MISSION

Our mission is to strengthen our community and improve the lives of our clients by delivering excellent health and human services tailored to meet their needs.

VISION

A healthy and safe community that actively promotes recovery and positive lifestyles for people challenged by mental illness and substance abuse.

VALUES

In support of the Sound Mental Health mission, we commit to the following values:

Delivering the highest quality service by continuously improving the quality of our services, products and processes; being responsive to internal and external customers; and continuously improving value to our customers.

Demonstrating integrity and the highest standards of ethical practice in every aspect of our agency. This is evidenced by open, honest communication, fair and equitable treatment of employees, customers, and volunteers, and sound management practices.

Showing respect for individuals and for the cultural diversity of our employees, clients, and the communities we serve.

Supporting partnership, working together as a team to achieve common goals, and seeking internal and external opportunities for collaboration.

Being responsible for our actions and obligations, as an organization and as individuals.

Cultivating an environment that encourages risk-taking, creativity, experimentation, and change in response to customer needs.

Providing leadership and innovation in behavioral health services to establish Sound Mental Health as the provider of choice for our community.

Providing a positive environment for our clients, guests, and employees.
Contents

2 Letter from the CEO
4 Board of Directors and Senior Management
5 Mental Health Pioneer Looks Back on Decades of Influence
7 Resilience, Trust and Listening Key to Successful Domestic Violence Services
9 Employing the Developmentally Disabled … More Than Just a Job
11 Sound Mental Health Heals Families Through Comprehensive Services
13 Financials & Demographics
14 2010 Supporters
To most of us in the behavioral health and human service field, the past few years have felt a lot like a war of attrition. And much of the time, it did not seem like we were winning. Nevertheless, once the dust had cleared from 2010, Sound Mental Health (SMH) not only was still standing (which is essential in a war of attrition); we were still going strong.

That positive outcome was not facilitated by our government funders, due to the continuing economic doldrums plaguing the nation. However, we did receive positive news from the state’s Notice of Funding Award (NOFA) program. In January, we were notified that SMH had been awarded $1.1 million over five years to provide behavioral health services to residents of our Pacific Court and Kasota residential properties. In a second announcement, the NOFA indicated that the Low Income Housing Institute—with which SMH partners to provide support services—would be granted capital funding for development of a 60-unit housing complex in the University District.

The major highlight of the year occurred in March, when the President signed into law the Patient Protection and Affordable Care Act, often referred to as Health Care Reform (or ACA). As the most important and comprehensive legislation since the creation of the Medicare and Medicaid programs during the 1960s, the Act holds the promise of transforming the nation’s health care system. However, due to continuing political controversy over the ACA, and the fact that most of the new law’s changes are scheduled to be implemented over a four-year period, it is unknown how much the Act will ultimately impact the health care system.

Our fifth annual “Mental Health Matters” gala was our most successful event to date. More than 500 friends of SMH attended, and $135,000 was raised. Those in attendance seemed to enjoy the event a great deal, and the presence of many staff and Board Members gave the evening a feel of a family reunion.

In July, Susan Dreyfus, secretary of the State Department of Social and Health Services (DSHS), and David Dickinson, director of Behavioral Health and Recovery Services visited SMH. They spent a morning with several Board Members and staff, learning about the many ways that SMH serves the community, and then sharing their perspectives on the changing landscape within DSHS. It was the first time a DSHS Secretary had ever visited SMH, and we really enjoyed the occasion.
Reductions in revenue from several levels of government placed SMH under some financial stress during the second half of 2010. In order to avoid ending the year in the red, SMH management was forced to make two rounds of budget cuts, which unfortunately included the reduction of more than 50 staff positions. This marked the first significant reduction in force for SMH within the past ten years, and was very difficult on everyone involved. However, it was necessary in order to position the organization to be successful in 2011.

By the end of the year, a number of other positive things had happened for SMH. For the third year in a row, we were named one of the best places to work in Western Washington by The Seattle Times. Also, we saved a small domestic violence organization in Kent from going out of business after it was unable to maintain enough financial support from its funders to stay afloat. In addition, several SMH programs and staff received media recognition and service awards from local, state and national organizations. We also made major improvements to our web site. Finally, and most importantly, SMH provided services to more than 18,000 residents of King County during 2010, an amazing 12 percent increase in one year.

