

Team Talk



Corporate Quarterly
Newsletter 2017

www.generationsgaither.com



Generations Gaither's Levels of Care



ARTF – Adult Residential Treatment Facility

A Residential Treatment Facility (ARTF) is a licensed 24-hour Facility (although not licensed as a hospital), which offers mental health treatment. The types of treatment vary widely; the major categories are psychoanalytic, psycho educational, behavioral management, group therapies, medication management, and peer-cultural. Settings range from structured ones, resembling psychiatric hospitals, to those that are more like group homes or halfway houses.

ESH –Enhanced Supported Housing Facility

In addition to the description for SH services, members in ESH will require care exceeding support and intervention levels provided in standard Supported Housing. Behavioral health care needs may include mental health and/or substance abuse.

SH – Supported Housing

Supported Housing services refers to services rendered at facilities that are staffed twenty-four (24) hours per day, seven (7) days a week with associated mental health staff supports for individuals who require treatment services and supports in a highly structured setting. These mental health services are for persons with serious and/or persistent mental illnesses (SPMI) and are intended to prepare individuals for more independent living in the community while providing an environment that allows individuals to live in community settings. Given this goal, every effort should be made to place individuals in facilities near their families and other support systems and original areas of residence. Supported Housing services are mental health services and do not include the payment of room and board.

NURSING HOME

Skilled Nursing Home Facility providing twenty-four hour care with emphasis on mental and physical well being through a personalized approach to help each Resident maintain maximum potential independence. Services include: 24 Hour Nursing Care, Physician Visits, Mental Health Nurse Practitioner, Psychiatric Service Visits, Restorative Therapy, Wound Care Management, Social Services, Dietary Consults with Registered Dietitian, Scheduled Activities Daily, Beauty Shop and Transportation.

PERSONAL CARE HOMES

Personal Care Homes (PCH) are residences that provide shelter, meals, supervision and assistance with personal care tasks, typically for older people, or people with physical, behavioral health or cognitive disabilities who are unable to care for themselves, but do not need nursing home or special medical care. While available services vary and are based on individual needs of each resident, services include, but are not limited to, assistance with: administering medications, arranging for and managing health care, walking or getting out of bed, transportation to doctor and other appointments, participating in social/recreational activities, personal hygiene, shopping and care of possessions.

ASSISTED LIVING HOMES

Assisted Living is often viewed as the best of both worlds. Our Residents have as much independence as they want while living in their own private apartment within our community so that they have the support and services they need, while continuing to be as independent and active as possible. Assistance is provided, if needed, with basic ADL's, such as bathing, dressing, med reminders and more. Additional services include three meals daily, plus snacks, activities including social, cultural and spiritual programs, full service beauty/barber shop, weekly house-keeping, personal laundry, as well as scheduled transportation for shopping and various appointments, including medical and doctor appointments is provided.

Mental Health Centers

Outpatient services include psychiatric evaluations and medication management services which allows consumers who are severely mentally ill (adult) or severely emotionally disturbed (child) obtain an adequate supply of necessary medications. Additional services include: Individual Therapy, Group Therapy, Family Therapy, Psychiatric Services, Case Management Services and Education.

All Mental Health Centers' services are provided to Residents of Adult Residential Treatment Facilities, Enhanced Supported Housing Facilities and Supported Housing Facilities.



Generations Gaither's Administrative/Support Staff



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Tracy Holland, I.T. Specialist

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Elizabeth Hoch, Office Manager
Regina Qualls, Activity Director
Terry Dodson, LPN

The Woodlee Trail

Adam Wanamaker, Executive Director
Amy Phillips, Office Manager
Stacie Sellers, Activity Director
Terry Dodson, LPN

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Christopher Rippy, Case Manager
Aaron Knight, LPN
Gloria Cole, Activity Director
Charques Blevins, House Manager

Kristopher Wayne House/Ella Katelyn

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Steven Koller, Case Manager
Samantha Kirk, LPN
Rosa Russell, Activity Director

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Rhiannon Myers, Office Manager
Debbie Hodge, Activity Director
Brittany Halfacre, Case Manager
Stephanie Audas, LPN

Kolton Wayne

Melissa Brown, Executive Director
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Rhiannon Myers, Office Manager
Debbie Hodge, Activity Director
Kathy Shields, House Manager

