I learn something new every day. I feel that we're positioned better than ever to advocate for our patients.

How has your job changed since the merger?

My therapy schedule is very limited now due to my additional administrative duties. I spend more time on the computer accessing reports, monitoring our work product and anticipating the needs of my employees, but this enables me to be a better manager. It's been an adjustment, but a positive one.

What impact has the merger had on your patients?

Initially it was very difficult for our patients, in part because they probably sensed the professional staff's anxiety. We tried to guide them gently and carefully through the transition, but we had different procedures. We changed names. Familiar employees left. Now I think we've turned the corner. Our patients haven't seen dramatic changes in their care and they really like the additional services like the appointment reminder call system. Regardless of the changes, they are confident that we are going to take care of them.

What has been the most pleasant surprise as a result of the merger?

I didn't anticipate the AltaPointe people would be as warm and welcoming as they have been. From the get-go, it wasn't "us" and "them" but "we". They were all so positive. Olivia Nettles and so many other AltaPointe employees walked us through the transition and were so helpful. When I read Tuerk's article in the last newsletter, I was so touched. It was refreshing that they understood us and cared about us as people. They understood how stressful the merger was because their jobs were changing, too.

What is the best thing your department brings to the new AltaPointe table?

Our day treatment program. We were already in 30 schools in Baldwin County and have a strong collaboration with our school system in both day treatment and school-based therapy. We also brought seasoned clinicians dedicated to providing the best services for our families.

Eddie Pratt, Assistant Coordinator of Children's Day Treatment, Fairhope Outpatient

I supervise the K-5th grade WINGS program, the SOAR middle school program and the High School ACE program and was with Baldwin County Mental Health for 14 years prior to the merger.

What were your initial thoughts on the merger?

The uncertainty was uncomfortable. Will our programs change? Will our personal style of care delivery change? How difficult will it be to learn Avatar? (We were all scared of Avatar.)

How do you feel about the merger now?

I think the way you handle change has a lot to do with your perspective. We went into the merger with a positive attitude, and AltaPointe has provided the tools, support and encouragement to continue the high quality of care we've always delivered. We've overcome a lot of obstacles and experienced a lot of growth. It's really a great feeling.

How has your job changed since the merger?

I was promoted from a therapist position in the WINGS program to this supervisory role after the merger. I still work with the people I worked with every day and stay in touch with the kids I used to serve as a therapist. But, I'm out in the community more now giving presentations and representing my staff and AltaPointe.

What impact has the merger had on your patients?

At first we had to educate our kids and their families as to what the merger would mean to them. But ultimately, the programs and guiding philosophy are the same. We have maintained our quality of care while increasing our productivity to meet state and Joint Commission standards. I think our families would say they haven't seen a dramatic change because the people they interact with are familiar. We're still helping these "future adults" and we're still a family. We've just expanded our family, which has increased our resources and support.

What has been the most pleasant surprise as a result of the merger?

I didn't anticipate being a supervisor, but my parents taught me that there is often opportunity in change. I've also been pleasantly surprised that AltaPointe has supported our method of care delivery – a personal, home-style care that our patients have been accustomed to. AltaPointe can still feel like home because ultimately, it's not just about the policies and procedures and technology, but the people who make those things work.

What is the best thing your department brings to the new AltaPointe table?

One of the AltaPointe employees paid us the compliment of calling us a "well-oiled machine," but we think of ourselves as a strong family. We work with a difficult population who need lots of support. From my perspective, we have united two great organizations to become the elite health family for our communities.



Hope McGowan

Hope McGowan, Lead Behavioral Specialist, Bay Minette Rehabilitation Day Program

I run the rehabilitation day program for the residents of Bay Minette, Daphne and Loxley. I had been with Baldwin County Mental Health for 11 years prior to the merger.

What were your initial thoughts on the merger?

The two words that come to mind are confusion and fear. Confusion because there was such limited information and fear about the merger's effect on our programs. But once the information started flowing, our panic turned into relief. There was also excitement because we could see the possibilities.

How do you feel about the merger now?

I am very pleased simply because life is better for our patients. Getting them into programs, moving them between programs and admitting them to the hospital, if needed, happen much more smoothly now. I'm excited for the opportunity for growth in the north part of Baldwin County.

How has your job changed since the merger?

Because BCMH was so small, everyone wore many, many hats. Now our positions have become more streamlined. I'm not doing as much administrative work, so I'm able to spend more hands-on time with the consumer.

What impact has the merger had on your patients?

I think it's comforting for them to know that help is right here at EastPointe if they need it. Another difference is that AltaPointe requires them to be more responsible for their care, a life skill we were trying to teach anyway.

What has been the most pleasant surprise as a result of the merger?