This last year reminded us that even an organization as strong and vital as Sound Mental Health is still vulnerable to powerful economic cycles. For more than a decade, SMH has enjoyed outstanding growth, both in revenues and in services to the community. We have made a major difference in the lives of many thousands of King County residents struggling with mental illness and substance use disorders. In the process, we also have helped strengthen the bonds of our community.

Despite these countless successes, cutbacks in funding for behavioral health services are coming from all sectors: federal, state and local governments, philanthropic organizations and the business sector. Our nation’s economic woes are affecting everyone, and the net effect has been significant funding reductions. Yet, although most everyone feels some pain from these recessionary times, none of us feels it as powerfully as those who struggle every day just to survive. Those are the folks that SMH is proud to specialize in serving.

The staff of Sound Mental Health work hard every day to help our clients recover from the harm that has been done to their minds, their bodies and their lives by mental illness and chemical dependency. That task has been made more difficult by the loss of funding dealt the organization in 2010. However, we are taking a lesson from our clients, whose resilience often is incredible. The result will be an even stronger, leaner, more effective organization with even more commitment to accomplishing our mission. We earnestly hope we can count on you to help us do just that.

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Mental Health Pioneer
Looks Back on Decades of Influence

Surrounded by colleagues at his Sound Mental Health retirement party in December 2010 was Robert Houk, MD. Though his influence in community mental health spanned four decades, he was, as always, quick to credit others.

To the thousands who know him, though, “Dr. Bob” is a true pioneer in the industry, helping to pilot mental health from the “institutional” models prevalent in the 60s and 70s, to the more “humanistic” model so widely practiced today. The seeds of his early work here in the 70s blossomed into an approach that not only shaped the more than 80 programs at SMH, but have influenced the mental health system statewide.

In those formative years, the Washington State Department of Health and Human Services asked him to serve on the Washington State Mental Health Advisory Committee, offering the opportunity to help rewrite the Washington State Mental Health Plan. SMH’s Medical Direction Policies promoting the integration of medication management with team-oriented, holistic,

continued on page 6
community-based mental health care were influential in developing this plan. And they are still being employed—and helping people today.

“It is tremendously rewarding to apply the clinical models we developed in the early days at SMH,” said Dr. Houk, “and expand them to not only effect the entire mental health system, but to truly improve the quality of life for so many people in our community.”

Not only did he impact the lives of many clients, he also inspired future leaders in community mental health. People such as Amnon Shoenfeld, director of Mental Health, Chemical Abuse and Dependency Services Division for King County; Charles Huffine, MD, clinical assistant professor at the University of Washington Department of Psychology and medical director for Child and Adolescent Programs, King County Mental Health, Chemical Abuse and Dependency Services Division; Ed Samuelson, MA, GMHS, who went on to develop one of the largest geriatric mental health programs in the state; and Marilyn LaCelle, former CEO of Valley Cities Counseling Services, were all mentored by him.

Dr. Houk’s greatest legacy, however, emerged from his philosophy that clients are people, who should be active participants in their own recovery. He helped to refine and adapt the Problem/Goal Oriented Record system, a practice predicated on the notion that client input in care plan development was crucial to successful recovery. The practice also de-emphasized the use of labeling, which was not only better for a client’s self-perception, but also established a true collaboration between client and clinician.

Pioneering programs that promoted meaningful activity, learning opportunities and human contact for clients, Dr. Houk and his colleagues at SMH engendered a sense of belonging for them. This approach fueled programs that ultimately reduced medication dosages while at the same time decreased rehospitalization and incarceration rates by approximately 90 percent.

“What has always meant the most to me at SMH,” he said, “is that we created an oasis of humanism, where we have helped and will continue to help thousands of people who otherwise might not have been served.”

While Dr. Houk will no longer roam the halls of Sound Mental Health, offering a kind word or an encouraging pat on the back, his profound influence and sensitivity will forever impact mental health for the ages.

“What has always meant the most to me at SMH,” he said, “is that we created an oasis of humanism, where we have helped and will continue to help thousands of people who otherwise might not have been served.”
All the other previous therapists just didn’t seem to listen. They had all the answers ahead of time. They already had a preconceived notion of what was bothering Mia Rupert’s* kids. And because of that Jason*, Haley* and Joel*, three of Mia’s six children, simply weren’t responding to attempts by therapists to reach them.