Generations of Morrison

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Sheila Womack, House Manager
Kayla Maynard, Office Manager. Asst.
Miranda Simmons, Case Manager

Generations of Woodbury

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Jackee Spakes, Office Manager
Samantha Kirk, LPN
LaDella Austin, Case Manager
Star Seiber, Activity Director
Kelsie Willis, House Manager

The Skylar House

Jessica Thacker, Executive Director
Cristy Milner, Office Manager
Jessica Kinnard, LPN
Patricia Nalan, Case Manager
Sarah Presley, Activity Director



Generations Gaither's Administrative/Support Staff



Generations Center of Spencer

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David W. Gaither, V.P. Employee Benefits
Marilyn Burger, Asst. Administrator
Katherine McClendon, Nurse Practitioner
Teresa Cripps, Office Manager
Tracy Farris, Central Supply
Deborah Manus, Dietary Manager
Cathy Corvin, Receptionist
Johnny Walling, Maintenance Supervisor
Tammy Fox, Quality Assurance
Christopher Rippey, Case Manager
Sandra Collins, Activity Director
Rachel Clark, Activities Asst.
Eve Wright, Social Services Director
Christine Howard, RN, Director of Nursing
Bobbi Anderson, Human Resources

Generations of Middlesboro

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David W. Gaither, V.P. Employee Benefits
Elizabeth England, Executive Director
April Wilson, Office Manager
Corey Oslonian, Activity Director

Gaither Suites at West Park, LLC

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Buffy Gaither, Vice President-Regional Administrator
David W. Gaither, V.P. Employee Benefits
Jennifer Gish, Executive Director
Sandra Barnes-Puckett, DRC
Linda Walker, Receptionist / Tour Coordinator
Diana Gage, Activity Director

Maintenance and Construction

Billy Wood, V.P. Maintenance
Shane Pettit
Lester Willis
Danny Bowdoin
Johnny Cantrell
Jason Bracknell



Generations Mental Health Centers



Generations Mental Health Center Morrison

Dr. Sabitha Hudek, Medical Director
Joseph Stotts, Vice President of Clinical Services
Angela Redwine, Executive Director, Therapist
Judy Johnson, LPC-MHSP, Therapist
Daniel Simpkins, Therapist
Cliff Gambrell, LMSW, Therapist
Margie Wood, LPN, Director of Nursing
Dakka Partin, RN
Krista Fleming, Office Manager/Medical Records
Pansy Perrigan, Receptionist/Medical Records
Diane Sanders, Receptionist/Medical Records
Peggy Rayas, Transportation Coordinator
Kristy Jones, Transportation Coordinator
Dave Davis, Child and Adolescent Care Manager
Holly Olsen, Care Manager
Christopher Rippy, Out Patient Case Manager
Jordan LaMasters, Nurse Practitioner
Katherine McLendon, Nurse Practitioner
Karyn Harris, Nurse Practitioner

Generations Mental Health Center of Cookeville

Dr. Sabitha Hudek, M.D. Medical Director
Joseph Stotts, Vice President of Clinical Services
Judy Johnson, LPC-MHSP, Executive Director/Therapist
Kaythi Soe, Nurse Practitioner
Doris Kendall, Therapist
Paige Seymour, Therapist
Abby Cantrell, Care Manager
Kimberly Ledbetter, LPN
Barbara Oakley, Office Manager
Katie Braswell, Receptionist/Medical Records

Generations Mental Health Center of Martin

Dr. Hudek, Medical Director
Dr. Swamy, Medical Director for Children
Joseph Stotts, Vice President of Clinical Services
Kim Terrett, Regional V.P.
Julie Floyd, Nurse Practitioner
Phyllis Taylor, Nurse Practitioner
Nancy Forrester, Medical Records
Stacy Turbyville, Medical Records
Diana Fulcher, Therapist
Jami Ivey, Quality Assurance/Therapist
Valarie Fisher, Community Based Case Manager
Christy Prince, Receptionist
Krystal Sommerville, Care Manager
Terika Taylor, Care Manager
Ashley Shipp, Care Manager

Generations Mental Health Center of Dayton

Erin Yeargan, Nurse Practitioner
Jennifer Woodruff, Executive Director/Therapist
Tabitha Sanders, Care Manager
Melinda Lindkvist, Office Manager
Anita Henderson, RN