The most pleasant surprise has been that the employees in Mobile have the same mindset as the Baldwin County employees. I knew that AltaPointe was huge and had an awesome business model, but I was worried that they wouldn't be as passionate about the work we're doing. They are. Every single person from Mobile has been

so pleasant, helpful and down to earth. We're like a blended family, both sides pulling together to make us all stronger.

What is the best thing your department brings to the new AltaPointe table?

I'm going to say our attitude and the fact that our employees have handled the changes like rock stars. We're all looking toward expanding our programs, so the future only gets better.

Baldwin County Mental Health Center Timeline

- 1973** Incorporated by Baldwin County Commission at the urging of concerned citizens; originally part of Mobile Mental Health Center.
- 1974** Opened first office in the "REA" building in Robertsdale with 11 staff members. Employees included Bert Lacey, executive director; Dr. Stephen Scott, clinical director; Grace Smith, RN; Joyce Owens, counselor and Dr. Doug Ewing, psychiatrist. Starling Drugstore in Robertsdale provided pharmacy services. Bay Minette satellite office opened in a former Western Auto store.
- 1975** Opened first Transitional Group Home in Foley and added services for individuals with mental retardation.
- 1976** Main center relocated to Bay Minette with satellite offices in Foley and Robertsdale.
- 1977** Dr. Stephen Scott named executive director.
- 1980** Legislative act dedicated a portion of the cigarette tax to BCMHC to ensure financial stability.
- 1985** Fairhope Outpatient was built and became the BCMHC Main Center where it remained until the 2014 merger.
- 1990's** Continuum of care progressively developed. Tuerk Schlesinger started as the chief financial officer. He left in 1998 to become the executive director of Mobile Mental Health.
- 1994** Transferred intellectual disability services to Baldwin County MR Board.
- 1998** Established access to care department.
- 2005** Robin Riggins, LCSW, named executive director; Jason Tanner named clinical director. Ala. Department of Mental Health recognized BCMHC children's program as "premiere program" and model for other centers.
- 2014** At the time of the BCMH / AltaPointe merger, BCMH employed 120 professionals serving more than 5,500 patients in offices located in Bay Minette, Fairhope, Foley and Robertsdale; offered 24 different programs on a \$9 million budget. The children's program included 15 therapists, a full-time children's psychiatrist, a full-time CRNP, an RN and a juvenile court liaison. BCMHC offered substance abuse programs for teens in three locations, a state recognized prevention program, two in-home teams with an additional case manager and a state recognized parenting program to help prevent child abuse and neglect. Its nationally recognized children's day treatment provided therapists in most of the Baldwin County public schools. The BCMHC adult programs consisted of two day treatment programs, six outpatient therapists in three locations, three mobile teams (ACT, in-home, and discharge), four group homes, two CRNPs, three psychiatric nurses and one psychiatrist.

Program Progress

Human Resources

'Staff Scheduling' allows staff members more input, flexibility

AltaPointe is transforming the way it manages its workforce through another component of API Healthcare software, which was unveiled June 2014.

"Staff Scheduling" is well underway at EastPointe Hospital and BayPointe Hospital. This feature allows staff members more input and flexibility in developing their own work schedules. It is managed through the web-based API software that employees are already using for time and attendance.

"This software helps to reduce or eliminate a number of unfilled shifts, improve employee work-life balance, and allow the company to focus resources on improving staff satisfaction and patient care," **Tuerk Schlesinger**, AltaPointe CEO, said.

Here's how it works: Scheduling requests are submitted throughout a three-week period and then reviewed by schedulers to make changes and finalize. Once the schedule is published, employees then have the opportunity to go in and trade, offer, and even pick up extra shifts before and during the schedule period. The scheduling system will also notify staff members by text, email, or telephone of open shifts throughout the organization allowing them the opportunity to pick up extra shifts when approved.

"Being required to work a set rotation will soon be a thing of the past," **Cindy Martin**, Assistant Administrator of BayPointe Hospital, said.

BayView Professional Services

AltaPointe serves community in time of grief

AltaPointe reached out to help the community following the tragic end to the search for Hiawayi Robinson, an 8-year-old girl who was found dead Thursday, Sept. 18, two days after she went missing from her home in Prichard.

AltaPointe therapists were on location shortly after Hiawayi's body was discovered. **John Conrad**, BayView coordinator, was one of the therapists who went out to offer support. Conrad also was a guest on FOX 10 News, Sept. 19, who spoke via phone about dealing with grief in the face of tragedy and managing those emotions.

"We have to be honest with children because they are very intuitive and know when we are not telling the truth," Conrad said. "Be honest about what happened, save the details, but tell them a child was taken in a traumatic way."

BayView therapists are called to the front lines of workplace shootings, robberies, suicides and deaths of coworkers to provide critical emotional support to people touched by tragedy.