As survivors of years of domestic violence at home, Mia and her children’s Post Traumatic Stress Disorder and Major Depressive Disorder were to be expected. The kids progressively acted out and were steadily becoming more withdrawn and fearful. They were resolving conflict through physical means. Knowing it had to end, Mia finally fled her Southwest Washington home in 2008 after more than a decade of abuse. But the struggle was hardly over. For nearly two years, the family labored unsuccessfully to find counselors that the kids trusted—or who were able to truly grasp their extraordinary circumstances.

Then, in 2010, they found Jenna Genzale, MA,
Heidi Shenk and Jan Harter, MA, all members of the clinical staff at Sound Mental Health. Mia discovered the organization through the Children’s Domestic Violence Response Team (see the 2009 Annual Report for more information), a unique and innovative resource developed in part by SMH specifically for survivors of domestic violence. The program bridges the chasm between traditional mental health agencies and domestic violence organizations to provide services in a safe and confidential environment.

“I just felt that counselors in other places didn’t understand what we were going through and didn’t take the time to listen,” said Mia, of her experience with SMH.

Given the family’s needs, SMH takes a highly collaborative approach. Jenna currently provides guidance to Jason and Haley, while Jan supports Joel. Heidi offers therapeutic services and counseling to Mia. Throughout, the team regularly communicates, sharing information with the others in order to better tailor treatment and administer services.

During the past year, Mia and the children learned to trust again—and invest in relationships with their clinicians. It’s complicated, to be sure. But SMH’s client centered-approach that favors gradual exposure, intensive, empathetic listening, weathering minor setbacks and carrying no preconceived ideas into communications have been key to some very promising developments.

The three children now currently receiving counseling are beginning to open up and confront their trauma. They are sharing information that Mia never thought possible. Knowing her children are being supported allows her to begin the process of healing herself. For Mia, it was the first time that therapists met her on her own terms and she sensed a real investment in everyone’s recovery. She hopes, someday, that her children not receiving counseling will follow her lead.

With Mia’s progress and growing confidence comes a willingness to help others understand domestic violence and its mental and emotional consequences.

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“I think it’s important for the community to realize that domestic violence and emotional abuse is not just a reality for poor people,” she noted. “It is something that needs to be recognized and understood in the community. I hope that the good thing coming from all this is helping others by sharing my story.”

*Names changed for confidentiality*
Finding a job, even when economic times are good, is no easy matter. For those who live with mental illness, like Linda Loy, a Sound Mental Health client with Major Depressive Disorder and cognitive challenges, it’s even tougher. But since SMH was founded, it has made finding employment for clients a key part of its recovery-oriented philosophy. SMH’s Community Network Program, which serves Linda and more than 800 other cognitively challenged clients, believes that there is no clinical intervention more effective than having, and keeping, a job. That’s why in 2010 alone, SMH placed nearly 20 individuals into long term employment in King County.

Before arriving at SMH in 2006, the last thing Linda was thinking about was a job, however. Coming through SMH’s Crisis Services, Linda was in desperate need of assistance. She was already diagnosed with cognitive challenges and developed Post Traumatic Stress Disorder from an unstable, highly stressful and turbulent home environment. It wasn’t easy, as Linda will tell you. But nearly three years of nurturing, intensive...
services tailored to her specific diagnoses that included crisis counseling, group support, individual and family therapy, as well as grief counseling, got her to where she is today. During this time her family life stabilized, relationships improved and she moved into Adult Family Housing, a supportive housing environment for people with developmental disabilities.

She’s very pleased with her growth since coming to SMH. It has helped her control anger management issues, choose healthy activities such as art, yoga and dance, and, importantly, establish boundaries in her personal relationships. With these crucial concerns addressed and supports in place, SMH Vocational Specialist Marya Laviste and Mary Running, MA, LMHC, DDMHP, Linda’s counselor and case manager, recommended she get out into the community and work with SMH’s Vocational Services programming. Being employed fosters self-reliance, builds self-esteem, promotes social confidence and helps clients on their journey to becoming contributing participants in their communities.