Generations Mental Health Center of McKenzie

Dr. Hudek, Medical Director
Dr. Swamy, Medical Director for Children
Joseph Stotts, Vice President of Clinical Services
Kim Terrett, Regional V.P. West TN.
Kyle Chappel, Therapist
Cassie Allen, Receptionist/Medical Records
Leah Lancaster, Case Manager



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406 N. Spring St.
McMinnville, TN 37110

Administrative Building
402 N. Spring St.
McMinnville, TN 37110



Housing Office
104 Walling St.
McMinnville, TN 37110

Human Resources

The Paper Trail

- by: Lisa Sullivan, Director of Human Resources



The First 24 Hours After an Injury

Workers compensation claims can and do affect the bottom line of every organization greatly. Injuries are just inevitable because, let's face it, accidents happen! Injuries occur at every workplace at some point, and it is crucial to respond effectively within the first 24 hours.

The moment an injury occurs, it initiates a sequence of events that can last for weeks or even months. Supervisors play a significant role in the outcome of every claim. When an injury occurs, the supervisor should be notified immediately, and the supervisor should know exactly what to do. First and foremost, the employee should select a physician from the panel unless, of course, it is an emergent situation. The proper paper work should be completed and sent over to the physician's office, accompanying the injured employee. This should include the physician's report of injury as well as the authorizations to release information. Once the injured employee arrives at the physician's office, it is very important for the supervisor to request a drug screen. The results of a drug screen can impact a claim greatly! Another important step is to obtain witness statements from any and every witness to the injury. This step can also greatly impact the outcome and validity of a claim!

The lag time between when an injury occurs and the reporting of that injury has a significant effect on both the time it takes to close the claim and the final cost of the claim. Therefore, if an employee reports an injury, it is best to square it away immediately. Too many times, employees are injured on the job, swear they are okay and do not need medical attention...next thing you know, they visit the ER after working hours for a sprained ankle and, now, the claim is three times more expensive than if they had gone to a physician's office in the first place.

Since time is so valuable to the process, it is important that training is given in advance so employees will not be confused about their responsibilities should an injury occur. For supervisors, training allows them to take a more active role in managing the response and to serve as a guide for injured employees. This means quicker reporting times and better health outcomes!

Training should ensure employees are aware of how to access appropriate care. Employees should be comfortable reporting injuries knowing they will be treated with care and respect. During training, continually reinforce the company's commitment to helping every injured employee heal properly and return to work promptly!

From the moment an injury is first examined, there should be considerations made as to when the employee will be able to return to his or her duties. Return to Work programs tend to result in better health outcomes and preserve many important benefits, such as health coverage, that are contingent on attendance. Return to Work programs also tend to limit claims costs to medical costs only.



The Clinical Corner

V.P. of Clinical Services, Joseph Stotts, LCSW

7 Steps to Breaking Bad Habits

1. **Change your environment.** Certain environments are breeding grounds for certain behaviors. You must consciously change your environment, and document a written plan to ensure your changes are permanent. If you're addicted to food, you may need to get all of the junk food out of your house and create a plan to never purchase it again. If you're in a bad relationship, you may want to create an environment that doesn't include the other person.
2. **Extinguish the initial negative thought.** As soon as a negative thought comes to you, you should say, "Stop", and proceed to think of something positive. Never think about the negative habit again.
3. **Surround yourself with friends who are already what you want to become.** Limit your time with people who aren't what you want to become (e.g. If you want to quit smoking, you can't hang around smokers all day). Some habits may require you to change what movies and television shows you watch.
4. **Schedule a day to jumpstart your new program.** Start this day by spending a few moments meditating and seeing yourself free from the habit. Make an affirmation stating your new intentions; this will help to put you in the right frame of mind for this new life you will be living. During this time you must make the decision to change.
5. **Create a positive habit to replace the negative habit.** An easy example would be substituting exercise for smoking.
6. **Remember to come back to this list and begin again.** You'll have to jumpstart yourself again with a time of meditation and affirmation to help reset your programming.
7. **Remember that you are ultimately in control.** Believe it or not some people do not find this to be a pleasant thought because it means you have the ability to control and be responsible for your actions. However, it should be reassuring to know that you are making your decisions and in the end are responsible for your future, so, choose wisely!



Generations Mental Health Center of Morrison

Angela Redwine, Ph.D., LPC-MHSP
Exec. Dir.



