

2017 REPORT TO THE COMMUNITY



EVOLUTION

R E N E W A L & T R A N S F O R M A T I O N



MISSION

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

VISION

To provide effective and innovative whole health care for the people and community we serve.

VALUES

Respect for the uniqueness and cultural differences of each individual.

Excellence in the quality of our services.

Sustainability through good stewardship of our resources.

Partnering with clients, organizations, and agencies.

Encourage healthy life choices.

Commitment to our standard of excellence.

Teamwork and collaboration both internally and externally.

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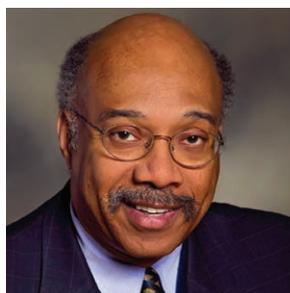
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Sound President & CEO
Patrick Evans



LETTER FROM THE
PRESIDENT & CEO:

Evolution

Throughout the past half century of Sound's history, there have been many significant milestones achieved. A community-based organization such as ours, I believe, must evolve in order to adapt to new challenges and, throughout the years, we have. We're at the front line of many of the issues that plague our neighborhoods and communities and we are, for many, a last resort. If we do not adapt, then many who depend upon us are left with fewer options, and less hope.

In context of our history and our undying drive to best serve our community, 2017 was a pivotal year for Sound. Some of our changes were quite evident and pronounced while others were considerably more subtle, but no less significant.

Without question, the changes in 2017 had purpose and intent, and have a singular focus to ensure that we can meet, and even exceed, our mission for years to come.

A most obvious change was our organizational rebranding. With a wide array of services that include supportive housing, addiction treatment, domestic violence, vocational and many others, we were no longer just a mental health organization, but a provider of complex, health care services spanning the behavioral health spectrum. In order to attract and engage health care partners outside of our industry, and to better communicate the value of our work, it was essential that we brand ourselves differently. Free of the boundaries of "mental health," our

new brand identity also allows us to explore new growth opportunities that enable us to serve even more people in our community. We have evolved as an organization, and our branding reflects that.

Our evolution as an organization, however, is not simply “visual.” Change has been the prevailing theme at Sound in 2017, punctuated by a large scale corporate restructure and more centralized operations. We expanded our corporate leadership teams around mission-critical areas, implemented an internal communications and collaboration process and strategically relocated our long-time corporate headquarters from Seattle to Tukwila. These and other modifications to our corporate governance will enable us to better identify and seize opportunities, while empowering us to more rapidly adapt to changes in our industry.

As we prepare for the outcomes-based reimbursement mandates required through the Affordable Care Act, Sound took the bold step to implement Reaching Recovery, an innovative care model designed to deliver appropriate care and improve client outcomes. Through this model, clients progress through five specific levels of recovery based on the acuity of their need; the evidence shows that they begin to utilize other social services less frequently, reducing health care costs. Implemented by a handful of providers nationwide, Reaching Recovery enables us to better focus on client recovery, reduce our team member caseloads and enhance their satisfaction and fulfillment. We are excited at the tremendous potential of this new model and look forward to its impact on our clients and our teams.

On the topic of team member engagement, Sound is committed to disrupting the traditional “team member evaluation” models that dominate today’s workplaces. Recognizing that the work we do is difficult and challenging, realities that are often exacerbated by the old-fashioned performance review process, we’ve launched Catalytic Coaching, a new team member engagement tool that is strengths-based in

approach, and allows team members to take ownership of their professional growth and development. The work we do in the community could not be possible if not for our dedicated teams, so we’re excited at the potential this new approach has on them, and our business.

We expanded our focus on philanthropy last year, by creating the Sound Safety Net Fund, to support those in the community who are caught in the gap — working families living paycheck to paycheck who do not qualify for Medicaid, but do not have access to private insurance or cannot afford deductibles and copays. We also created a new fall luncheon fundraiser, “IMAGINE,” which was extremely well received. These two programs, and others we are creating, will engage donors to our mission and will serve to open doors to behavioral health care for thousands in our community.

“Old ways won’t open new doors,” the old saying goes. 2017 certainly can be characterized in this way. We have spent the past year transforming the way we do business, the way we position ourselves, the way we support clients and team members, all with the intent to propel our organization forward.

While we believe that there is more work to do, the changes we’ve implemented this past year offer a fertile foundation from which we will thrive and grow. We anticipate, quite eagerly, a future that will be very bright.

Good and exciting things are happening at Sound!



