



2016 RURAL HEALTH HERO OF THE YEAR

The Oregon Office of Rural Health is proud to present this year's Rural Health Hero of the Year Award to Community Counseling Solutions. Following are submission excerpts from those who supported the nomination.

EXCEPTIONAL CONTRIBUTION

Community Counseling Solutions (CCS) is a nonprofit corporation that was formed in 2007. The designated Community Mental Health Program (CMHP) for Morrow, Wheeler, Gilliam and Grant counties, CCS provides developmental disability and outpatient behavioral health services to individuals and families in Morrow, Wheeler, Gilliam and Grant counties (as well as developmental disability services in Lake County). It provides residential and secure residential services to individuals diagnosed with severe and persistent mental illness; it owns and operates a psychiatric acute care facility in Grant County; and provides school-based counseling services at seven locations, which include three full school-based health centers. CCS also operates the Grant County Health Department and owns and operates a Rural Health Center in John Day, which jointly provide comprehensive primary care services that complement the behavioral health services.

CCS's mission is providing dynamic, progressive and diverse supports to improve the well-being of its communities. This mission – our vision and commitment -- informs everything CCS does. This includes the type of employees who are hired and trained, the service capacity and infrastructure developed, the desired outcomes targeted, and the quality of service and care provided. This vision and approach has resulted in a level, scope, and quality of care that is rare for rural communities.

CCS provides intensive, evidence based services that promote independence and healthy functioning. It also work closely with community partners – which include child welfare, law enforcement, schools, hospitals and clinics – to better understand their roles and responsibilities as well as to educate them regarding ours so that our efforts might better integrate to meet a client's need. This helps agencies work better, more thoughtfully and effectively to ensure individuals receive appropriate levels of care.

CCS's commitment to providing intensive, preventive services for individuals pre-crisis has also resulted in one of the lowest hospitalization rates in the state. Its customer satisfaction scores are consistently high and employees enjoy working for CCS. On three different occasions, CCS has been rated one of the top 100 best nonprofits to work for in Oregon. Teamwork and collaboration are core values of the organization and employees are committed to the communities they work and live in. This is evidenced by the amount of volunteer work they provide, which includes work as diverse as being on an ambulance crew, serving on various boards, coaching little leagues, and teaching at vacation bible school. CCS employees are committed to participating in and make their rural communities great places to live.

ABOVE AND BEYOND

Oregon rules and statutes describe the mandated services CMHPs must provide. Those services include 24/7 crisis services, outpatient behavioral health services (including intensive services to children), gambling and alcohol and drug prevention, and developmental disability services. These services, delivered primarily in an

office setting with little to no primary care integration, were the only ones offered in Morrow, Wheeler, Gilliam or Grant County in 2000. While such mandated services are critical and extremely important, they do not begin to address actual community behavioral health needs or what CCS considers important for robust community health in rural areas.

CCS was a Morrow County operated program before 2007. Agency staff and Morrow County Commissioners increasingly realized the program would function better, more effectively, if it stepped away from the county and incorporated as a non-profit. That happened in 2007. At the time, the vision was to provide a continuum of care for rural communities in eastern Oregon. However, the prevailing view was that the needed resources could not be developed for the region due to the higher costs and reduced capacity associated with smaller client bases in rural communities. Despite that, the goal was to develop and provide an array of services that enabled people to receive quality care within their own communities, as opposed to having to leave family, friends and local support systems to receive services in the more populated areas of the state, if not out-of-state.

To this end, CCS became an agent of change and increased the scope and quality of behavioral health options available to communities in eastern Oregon. Peer services (which have proven to be very effective) are services delivered by individuals who have a prior personal history with mental health or alcohol/drug use that is relevant to meeting the needs of others with similar challenges. The use of peer services was just emerging in the late 90s. Eastern Oregon had very few programs that provided peer services. In 2005, CCS hosted the first peer support conference for eastern Oregon. Through this conference, CCS heard about a service called the Warmline that was being provided in a Midwestern state. The Warmline is a telephone-based service for individuals to call who are struggling with mental health issues and want to talk with a peer who has had similar challenges. In the absence of Warmline services, individuals typically call crisis lines or access drop-in centers or emergency rooms, all of which carry a significantly higher price tag. After watching peers in eastern Oregon attempt unsuccessfully to start a Warmline, CCS worked with several other community partners to start Oregon's first Warmline, called the CCS David Romprey Oregon Warmline. Initially, the phone service was available ten hours a week and staffed by two individuals. Today the service is available for over 100 hours each week and is staffed by over 30 peers from across the state. To date, CCS has served over 150,000 calls from across the state and nation. The cost per peer-staffed Warmline call is approximately \$20. It is estimated that the Warmline has saved Oregon taxpayers approximately \$20 million through reduced use of crisis systems, emergency room visits and hospitalizations.