What is One's Purpose in Life?

Sometimes the most in-depth thoughts can be triggered by the simplest of events. A few Sunday's back, I went to the Sunday Matinee and watched the movie *A Dog's Purpose*. I had previously read the book, so I thought that I had a fairly decent idea of what the movie would be about. I knew it would be an emotionally gripping movie at times, but I never could have imagined the questioning that the word PURPOSE would bring to me after seeing the movie. What exactly does the word purpose mean? As I usually do, I try to define the term, before I begin writing the article. The meaning of purpose is the reason for which something is done, or created, or for which something exists. Although simplistic in definition, in life, the meaning of one's purpose can truly be a struggle to define. If we break one's purpose down into categories we can explore areas that include, family, work, or religious beliefs, to name just a few.

In the movie, which was told from the dog's point of view, the dog kept being reborn into multiple situations from that of being an outcast, to being a boy's best friend, to being a working police dog. If we could apply the scenarios to our lives—we could see similarities. In some of the lives, the dog was loved and cherished, while in others, the dog was hated and left out in the cold on a chain for his entire life. In every scenario, the dog looked for the answer to "why am I here?" Have you ever asked yourself that same question--- "why am I here?"

Are we here just to wake up and drudgingly pull ourselves through each day, without spreading any joy or cheer? Are we here to assist and help others, or are we out to get what we can get while leaving others behind? Are we here to lend a helping hand and listen to the concerns of others, or merely let things go in one ear and out the other, as we climb the ladder to what is deemed success? Are we here to enjoy life through whatever we define as activities of enjoyment? I could go on and on with the questions, but I am the first to admit that I do get tired and frustrated with a variety of events in my life. I guess that's being human, but overall, what is my purpose in life? Often we look for excuses for failure, or place the blame on others when we confront problems. Instead, we need to step up and own our behaviors. Yes, we may have been born in a less than perfect situation, or raised in a disruptive family environment. Yes, we may have to struggle daily to pay bills while balancing family and work. We may even feel like crawling back into bed some days and pulling the blanket over our heads while the world keeps turning and life goes on. So it's self-evaluation time again. Ask yourself "What is my purpose? Why was I created and why do I exist?" The answer may be easy to find for some people, while others may have to struggle with the answer, but we all do have a purpose in life. The key is finding, pursuing, and enjoying the purpose of your life.

From all of the staff at Generations Mental Health Center, we hope that all of our fellow employees and clients are doing well. Please let us know how we can help in any means possible, as that is one of our purposes in life.



Generations Mental Health Center of Cookeville



Executive Director
Judy Johnson, LPC-MHSP

The Causes, Effects, Symptoms and Treatment of Emotional and Psychological Trauma Part II

In Part I the discussion focused on identifying a psychological trauma, looking at the causes, and differentiating between stress and trauma. In part II the focus will be looking at why an event can cause an emotionally traumatic response in one person and not in another, and discussion of some of the symptoms of emotional trauma.

Of course there is no clear answer as to why different events cause different responses, however, the following are factors:

- The severity of the event.

- The individual's personal history.

- The larger meaning the event represents for the individual (which may or may not be evident right away).

- Coping skills, values, and beliefs held by the individual.

- The reactions and support from family, friends and/or professionals.

The symptoms of emotional trauma vary greatly. Sometimes these symptomatic responses are delayed for months or even years after the precipitating event. At times individuals may not even associate symptoms with the trauma. The following identified symptoms usually result from more commonplace traumatic events, and particularly if there were earlier, overwhelming life experiences:

PHYSICAL SYMPTOMS: Eating disturbances, sleep disturbances, sexual dysfunction, low energy and chronic unexplained pain.

EMOTIONAL SYMPTOMS: Depression, spontaneous crying, despair and hopelessness, anxiety, panic attacks, fearfulness, compulsive and obsessive behaviors, feeling out of control, irritability, anger, resentment, emotional numbness, withdrawal from normal routine and relationships.

COGNITIVE: Memory lapses (particularly about the trauma), difficulty making decisions, decreased ability to concentrate, and feeling distracted.

The following are additional symptoms of emotional trauma and are generally associated with a more severe precipitating event such as exposure to war, rape, or assault.

RE-EXPERIENCING THE TRAUMA: Intrusive thoughts, flashbacks and/or nightmares, and sudden floods of emotions or images related to the traumatic event.