Patrick C. Evans
President & CEO



Sound's Reaching Recovery Team: (from left to right) Christine Atienza, Susie Winston and Katrina Egner

Innovative, Client Centered Model of Care Taking Hold at Sound

In mid-2017, Sound adopted a new model of care called Reaching Recovery. This groundbreaking, nationally-acclaimed model was inspired by the Mental Health Center of Denver (MHCD) more than 15 years ago. An undisputed success in the Denver area, Reaching Recovery reduces community hospitalizations and incarcerations, saving millions of dollars and uses tools and data to measure client recovery. Best of all, the model enables clients to progress through levels of recovery, reaching their own goals toward a life worth living.

Sound is one of only a handful of behavioral health organizations nationwide utilizing this model of care.

Under partnership with MHCD, Sound began the process of implementing the program which included in-house training to introduce team members to the concept and to support the new and effective way of providing recovery-focused care to its clients.

Katrina Egner, Vice President & Chief Programs Officer, discovered the Reaching Recovery program in early 2017 and introduced it to Sound leadership. Egner foresaw that the implementation could be daunting “like constructing a plane while still flying it.” But she also believed it would be worth the effort—instilling hope and providing measurement, she says, for “who is getting better, and how.”

Egner adds, "This kind of data helps not only clients and team members but also will appeal to current and new funding sources."

The model has already impressed King County, Sound's primary funder, with its innovation and client-centric approach, which are big wins for Sound because the model provides a "level of care" tool that focused on value-based outcomes above everything else.

Egner gives credit to Susie Winston, chief quality & clinical excellence officer, and Christine Atienza, clinical supervisor/trainer, for "their tireless efforts in pushing this program forward."

"This program gives us all hope for a new recovery model and shifting to a healthy culture," says Winston. "We are balancing optimism with reality and focusing on individual and corporate strengths. Reaching Recovery ensures the right service, at the right time, at the right intensity."

FOUR RECOVERY TOOLS

The program incorporates four recovery measurement tools into the daily practices of team members and presents data measuring success and wellness in easy-to-read charts. The four tools are:

- Recovery Needs Level (RNL), matching the appropriate level of service to client needs
- Recovery Marker Inventory (RMI), a team member rating of client progress
- Consumer Recovery Measure (CRM), the client's own rating of recovery and growth
- Promoting Recovery in Organizations (PRO), the client's evaluation of an organization's recovery culture.

As Atienza notes, "The clinical teams were ready for change, but skeptical. After the training, they are now focused on the 'how' not the 'why.' Under the model, they are organized as specialists and

given the tools to help clients get what they really need to recover."

A new Sound team member, Tahlia Honeyman, plunged right into adopting Reaching Recovery.

"It allows us to meet clients where they are."

Since she inherited a client caseload, she was able to explain the model along with her introduction, help clients choose the appropriate level of service, and set up treatment goals.

"I tell them they are the captain of their ship, and I am providing the level of support they need and want."

Atienza, who has been to Denver to study Reaching Recovery up close and see it in action, understands that "this is a cultural shift to focusing on client recovery. We are still in the beginning stages of rolling out the tools."

CLIENT INVOLVEMENT

At the onset of the implementation, clients were invited to complete the Consumer Recovery Measure (CRM) for the first time. Over 450 answered and thousands of responses were entered into myAvatar, Sound's electronic health record system.

"Not only does Reaching Recovery help people in the community get better, it helps make Sound a place where people want to work," Egner points out. "We are reinforcing our leadership role in the Industry."

This could not have happened without the commitment from Sound's President & CEO, Patrick Evans.

"We would not invest in such a program unless we had confidence that it would help us get to where we want to be," Evans declares. "This program has a proven track record of success in improving client outcomes, increasing team member



(from left to right) Teri Hammaren, Jess Burden, Monique Dines and Beth Moga

The Courage to Change

Monique Dines has an intellectual disability and a complex trauma history. But as anyone who knows her will tell you, Monique also has bravery, perseverance, integrity, and hope. She needed to call on every one of these traits to overcome abuse, anxiety, incarceration, homelessness, and severe health issues to thrive and achieve a level of independence that serves her well today. That, and comprehensive support and an intervention framework offered by Sound's Intellectual and Developmental Disabilities program (IDD).