The following AltaPointe staff members assisted the community during this tragedy included **Leslie Stinson, Jonna Sanders, Dante Crenshaw, Psachal Maize, Deborah Parker, Monica Taylor, Shameka Crusoe, Keisha Brown, Ebony Robinson, Julicia Williams, Talicia Holcombe, and Latrina Thomas**.

Olivia Nettles, children's outpatient director, thanked her team for its heartfelt response in assisting the community after the death of Hiawayi. "Your willingness to drop everything and attend to the needs of others is commendable," Nettles added. "I am so grateful to have such caring staff as part of our AltaPointe team."

Adult Residential Services

ARS outlines its goals for 2015

AltaPointe's adult residential services' leadership team held its annual management retreat in October to prepare for the upcoming year's goals. **David Beech**, ARS director, says it was an opportunity for team building and a useful forum to share new information.

"ARS has seen its team grow quite large since the merger," Beech said. "This retreat gave team members a chance to get to know one another better by sharing experiences and envisioning where they want to see ARS grow and develop."

Twenty-two ARS leadership team members attended the retreat, including Beech and **Patricia Sullivan McNair**, ARS assistant director; coordinators; assistant coordinators; residential managers; a nurse manager; assistant nurse managers and the practice manager.

"The focus for this year was on improving customer service, [creating] a more professional image and [determining] how to motivate change in our workforce," Beech added. "The team enjoyed the Five Rivers Delta and balanced laughter with learning."

Environment of Care

AltaPointe EOC joins Healthcare Emergency Response Coalition

The AltaPointe **Environment of Care Department** has joined the Mobile County Healthcare Emergency Response Coalition (HERC) that comprises public health organizations, hospitals, emergency medical services, nursing homes, community health centers and other disaster response agencies. HERC is dedicated to ensuring the safety and wellbeing of patients, staff members and visitors.

“Membership in Mobile’s HERC is an exciting opportunity for AltaPointe’s EOC Department,” **Robert Carlock**, EOC director, said. “Through various committees and employee participation, the EOC Department strives to make AltaPointe the best environment for patients and employees alike.”

As a member of the HERC, AltaPointe has a voice in planning for and responding to natural and man-made disasters, terrorist attacks, pandemics and mass casualty events. HERC’s monthly meetings and scheduled trainings provide a collaborative environment for the healthcare community to combine forces with one another and other agencies to ensure overall readiness in emergency situations.

“As a community of healthcare responders, we all have many of the same needs in the area of disaster response,” Carlock said. “Through this coalition, we have formed partnerships with other organizations and strengthened our capabilities to provide better care during times of crisis.

“When all the HERC members were operating independently, emergency response and preparedness was defined by what each organization knew individually. Now we all go to great lengths to ensure all HERC members are well prepared.”

According to the US Department of Health and Human Services and the Assistant Secretary for Preparedness and Response, area healthcare coalitions across the country are measured on their continuity of healthcare operations during public health emergencies and capability of increasing medical surge capacity. This includes immediate bed availability, tracking patient movement and addressing post-disaster behavioral health needs of the community.

LeMoyné School

New reading specialist joins LeMoyné School team

LeMoyné School introduced a new reading specialist, **Alison Mitchell**, to its dedicated team this fall.

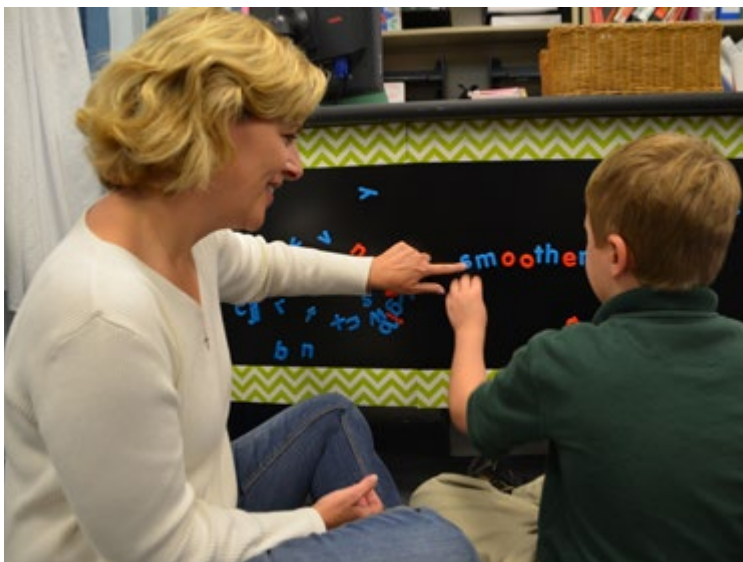
Students who attend the classroom and day treatment program are unable to maintain their behaviors in the school system and typically read below grade level.

Mitchell works with students from kindergarten to eighth grade who attend LeMoyné School as well as children and teens living in the **BayPointe** residential program.