After a thorough, year-long process that consisted of skills and interest assessments, life and social skills training, probationary volunteer work, job matching, search and interview strategies and other job readiness work, Linda successfully interviewed for and was hired by Fred Meyer in 2008, as a customer service associate. Since that time and throughout 2010, Linda has thrived in her role there.

“I love helping customers,” said Linda. “I think I am an important part of Fred Meyer’s customer service.” She prides herself in keeping Fred Meyer clean and safe for customers and aspires to stay there for years to come.

Someday, she hopes, she’ll be able to get an apartment, live on her own and make more friends.

“When Linda arrived here in 2006,” said Mary, “she was withdrawn and really unable to interact in positive ways. She was distrusting and unsure. While SMH’s services helped her to make an initial breakthrough, I think work is what keeps her happy. Knowing that she is valued and appreciated, I think, keeps her going.”

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If anyone knows the profound effect that mental illness and addiction has on the family, it’s Ariel Ray*. As a survivor of an early childhood of mental, emotional and physical abuse, Ariel’s years of recovery eventually revealed that her own struggles exacted a toll on her two children, Cole* and Giselle*.

“I felt like I was broken and I needed to be fixed,” said Ariel about the reason she ultimately turned to SMH nearly three years ago for help. “I couldn’t stop the panic attacks—and I know that it was because of my past that I hadn’t dealt with it. I was finally willing to admit that and was ready to talk about it.”

Specialized and intensive individual therapy designed by her therapist and case manager, Karlene Johnson, MA, and a personalized medication management program helped her control panic attacks, Major Depressive Disorder and chronic substance abuse problems. It hasn’t always gone according to plan, but Ariel has stayed with it and is now on her way to recovery.

“Sound Mental Health has kept me honest,” she added, “and helps me come to grips with my addictions and personal issues.”

Sound Mental Health Heals Families Through Comprehensive Services

continued on page 12
But the disruptive effect of mental illness can extend to loved ones, too. Ariel’s children, 12 and 7 years old, had experienced enough instability and turmoil in their own lives, while also coping with their mother’s challenges. Resentment, issues at school and epic power struggles suggested that something was very wrong.

More than a year has passed since they began receiving services from a team of specialists. Annie Sharrett, CDPT; Aaron Mathias (individual therapy services for the children); Erica Shannon Rosas (family therapy services); and psychiatrist Beth Sandman, MD (medication management for Ariel) collaborate with Karlene, delivering distinct elements to the family’s recovery.

Characterized by empathic listening, client-centered care plans and information sharing, this team approach to care delivery treats Ariel and her children as both individuals—and as a dynamic family organism.

The end result? Ariel believes this practice allowed everyone to have a voice, express their concerns and learn to work together for the long-term stability of their family.

“They really helped us learn to communicate with each other better,” explained Ariel. “I got different tools to minimize the power struggles so that we could actually get more accomplished instead of just getting angry with each other.”

When it comes to client support, according to Karlene, there is strength in numbers.

“When clinicians work together as a team like this, we create synergy that can be more powerful than if just one element of treatment is used. We create a healthy environment among ourselves, which supports the family through its healing process.”

Of course, there’s still work to do. Ariel plans on continuing her partnership with SMH to persevere with her own recovery — and she appreciates the strides her children have made through the support they’ve received.

“Without SMH, I would not be where I am today,” she said. “We’re not where I want us to be now, but hopefully we’ll get there.”

In time, Ariel hopes to get to a place where she can manage the everyday stresses of life, learn greater independence and still continue her studies at Green River Community College, where she aspires to earn a degree in Forensic Technology.

“Thank you,” she wanted her therapy team at Sound Mental Health to know, “for believing in me and sticking with me and my family through everything.”

*Names changed for confidentiality
FINANCIALS & DEMOGRAPHICS

TOTAL REVENUE: $48,238,400

TOTAL EXPENSES: $47,218,500

CLIENTS BY GENDER

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Sound Mental Health appreciates contributions from individuals, companies and foundations. It is with their support that SMH served more than 18,000 clients in 2010. (Sound Mental Health has made every effort to accurately acknowledge our donors. To report corrections, please contact the Sound Mental Health development office at (206) 302-2251.)

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