Individuals with intellectual and developmental disabilities have a much higher incidence of trauma than the general population and it

often begins when they are young. Monique was removed from her mother's care by Child Protective Services (CPS) at 4 years old and placed into foster care. She characterizes living in foster homes as "rough and tough." She doesn't go into detail but was anxious for the freedom that came when she was 18. Children with IDD often are anxious and are exposed to adverse environments that create daily and chronic stress. As soon as she turned 18, and was eligible to leave foster care, she did.

"I could have stayed," she says, "but I didn't want to follow the home's rules. They didn't care about me."

On her own, Monique was lonely and isolated, and as is common for people living with IDD, she began a relationship with someone she believed would bring meaning and a sense of belonging to her life. They had three children but struggles with substance use created trouble for the couple.

Her children were taken by CPS and placed into Monique's former foster home. This is very hard for Monique to talk about, even now, and the deep and lasting pain of these losses are evident. After self-reflection and soul searching, she gained some perspective and ended the relationship.

Unfortunately, intellectual impairments impacted her ability to extensively plan and organize her life. Monique eventually became homeless. "I hated it!" she explains.

Using shelter resources, she rented an apartment through a Section 8 voucher. But having her own apartment was a blessing—and a curse. She was able to get off the streets and started to build a routine, but "friends" appeared and began staying at her home. Using her Social Security money, these predators began exploiting her, using her apartment to consume drugs and engage in other inappropriate activities. And, as she stood up to these people, defending herself, Monique became both a victim and a perpetrator of domestic violence.

It was during time in the corrections system for domestic violence that Sound's Crisis Stabilization Services and Jessica (Jess) Burden responded to a request to assess what was happening with Monique.

"Each client is different," Burden observes. "We meet clients where they are and focus on syncing the needs and goals they have. We focus on strengths and what they can and want to do."

HOPE FOR A BETTER LIFE

Monique's first goal was to "get out of the court system and get back to her apartment."

But, Burden says, "Monique was a bit suspicious of strangers and systems trying to help her. Building rapport is huge, and by regularly visiting and being there throughout her court struggles, it helped promote trust and created a safe environment for recovery. The hope Monique had for a better life was inspiring."

Monique connected with Sound's IDD program, which provides strength-based, therapeutic services focusing on the whole person. A psychiatrist, Case Manager Beth Moga, Vocational Specialist Teri Hammaren and several group therapies were added to Monique's support system.

Working with Monique "was a process," says Burden.

"Each person built a relationship over a period of time. She wanted to be an advocate for herself but really was unable to take care of herself. Monique moved from jail into a respite program to monitor her health and safety. Her path forward was complicated by hospitalizations numerous times for ongoing infections related to immune deficiencies. The apartment was abandoned, and losing it was extremely difficult since it was a marker of her independence and success."

Burden talked about Monique's struggles with her health and getting the needed care.

"With her condition being difficult to pinpoint, we had to advocate for her in the medical system. She was unable to speak up and would be quickly discharged with a new medication. We were constantly talking to doctors and specialists to get this figured out and under control so she could be at her best to face all of the other changes in her life.

THRIVING THROUGH IDD SERVICES

"From there Monique blossomed," Burden says emotionally. "She has come so far. She eventually



Sound Programs: Thousands of Lives Impacted

Sound's programs touched more than 22,000 lives last year, offering hope, recovery, second chances, and the opportunity to lead more fulfilled lives. While all of Sound's programs impacted individuals and their families in 2017, below are highlights from just a few that enhanced lives in our community.

ADULT SUBSTANCE USE DISORDER TREATMENT *Empowering change and encouraging health*

This program provides assessments, intensive and less intensive outpatient services for people living with addiction, and supports them through engaging group sessions, high-level mental health and addiction counseling, and if necessary,

medication assessments. For clients who feel ready, Sound provides vocational and supported housing so that these clients can successfully rejoin the community.

The program, located in four King County sites—on Capitol Hill in Seattle, and in Bellevue, Tukwila, and Auburn—provides approximately 40,000 hours of service annually to nearly 1,000 men and women, mostly through Medicaid funding.

According to Program Manager Arden James, the program is available for clients who need it.

"Treatment and being in recovery allows our clients to rejoin the community," she says. "Rather than

suffer alone or ending up in jail or emergency rooms, clients are able to rejoin their families, improve their housing situation, obtain meaningful work, and see improvements in their physical and mental health.”

SOUND SAFETY NET

Behavioral health care for people “caught in the gap”

The poorest members of the community can access Sound’s services through government programs. On the other end of the spectrum, individuals with private insurance also are able to find help at Sound. But those caught in the gap—working families living paycheck to paycheck who struggle each month to survive—may sacrifice much-needed behavioral health treatment to pay for basic needs such as rent, groceries and child care.