EMOTIONAL NUMBNESS AND AVOIDANCE: Amnesia, avoidance of situations that resemble the initial event, detachment, depression, guilt feelings, grief reactions, an altered sense of time, increased arousal, hyper-vigilance, jumpiness, an extreme sense of being on guard, overreactions, including sudden unprovoked anger, general anxiety, insomnia, and obsessions with death.

In Part III discussion will focus on the effects of psychological trauma and an overview of current treatment methods. (Information obtained from Santa Barbara Graduate Institute Center for Clinical Studies and Research.)



Generations Mental Health Center of Martin



Kim Terrett

Health and Wellness Tips in the Workplace

Work is not as gruesome as some make it to be. In fact, like other stuff in our lives, we have the choice to work happily or sadly. A few tweaks here and there can make a huge difference in our work place. These days, workplace wellness is quite a hot topic amongst office goers. Workplace wellness does not involve any heavy-duty concepts, but a few age-old concepts that have been slightly tweaked for the modern-day employee.

Here are a few tips that will help you to increase your performance and decrease fatigue at work:

Breakfast: You need to remember that breakfast is the first meal of the day and it needs to be a good one. Your breakfast should be rich in carbohydrates and proteins to perk up your metabolism. Breakfast also reduces work related fatigue and weight gain.

Caffeine: You need to remember that coffee may give you an initial boost for a couple of hours, but like all stimulants, those hours are followed by lethargy and drowsiness. So too much coffee doesn't make you fresh and instead leaves you tired in the long run. Try limiting your coffee to two cups a day and not more.

Individuals with desk jobs have limited exercise resulting in potential back issues. This can be prevented with good posture. So, next time you catch yourself slouching, correct your posture and keep your spine upright and use a chair with a cushion for your back. While standing, remember to balance your weight on both feet and keep the knees bent slightly. Remember to exercise daily.

Working for long hours can be tiring. So, you need to utilize your breaks to the maximum. Try some gentle stretching.

It's not important to have three heavy meals. In fact, the ideal thing is to have six to seven small meals that keep your energy high and lethargy at bay. Have a small snack in the interim and see your energy levels rise.

Finally sleep well and peacefully. Avoid watching violent movies or reading disturbing literature before sleeping!

Remember, you need to enjoy everything you do if you want to lead a good life. Try these little tips and watch work become fun!

<http://www.wellness-in-the-workplace.com/>



Generations Mental Health Center of McKenzie



Kyle Chappel

Generation X Uses Mental Health Care Services Differently

In a paper published in the Journal of Clinical Psychiatry, Beth Han and colleagues describe the use of mental health care services by 3 different generational cohorts over a 5-year period. In particular, these investigators were interested in changes in mental health care utilization during the period 2008 through 2013 in the Silent Generation (those born between 1925 and 1945), baby boomers (1946 through 1964), and Generation X (1965 through 1980).

Han and colleagues used data from almost 275,000 adults who participated in the 2008 through 2013 National Surveys on Drug Use and Health conducted by the Substance Abuse and Mental Health Services Administration. The investigators examined trends in the use of outpatient mental health services and psychotropic medications by individuals with mental illness. During the 5 years of the study, the prevalence of mental illness during the previous 12 months remained stable for each of the three generations: 11 to 12% in the Silent Generation, 17 to 18% in baby boomers, and 21 to 22% in Generation X.

Utilization of mental health services did not change in the Silent Generation during the 5-year study period. In the baby boomer generation, the prevalence of outpatient treatment remained constant, but there was a 28% increase in receipt of psychotropic medications without utilization of mental health care services. In Generation X, the use of mental health care services decreased by 16% while receipt of psychotropic medications without mental health care treatment increased by 34%.

The suggestion that individuals in Generation X receive more psychotropic medications but less psychiatric mental health services is disturbing. Psychotherapeutic approaches, either without or with medications, can be very helpful. Medications, when prescribed appropriately, can aid in the treatment of mood disorders, anxiety disorders, and psychotic disorders. However, psychiatric medications can have significant side effects and patients should be carefully evaluated to determine if they are ill with conditions for which there is evidence that drugs are effective.