According to Mitchell, of the 66 residential and day treatment students in the program, only nine tested on or above grade level in reading when the 2014-2015 school year began. Mitchell will focus on working one-on-one or in small group settings with those who are significantly below grade level in reading. She also will work in conjunction with the school’s

My goal is for students to say ‘I love to read.’

Alison Mitchell, LeMoyné School



Alison Mitchell, LeMoyné School reading specialist, makes learning fun using magnetic letters to help students improve their reading skills.

language arts and reading teacher, **Renee Williams**, to address the needs of other students.

“My overall goal is for my students to say, ‘I can read, and I love to read!’” Mitchell said. “In other words, I teach reading skills, but I also work on confidence and creating a love for reading.”

Mitchell said the students have to enjoy reading in order to truly make progress. “The first signs of progress that I see are increases in confidence and willingness to read when the students are in my room; this eventually transfers to the regular classroom.”

LeMoyné School is a collaborative program between AltaPointe and the Mobile County Public School System that works to meet the educational and therapeutic needs of severely emotionally disturbed students.

Performance Improvement works to stop the spread of the flu

We are in the midst of flu season and AltaPointe's **Performance Improvement Department** is on a mission to wipe out the spread of the virus in all AltaPointe facilities. After all, influenza is a serious disease that can lead to hospitalization and sometimes even death.

The Joint Commission has a new standard that mandates healthcare organizations set incremental influenza vaccination goals to achieve a 90 percent compliance rate by the year 2020.

According to the US Department of Health and Human Services, vaccination remains the single most effective preventive measure available against the influenza virus.

"It's important to get a flu shot every year to build your immunity," **Nicole Zediker**, employee health nurse, said. "It protects your family, co-workers, patients, and the community in which you live from the influenza virus. You are helping others when you help yourself."

In 2013, AltaPointe administered 400 flu shots to 35 percent of its staff members free of charge, according to Zediker. So far this year, Performance Improvement has administered close to 600 flu shots across the continuum.

"The flu shot will not protect you against all flu viruses but it will protect you against three of the most common strains," Zediker added. "If you do happen to catch a flu virus that you were not protected from, the flu shot can help shorten the duration and severity of the virus."

For more information about influenza and influenza vaccination, please call the AltaPointe Employee Health Department at 665-2532.

In Memory of Anne Saxer



The AltaPointe family is mourning the death of **Victoria Anne Saxer**. The 23-year-old CNA worked as a PRN at EastPointe Hospital

and was a nursing student with Breckenridge School of Nursing. Renee Presley, EastPointe Hospital Director of Nursing, says Saxer also completed her clinicals at EastPointe. "She was a beautiful spirit; always giving of herself. Her co-workers adored her, and the patients did as well," Presley said. "We need more staff with her compassion for the mentally ill." Saxer passed away Sept. 4, 2014. Her parents set up a page on the American Foundation for Suicide Prevention site (afsp.donordrive.com) where donations can be made in their daughter's memory.

EOC Safety Topic

Keys to Slip-Trip-Fall Prevention

Don't leave a safety problem because you think it is someone else's responsibility. Safety is everyone's job. If you see something that you can handle effectively – please do. If not, immediately bring it to the attention of someone who can correct the problem.

Some things that should be part of daily upkeep include:

- Being mindful of common problems that arise and handle them as they happen.
- Keep power cords and other tripping hazards out of trafficked areas.
- Don't leave storage boxes or other items out on the floor or where they could fall.
- Use safety signage on wet or slick floors.
- Clean up spills and debris immediately.

See the next eight daily upkeep items on AltaLink's EOC page.

Request Assistance

Let your supervisor and/or EOC know right away if you see problems such as:

- Uneven or damaged walkways
- Shrubbery overgrowth that needs to be trimmed
- Loose, missing or damaged carpeting, tile or other floor coverings

See the next three problems to report to your supervisor on AltaLink's EOC page.

This topic may be found posted as a link on the AltaLink EOC Page as "Employee Safety Training" in the upper right corner. Supervisors should have met with staff members in November to review and ensure awareness of this topic.

CarePointe CORNER

Call volume and staff grow

Calls to CarePointe continue to rise and have nearly doubled in the last year. **Ingrid Hartman**, CarePointe's assistant director, says the usual monthly 3,600 calls during the day have nearly doubled to 6,500/month in the last 6 months. The increase in calls includes regular requests for OP services as well as for hospital discharge appointments, psychiatric hospital referrals, residential screenings, and 24/7 crisis services.

"As a result of the growth since our merger with Baldwin County Mental Health and the addition of adult beds at BayPointe Hospital, we have added a third financial investigator in the CarePointe department as well as one additional specialist," Hartman added.

Hartman again emphasized that AltaPointe staff members can receive a more timely response if they call the CarePointe provider phone line for clinicians, physicians and referral sources. Clinical supervisors have that number.