Regrettably, organizations like Sound are unable to serve these people due to volatilities in public funding, which often leave them with no ability to cover their care. In 2017 alone, hundreds of adults and children were unable to receive help from us. This was the inspiration for Sound Safety Net, a program launched in 2017 as a lifeline for people caught in this gap—the working poor and others who desperately need help but cannot afford it. The Sound Safety Net fund—fueled by donors—provides a dedicated funding stream for hundreds of middle-income people who need us. Support for the Sound Safety Net fund will open the doors to care for countless people who could never otherwise receive it.

“Faced with turning away people who need us, scaling back our commitment, or seeking new ways to fulfill our commitment to promoting better behavioral healthcare across King County,” says Susan Bean, chief development officer, “we choose the latter. And that’s where our donors, and the support they provide, come in.”

Sound Safety Net offers a tangible, needed service to the community as the organization expands its reach.

SUPPORTIVE HOUSING

Achieving stability through stable homes and services

The Supportive Housing program’s primary goal is to help people transitioning from homelessness or psychiatric hospitalization into independent housing by making behavioral health services readily available on site. Program Manager Annamaria Gueco notes that these services “include addiction treatment, vocational services, and helping clients finish school and reconnect with family and the community.”

Sound’s Supportive Housing program includes projects across the organization, including McDermott Place, Gossett Place, Ernestine Anderson Place, August Wilson Place, Kenyon House, Pacific Court, South King County Housing First, Project Homestead, Standard Supportive Housing, and Project for the Assistance of the Transition of Homelessness (PATH). During the last 15 years, the department has grown and developed, with its most recent project being the August Wilson Place, which opened in 2015.

Housing programs are spread throughout King County, from Lake City to Tukwila, and across Lake Washington to Bellevue. They have Sound team members on-site providing daily support services. In fact, half of Sound’s Supportive Housing programs have team members working seven days a week, with some clients receiving services multiple times a day. In 2017, Sound provided almost 10,000 service hours to help its clients with space earmarked for young adults 18-24, veterans, and families in need.

SOUNDWORKS

Program advocates for clients seeking employment

The mission of Soundworks is to help adults 18+ with behavioral health or cognitive issues find and keep employment. The program's evidence-based approach is built upon a commitment to one-on-one client engagement during their search for employment and continuous support once they are hired. This includes job seeking and interview skills, as well as post-employment job training, career development, and long-term assistance of employer and employee.

Critical to Soundworks' success is advocacy. The program builds relationships with employers, emphasizes the importance of employing people with disabilities and educates them about client strengths and challenges. Program Manager Nick Coniaris notes that in the majority of cases, employers get better results with Soundworks employees than those without support.

"We let prospective employers know they are hiring the client, Sound, and Soundworks."

In 2017, Soundworks worked with approximately 100 clients and placed 35 in jobs. Coniaris is optimistic about the future.

"Our team has jelled, and we'll be building off the work of 2017, meeting with employers to honor them for their participation, and highlighting the difference that employment makes to our clients." He notes that it is important to recognize the efforts of hiring managers to their bosses, who may be regional managers "up the ladder," with more hiring responsibility. Expanding the program's reach from the bottom up, and building on existing positive relationships, will allow Soundworks to grow on a solid foundation.

CHILD & FAMILY SERVICES

Wraparound care where it is needed

Sound's Child & Family Services, comprised of four programs, provides both mental health and addiction treatment for clients, from birth to 24

years and their families/caregivers. The program uses a wraparound, family-centered, strengths-based approach called WISE—Wraparound Intensive Services—that it helped pioneer in the late 80s.

Each program serves 2,000 clients annually: severely emotionally disturbed, chemically dependent youth in foster, adoptive, or biological families with complex and multi-system needs. The program offers a strong focus on community and linkages with other providers. Through continued constant contacts over the years, even the most troubled clients have turned their lives around.

Today, the four programs and two evidence-based fidelity teams, combined, range across King county, serving three large school districts in Bellevue, Lake Washington, and Northshore, as well as Renton, Highline, Tukwila, and Vashon Island. The programs serve their clients through outpatient work, in schools and in the community. Care is individualized depending on the need and goals of the child and their care provider.