A recent trend in mental health care delivery is "integrated care." Although different models of integrated care exist, the essence of this movement involves the integration of mental health care expertise into the primary care setting. This care may involve non-physician mental health specialists interacting with primary care doctors and their patients. Psychiatrists often review patient care with the on-site mental health specialists, talk with primary care doctors as needed, and see patients when informal consultation is not leading to improvement. The intent of this tiered, teamwork approach is to allow appropriate levels of expertise to reach a larger number of patients in need.

Hopefully, as parity laws become fully enforced and as integrated care models are implemented, more individuals will benefit from the expertise of mental health professionals. Often, psychotherapeutic interventions can help patients and may allow for more judicious use of medications.

Han, B., Compton, W.M., Eisenberg, D., Milazzo-Sayre, L., McKeon, R., & Hughes, A. (2016 Jun). J Clin Psychiatry. 77(6):815-824.

Eugene Rubin MD, PhD and Charles Zorumski MD.
www.psychologytoday.com



Generations Mental Health Center of Dayton



The Dayton Mental Health Center is one location where our clients spend a lot of time...waiting. The lobby is equipped with the basics to make the experience more comfortable- such as chairs, a water cooler and a television. Over the last few months, however, we have made an effort to improve the aesthetic value of the center. Today there are framed paintings on the wall, curtains in the windows, artificial trees and plants, scented air freshener, and seasonal décor corresponding to the current holiday. We have added a bookcase filled with games, books, magazines, the Sunday paper, and various drawing supplies for clients to use while they are waiting. Fliers for a local agency offering additional supportive services for outpatients are displayed.

The MHC provides daily clinical services to our clients in the way of medication management, Genesight testing, routine labs, and therapy appointments. Our staff makes an effort to go the extra mile to offer personal encouragement, birthday greetings, holiday cookies, and conversation. One of our clients has always dreamed of being an artist- one area of our clinic has been transformed into an "art gallery" where his work is displayed for everyone to see. Each time the client comes, he walks thoughtfully through his gallery and it just makes his day. Providing clinical services to our clients is always assumed, but we also want to focus on the personal dimension and create an environment where clients begin to feel it is "their" community health center.

Jennifer Woodruff



Team Member Profile

Chris Calatrello

Therapist

Generations of Morrison Mental Health Center

I am Chris Calatrello, and I have worked as a therapist at GMHC Morrison since January 16. I earned my undergraduate from MTSU in journalism/graphic communication and my graduate degree from UT Martin in clinical mental health counseling. Since the 1990s, I have been working, in some capacity, with people who have addiction, disability, mental illness or who have been overwhelmed by their living problems. During the 90s, I worked for the Salvation Army in California and Oregon doing clerical and direct work with drug and alcohol addicted males and runaway children. I later worked as a direct care counselor for a Kentucky Baptist Homes for Children secure facility near Louisville, as well as a Volunteers of America group home at Louisville. Beginning in 2003, I worked for the State of Tennessee in several capacities – juvenile justice case worker, child protective services investigator, vocational evaluator, and adult probation/parole officer. My eight years as a Division of Rehabilitation Services vocational evaluator represent my best and most professionally fulfilling work with the state. As part of my graduate program, I completed a practicum and internship at Senior Advantage, Winchester, assisting on a locked geriatric psychiatry unit. Before coming to GMHC, I worked as a mental health counselor and case manager for another agency in Winchester.

My amazing wife and I have been married 18 years and live in Tullahoma where she works as an elementary school teacher. Everything we know about team sports we owe to our one child, a 9 year old boy, who unlike us, is great at and loves sports. We have no pets because I am horribly allergic to anything with fur or feathers. All of our goldfish have died in short order, so we've stopped trying to keep them. I enjoy reading, writing, drawing, target shooting, flat-water kayaking and canoing, as well as bicycling.



Team Development

Jim Ramsey, Vice President of Resource and Development

All of our houses are really gearing up for summer. This is the time that they start to put together their main fundraisers for the year. We hope that you will participate in some of these fun events, and we will try to keep you informed of dates.

On May the 12th our houses at Morrison will be holding a Golf Tournament at the McMinnville Country Club. Shotgun start 4 man scramble. There will be special hole in one prizes along with closest to the hole and many other prizes for the day. The tournament starts at 12:00. Contact the Generations Morrison at 931-635-2976, or Jim Ramsey 931-607-4304.

On May the 13th Campbell Lodge will host their annual Color Run. A great fun event to be involved in. It will be held at the Civic Center in McMinnville. Contact Campbell Lodge 931-939-5045, or Jim Ramsey at 931-607-4304.