To develop needed behavioral health capacity for eastern Oregon, CCS has worked closely with area communities to establish respite care and therapeutic foster care. The need for additional capacity was exacerbated in the early 2000s when Blue Mountain Recovery Center stopped taking acutely mentally ill clients. This meant any individual from the east side of the state who needed to be hospitalized had to be transported and treated in Bend, Portland, Salem, Eugene, or even Grants Pass. This tied up law enforcement time while doing transports, often taking officers out of their county for 15 hours or more. Moreover, given the lack of beds in other parts of the state, individuals would often sit in emergency rooms for several days while waiting for an acute care bed to become available. The costs for such prolonged stays often ran as high as \$10,000-\$15,000. Additionally, it meant that the individual would stay for days, weeks or even months in locations that were difficult for family or friends to visit. While other providers were skeptical it could be done, CCS addressed this issue by building the first and only freestanding psychiatric acute care facility in eastern Oregon: Juniper Ridge Acute Care Center, located in John Day. It opened in 2012, and has admitted over 300 residents from eastern Oregon and the state. This facility has greatly increased bed availability for the east side of the state, relieved pressure on the need for west side beds, reduced transport commute time for law enforcement, and enabled individuals to receive care closer to home with enhanced access to family and friends.

The benefit of animal therapy in the treatment of mental illness has long been demonstrated. While many providers have considered the possibility of providing equine therapy in a residential setting in Oregon, nothing has ever come to fruition. In 2010, CCS built the first secure residential treatment facility in Oregon that provides equine therapy. The facility, Lakeview Heights, has served nearly 150 residents from across the state. Both Lakeview Heights and Juniper Ridge have licensed crisis respite beds. Individuals from the counties we serve, who need a place to go for a few days to address mental health issues, are able to stay at these licensed

respite beds as opposed to being hospitalized. The daily cost of respite care is \$350. The daily cost of acute care can be as high as \$1500. This is a far better service when appropriate – quality and cost-wise -- than placing someone in an acute care setting.

IMPACT ON THE COMMUNITY

CCS' impact on life in the rural communities it serves has been significant: It has developed the needed capacity to provide a range of behavioral health related services that is unique, robust, better meets the needs of clients in rural and underserved communities, and does these things in a way that humanizes the client and helps remove mental health stigma. To accomplish this, CCS has moved from employing 18 staff in 2007 to over 150 today. Employees live and work in the rural communities they serve, and return an additional \$39 million to these communities in the form of wages and receipts

The Warline increases job opportunities for peers while Juniper Ridge provides additional capacity and enhanced care for acutely mentally ill residents from rural areas and beyond, both at significant cost savings to the state and tax payers. Lakeview Heights continues to be recognized as one of the premier secure residential treatment facilities in the state; and through its equine therapy program many individuals have formed lasting bonds with animals and experienced therapeutic change they never thought possible. This year, to address professional staff shortages in rural communities, CCS began what will be a tradition of offering six college scholarships to graduating seniors who plan to pursue education in health care. The scholarships are for \$1,000 each and are renewable annually for four years. CCS hopes these scholarships will help its greatest assets, the younger generation, to return to their communities to provide healthcare services.

IN THEIR OWN WORDS

CCS has done a great job of espousing modern behavioral health system principles and implementing emerging best practices, while ensuring their relevancy in the four rural counties CCS serves. I have been impressed and inspired by Kimberly and her team as they led the effort to initiate a statewide Warline and continue to administer it successfully for the state. CCS is also pursuing community behavioral health clinic certification, aspiring to be an early adopter of primary care integration in a behavioral health home. CCS is a strong member of our community mental health program network and I value its dedication to rural Oregon.

CCS has emerged as a leader in health care in eastern Oregon, and in some aspects, a leader in the state. They are not afraid to take risks and put together programs that have only been discussed, as evidenced by the David Romprey Warline, Juniper Ridge Acute Care Center and Lakeview Heights. In many ways, they are considered a pioneer for program development. CCS fulfills its mission by providing quality services in each of its programs. It is known throughout the state for striving to provide the highest level of care and commitment to the customer's well-being. The programs that CCS operates ensure that the customers are receiving quality care in their own backyard, and the continuum of care that is provided is remarkable given the size of the geographic area.

When I began my career in law enforcement, the opinion of mental health providers was low. We were responsible for getting the person in crisis to a mental health clinician by detaining this person, getting them into a confined rear seat and driving for up to an hour and a half to a medical facility only to turn around and drive the person back to where we picked them up and drop them off, or worse yet, lock them in jail. It was a bad experience for all involved, especially the person we were supposed to help and care for. In 2008, the county leaders contracted with CCS for mental health services. Open your eyes and scream WOW – what a difference! We now have a mental health provider that not only knows about providing mental health services, but does it with kind, caring professionalism. If something needs to be done, changed or added, all I have to do is bring it up and am told by CCS "We will figure out a way."

CONGRATULATIONS, COMMUNITY COUNSELING SOLUTIONS, AND THANK YOU FOR ALL YOU HAVE DONE AND CONTINUE TO DO!