MIDDLE SCHOOL SUPPORT

Services at a critical age

Funded by the Nesholm Family Foundation and other organizations, the Middle School Support Program (MSSP), part of Child & Family Services and a distinct program within Sound's school-based work, engages students where they spend their days: at school. The program's three care coordinators work full time in the Seattle Public School District's Denny International, Mercer, and Aki Kurose Middle Schools to provide on-site behavioral health expertise, ensuring that students who are struggling academically have access to support. These are children who need coordinated, integrated services from multiple systems and care coordinators identify social, emotional, or environmental barriers to learning and academic success.



6400

Chief Marketing & Public Relations Officer,
Steve McLean, at corporate headquarters

Strategic Rebranding Positions Sound, Today, and for the Future

In February 2017, Sound Mental Health's leadership began mapping out a plan and goals to evolve its brand – a move that was designed to better reflect the complex and varied clinical work it was doing. The result of this effort was the evolution of the organization's name from Sound Mental Health, to Sound. For years the organization had been delivering more than mental health services; it had been serving clients through individual and group therapy; providing addiction treatment, supported housing, vocational services, school-based programs, domestic violence services, trauma-related support, and much more.

"As an organization," explains Steve McLean, chief marketing & public relations officer, "we had

outgrown the limitations of the words "mental health" in our naming. There was a time in our history where it was an accurate reflection of our business. But today, the phrase actually limits public perception and does a disservice to the complex, varied work we do serving our community."

What drove this change? Why would a more than 50-year-old organization seize the opportunity to change its branding?

"Our industry is rapidly changing, and we must evolve to meet the numerous challenges ahead," says Patrick Evans, President & CEO, "including primary care integration, outcomes-based

continued next page

reimbursement and, of course the need to grow and expand. By evolving our brand to one that is more health care focused we will engage more partners and pursue diverse new products and services that will enable us to diversify our revenue and grow.”

Evans emphasized that though the organization will pursue opportunities to serve communities beyond the Medicaid population it currently serves, it will always remain committed to supporting underserved populations.

Sound collaborated with local branding firm Phinney Bischoff on the nearly year-long project. The Seattle-based firm has helped other major nonprofits—the Gates Foundation, the Allen Brain Institute, and LifeWire among others—with their corporate branding. Phinney Bischoff conducted research at the beginning of the project, including focus groups, workshops and phone interviews, with a diverse group of partners and external stakeholders. The results indicated that there was a great deal of equity in the name “Sound,” and that years of positive impressions meant it would be prudent to retain that part of its history. As noted earlier, the decision was made strategically to remove the “mental health” portion of the name.

McLean notes that a core element of the organization’s history and identity, articulated during the research phase, was its rich history of innovation, and boldly crafting programs designed to serve the most complex, difficult-to-treat behavioral health issues in the community. This core trait, and a key differentiator, was the inspiration behind Sound’s new tagline, “At the forefront of healthcare.”

The process to take this research and develop it into an evolved brand platform was carefully and painstakingly considered. Several iterations took place, and each time the branding was revised

and amended. Executive leadership and team members were brought in at strategic points along the way, as was the Sound Board of Directors.

Considerable effort and time was invested in crafting a logo that effectively told the Sound story. What Phinney Bischoff developed, resonates: Sound is dedicated to helping individuals, and their families, progress toward stability and independence. The new logo utilizes gradient color and upward progress in line movement to symbolize the organization’s role in empowering clients to move from despair and hopelessness to a position of hope, confidence, and stability.

“It sends an undeniably powerful and evocative message,” says McLean. We believe the message applies to anyone in need of support, including the Medicaid population we serve and for other populations we will explore in the future.”

Toward the end of 2017, new signs were installed throughout Sound’s 14 locations. The organization officially launched the new, evolved brand through an integrated communications program that included media relations, social media, print, digital, and transit advertising, as well as through its website and newsletters. A critical part of the brand roll-out included a branding presentation, designed to educate team members about the new brand, their role as brand ambassadors, and the broader context for the changes.

The overarching message: the rebranding was a strategic, thoughtful business decision necessitated by changes in the industry. It was an investment designed to accurately reflect the critical work Sound does serving complex populations, while being elastic enough to enable the organization to explore diverse growth opportunities in the future.

The payoff has already begun. Many of Sound’s clients and team members have already expressed appreciation for the new branding, pointing out



Dr. Marcia Wharton: Former Board Member, Long Time Donor and Leader in Primary Care Integration

When Marcia Wharton, MD mentions a close family member who has struggled with acute mental health issues, and the heart-wrenching effect that it has had on both of their lives, it's easy to see the pain overcome her normally poised demeanor. The influence of seeing a loved one struggle, the effect of willing yourself daily to dig deep and support that loved one, the exhaustion of investing your heart and soul into helping them, can be truly life altering.