Plans are now in the final stages for a Mental Health Awareness Walk in Cookeville by the Skylar House. We will update the information as it becomes available.

I am planning this year to have a field day for our clients. We will have all types of Olympic type activities such as 40 yard dash, 100 yard dash, Water balloon throw, football throw and kick, Wiffle Ball batting and many more. Our clients will win medals and have a cookout to celebrate.

Thank you for your support in making these events possible. As new things develop we will update our sites, and newsletters.



Robert Coy House and Woodlee Trail

Enhanced Supported Housing

8 Beds



Greetings from Woodlee Trail and Robert Coy! Yes, you read that right and it is not a typo. The facility formally known as the McMinnville House is now the Robert Coy. New name, but the same great staff and residents! Speaking of our staff and residents, we have focused on keeping our SRs busy and motivated. While inside, we have really focused on coping skills this quarter. A coping skill is anything that a Service Recipient can do to aid himself/ herself in dealing with a stressful situation. Coping skills can range from any relaxation technique like counting or deep breathing to the utilization of PRN medications that are available. Coping skills are not only used to aid in agitation, but are also very helpful when dealing with depression as well. This is where our staff comes in. The staff at both facilities will often realize a situation or problem is occurring and will prompt the Service Recipient to utilize his or her coping skills. In some cases, the staff will assist in the SR's coping skills such as taking them for a walk, offering PRN medication, if available, or playing a card game with them. As the Executive Director, I often review existing coping skills with the SRs and discuss ways of implementing new ones. An important thing to remember with coping skills, and I tell all of the SRs this, is coping skills will only meet you half way. Coping skills will allow you to handle your agitation or depression, while the SR's continue to strive to meet their goals. This is why it is important to always try to develop new coping skills and try to improve the ones you already use. I'm proud to say that most of the SRs at Woodlee Trail and the Robert Coy utilize their coping skills effectively to aid them, while continuing to make progress towards their goals.

The unusual weather this year has allowed our SRs the opportunity to do many activities they would otherwise not be able to do outside. One activity that has not changed, however, is our shopping trips. Our SRs enjoy their weekly shopping trips to the Dollar General store, Dollar Tree or Wal-Mart and look forward to them all week. Staff often assists our SRs with making shopping lists and prioritizing their items. Sometimes it is difficult to explain why necessities such as deodorant or shampoo are more important than that king size Snickers bar or box of Honeybuns, but our staff doesn't give up. The Office Manager has weekly reviews with the SRs so they are aware of their financial situation and standing, while the Activity Director is there to encourage the SR to follow through with their shopping lists. Shopping trips are always a much anticipated event. For our residents, it is a great time to interact with the community in which we live.



Adam Wanamaker

Generations Center of Morrison

Supported Housing



Denton - 8 Beds



James Gilbert - 8 Beds



Kirby - 8 Beds



Wood - 8 Beds

Generations of Morrison residents have been very busy over the past months. They were all excited to welcome our new Activities Director, Michaela Maxwell, to our facility. Michaela came in and picked right up with all the Service Recipients, keeping them very active and busy. They have all been enjoying getting out from the facility on walks, riding around and especially going swimming in the indoor heated pool. We have also had multiple fundraisers over the past months, raising over a \$1000.00 to get the year started and we are planning our Four Man Golf Tournament in May. This Tournament is to raise money to build our Service Recipients a pavilion out here in Morrison for recreational purposes. The Service Recipients are very excited about spring and warmer weather being right around the corner. We have so many exciting ideas for the upcoming months and can't wait to get started!!

Delta Jones



Campbell Lodge
16 Beds

Campbell Lodge and Kolton Wayne and Wilma Houses

Adult Residential Treatment House.



Wilma House - 8 Beds



Kolton Wayne House
8 Beds

Just so you know, the Wood House is now the Kolton Wayne House.

Plans are under way! It's COLOR RUN time! Please help us raise money for our client's activities at the Campbell Lodge, Wilma and Kolton Wayne while having a blast in our fourth annual 5K color run. Get covered in color every mile you reach and at the end party complete with refreshments including Dr. Pepper booth the "Sound Machine" and warm up party with our own interpretation of "Richard Simmons". Any fitness level can enter. This run is all about the fun! This run will be held in May, the date is still to be determined. We hope to see you there, you don't want to miss it!