For some, the reaction may be withdrawal and isolation. But for Marcia, a medical doctor who believed in the necessity for behavioral health and primary care integration, it spurred action and engagement.

From the beginning of her Family Medicine training, Marcia had always been drawn to serving both the mental health and primary care needs of patients.

In her residency in California, at the San Jose/Stanford Family Residency Program, she was trained in an Integrated Delivery, Managed Care model of primary care.

However, when she moved from California to Washington in 1993, she learned that integrated care and coordination with on-site mental health providers was not a common practice in primary care. Though she had many patients with mental

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health disorders and tried to provide as much of their care as possible, therapy and psychiatric consultations required a referral and visits to an outside provider.

"I did that for 16 years," she realizes. "And it wasn't until I had an ill family member hospitalized at Fairfax and then admitted to long-term residential care, that I was directly exposed to (the fact that) when children have severe mental illness and are on Medicaid, they have very limited access to medical and mental health services—and those services were not delivered in a coordinated and integrated way."

It was during this same time that she began working with Sound team members Theresa Winther and Cathy Clem (now Callahan), who provided therapeutic support, case management and other supportive services for her family member, as well as valuable resources and information to assist other families.

Moved by her own family's struggles in both her and witnessing the challenges of other families going through that system, Marcia had an epiphany.

"I heard family stories; I was part of weekly family groups and attended a family retreat. I realized that continuing to work in a private practice serving only privately insured patients and not taking care of those patients and families was being a part of the problem rather than a part of the solution."

As a result of this experience and a strong desire to get back to teaching, she began a search for a more meaningful practice experience.

"I literally did a Google search with some key words. An opportunity came up that appeared a perfect match."

In 2008, she began working at Providence Health and Services--as a medical director at Providence Everett Healthcare Clinic, a practice focused

on offering integrated medical and behavioral healthcare to the uninsured, Medicaid and Medicare populations. There, she helped to create a model of care and recruited a team of providers, including a social worker and psychiatric nurse practitioner, that delivered integrated medical and mental healthcare.

"We were also a teaching site for nurse practitioners and students from the University of Washington School of Nursing and Medical Assistant students from Everett community College."

This gave her and the other providers she worked with the chance to share the integration model with some of the next generation of healthcare leaders.

Recalling often the support she received from Sound, she happily accepted an invitation to join Sound's Board of Directors and remained a board member until 2015.

"I was really interested in serving on the board because Sound had been there for my family and I wanted to do everything I could to give back."

She also joined the board of Project Access Northwest and the Providence Foundation.

She became a donor to Sound and to other organizations who rely on community donations and grants to offer programs to the most vulnerable children and adults in our society, especially those with complex medical and mental health challenges.

"Marcia has been an enduring and generous donor to Sound programs for several years," says Sue Bean, chief development officer. "In the truest sense of the word, she is a champion for behavioral health, through her volunteerism and generous donations, but also through the work she does at the front lines to integrate behavioral health and primary care."

Client-Centered Care, continued from page 5

satisfaction, and producing cost savings over the 15 years Denver has used it. The board, executive leadership and team members are excited about what lies ahead for Sound and our clients." ■

Courage to Change, continued from page 7

made the decision to accept help. She got a new place to live with staff support for her medical concerns and she is a happy, healthy person now." Moga, who sees Monique weekly for therapy sessions, agrees that she is thriving.

"The difference in her is dramatic," Moga says. "She now speaks up for herself. It's wonderful to watch. She has a strong will to learn and grow and move forward. It's an honor to be part of her team."

Monique is grateful for the help she received. "I really like working with Beth. It's good to talk it out; it's better than holding it in."

After being used to living on her own, Monique found it hard to adjust to a group home, where the team arranged for her to live, but she likes having her own room and the support available.

Monique attends a number of groups at Sound, plays on their basketball team, and is often seen with friends around campus.

"Basketball is a lot of work," Monique says. "But it helps me be more active and gets me out of the house."

She needed to revive her independent spirit and this is where Vocational Specialist Teri Hammaren came in.

"I get involved when a client says they are ready for a job and she was ready!"

Monique was hired at a local theater company helping with event preparations, where she feels a sense of purpose and connection.

"Monique is amazing," Hammaran says. "She has a good attitude and is funny and engaging. It's so rewarding working with her."

Monique is thankful for Sound but understands that she was the driving force here.

"I've come through a lot, and I knew I could because I am a strong person."

Sound's IDD Services program provides strength-based therapeutic services focusing on the whole person and how systems interact biologically, developmentally, psychologically, and environmentally.

"We are in awe of Monique's resilience in the face of all she's lived through," declares David O'Neal, director of IDD Services, "and the exciting future she has. It took her persistence to learn new skills, bravery to face medical scares, the ability to forgive herself, and the courage to change her life and we were just glad to be able to help her get there." ■

Rebranding, continued from page 12

that they feel it supports stigma reduction efforts and communicates optimism and hope.

Overall, members of the business and health care communities see the move as smart and essential, especially since the organization is intent on growth and expansion. While the long term impact of this change won't be known for some time, McLean and Evans feel confident that the evolved Sound brand better positions the organization as a health care business. It will enable them to pursue diverse opportunities that will positively impact team members and its business interests, and allow the organization to expand its community-centric mission, where everyone is able to receive the care they need. ■

Sound Programs, continued from page 9

"I got caught up in some stuff at that age and didn't have the support to navigate it. I want to give back and make sure someone is there for these kids," reflects Bobby Gaon, who has been the care coordinator at Denny International for nine years.

Care coordinators collaborate with students aged 11 to 14, their parents, school staff, and other providers. The program offers several levels of care: assessment and referral of students, consultation in crisis situations, and ongoing intensive services to the hardest-to-serve youth. The support continues year-round, with summer academies, and meetings at the office or in the community.

"We meet them where they're at," says Melissa McCullough, three years at Aki Kurose. The program also works with students transitioning into middle school.

As Stephanie Edler, at Mercer for seven years, observes, "This is a developmentally crucial time for change and growth. We were all middle schoolers once, and every student could benefit from a counselor."

Program Manager Terry Richardson estimates that over 450 students were served in 2017. In the program, barriers to learning are identified, academic and behavioral support is provided, and planning and organization strategies are offered to increase attendance and learning. Coordinators also offer mentoring and role modeling for the students. Overall, the program helped kids navigate difficulties in their lives and perform better in school. ■

Wharton, continued from page 14

Today, Marcia is at Molina Health, overseeing Centric, a project that delivers an integrated model of care to the highest utilizers of the health care services. She also is medical director at Molina's clinic in Everett, which provides integrated care to patients who have had limited access to mental health care, addiction treatment and primary care services. It is clear that she finds her work meaningful and deeply rewarding.

"I have the opportunity to work with a highly motivated group of providers and support staff who are dedicated to providing excellent and affordable care to patients who are most in need."

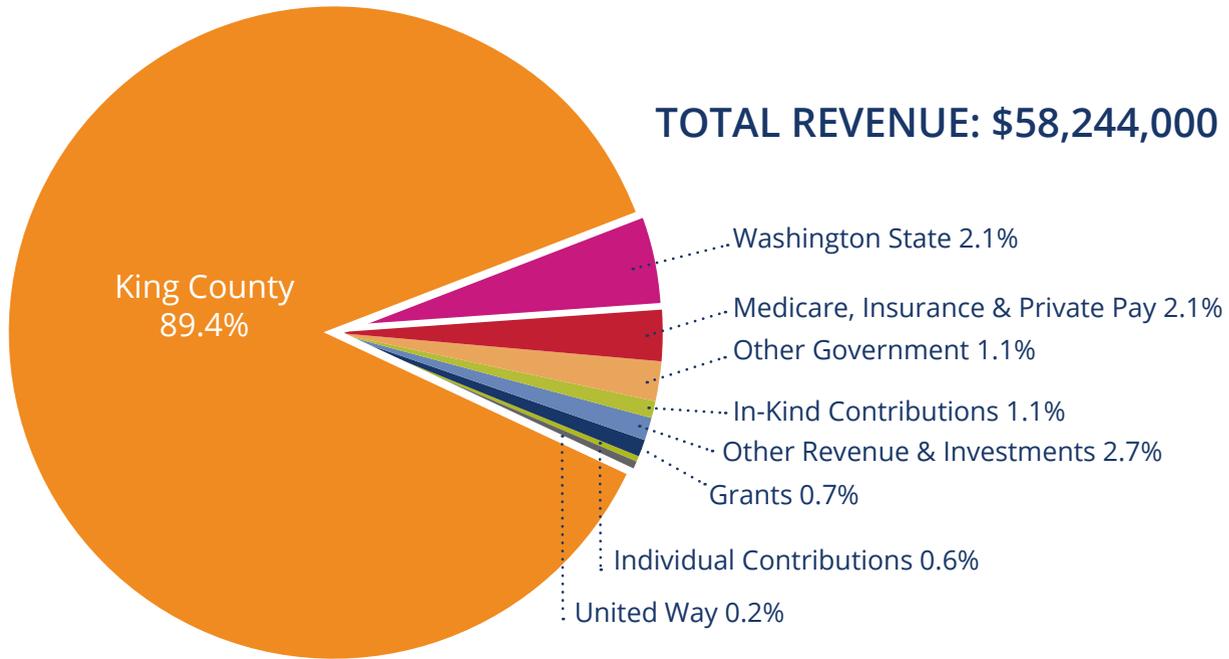
Through personal and professional struggles in the system, Marcia Wharton—doctor, board member and donor—is more motivated than ever to do something to address these issues and offer her support to those organizations aligned with her vision.

"When you look at some of the significant areas that are broken in our society; homelessness, opioid or other drug abuse issues, suicide, homicide...they all begin with undiagnosed or untreated mental health disorders," she says.

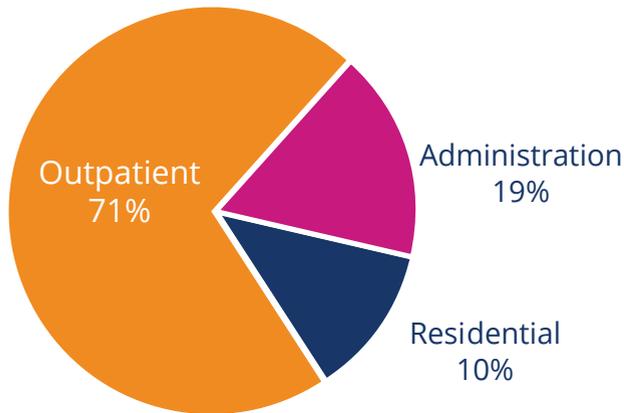
Sound's work, Marcia believes, is especially crucial today.

"Sound directly addresses some of these significant areas of unmet need by offering mental health and chemical dependency treatment, individual and group therapy, social and employment assistance and supportive housing to individuals who suffer from these challenges." ■

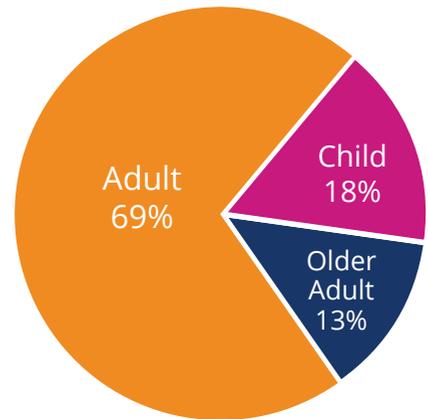
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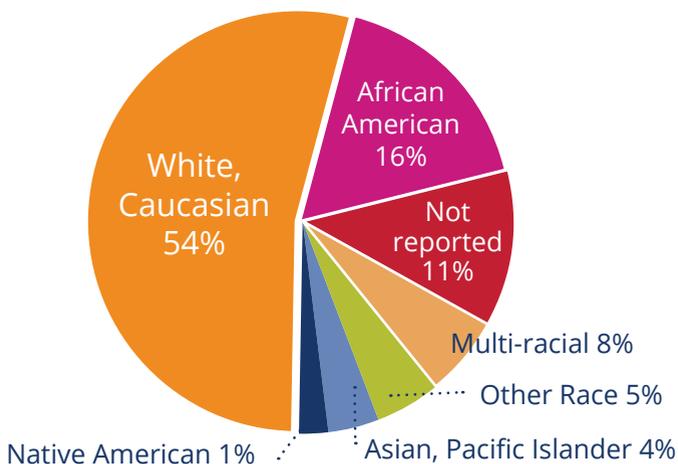
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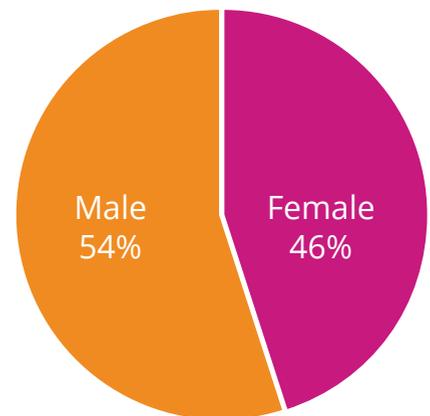
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