"Everyone enjoys doing the kind of work for which he is best suited." —**Napoleon Hill** "When people go to work, they shouldn't have to leave their hearts at home." —**Betty Bender** "The only way to do great work is to love what you do." —**Steve Jobs**. In March we awarded our employees of the quarter. At the Kolton Wayne House, the employee of the quarter is Shaneeka Pleasant. Shaneeka has been employed for over 2 years. Shaneeka has great attendance and rapport with the clients. Earning employee of the quarter at the Wilma House is Tresta Barnes. Tresta has been employed over 3 years. Tresta has a very kind heart and lots of patience having a special needs child of her own. Lastly employee of the quarter at the Campbell Lodge goes to Shelly Powell. Shelly has been employed for 4 years. Shelly is the peer staff and is very creative. Shelly keeps all the clients busy with activities and exercises. In March all employees were treated to donuts, drinks from sonic and pizza to show appreciation for all they do. Clientele Techs are the heart of our team.

"Never Underestimate the importance of having fun"—**Randy Pausch**. In February our fearless leader (Activities Director), Debbie Hodge was off for 2 weeks after having surgery. In her absence we all pulled together as we always do and kept the fun rolling. However, I must say we all missed Debbie's sense of humor and positive attitude as they are infectious. Over the past 3 months we have been able to increase exercises by walking, since the weather has been so nice. We strive to take clients on off campus outings as much as possible. In the last quarter we have been able to go to the movie theater each month, church services, Bingo with our friends at Raintree nursing home, shopping trips, bowling, out to lunch, Chattanooga Aquarium, Rock Island state park, and had a picnic at Cane Creek Park. We also celebrated Valentine's Day with all the other homes at the annual party. Several in house activities were held as well. In March we welcomed spring with ice cream cones from dairy queen and hot dog roast at our fire pit. Lastly Kickball is back in full swing. Kickball is very competitive at our 3 homes. Clients and staff alike strive for the big win. Kickball games have increased socialization. Several clients that isolate frequently come alive during these games.

The Biggest Loser is coming to the Lodge, Wilma and Kolton Wayne. All clients will be taking part in this competition to improve overall health and fitness. All clients will be competing against each other to become the biggest loser. This will be a 30 day challenge to get healthy. Debbie will be the drill sergeant of this motivational boot camp leading daily exercises. The Biggest Loser will be reward with fifty dollars cash.

Melissa Brown





Harwell - 8 Beds

Generations of Woodbury

Supported Housing



Warren - 8 Beds

Winter has taken a toll on exercising this quarter and we've had to really work at it to keep up with our exercise regimen. With what few days we've had pretty weather, we are still trying to walk, but we've been pushing towards following the exercise videos and staying in-doors. Our Residents have been striving to keep up with working towards being more independent and completing daily living skills without prompting. Our Residents enjoyed the annual Valentines Party, dancing and socializing with the other members with a few even winning some awards. Next months we have a trip to the theater planned as well as trying to organize a trip to the aquarium.

Natina Alexander



The Kristopher Wayne & The Ella Katelyn Houses

Supported Housing

Kristopher Wayne - 8 Beds

Ella Katelyn - 8 Beds



Ella Katelynn and Kristopher Wayne houses have been very busy this month with walking at the mall and visiting the different parks when weather permitted. The clients continue working on their budgeting skills with getting to go shopping monthly at Wal-Mart, Roses, Dollar General and local video stores, and visiting the local coffee shop. We attended our annual Valentine's Day party with all SR's having a great time with several of our SR's winning awards. Next month, we will be working with taking the SR's on grocery shopping trips with letting them be able to learn the prices and budgeting of food items along with budgeting within their income. Our AD has been working hard on fundraisers along with fundraiser ideas for the upcoming months for Ella Katelynn and Kristopher Wayne houses. We have purchased several new games this month with SR's enjoying the games daily. Ella Katelynn and Kristopher Wayne residents are excited about spring time arriving and awaiting the weekly cookouts and fun filled activities. Until next time everyone have a blessed month.

Gen Savage





Jessica Thacker

The Skylar House

Enhanced Supported Housing

14 Beds



It looks as if spring time has finally arrived. Our residents have kicked off this season with a St. Patrick's Day green bowling party. They enjoyed their bowling adventure along with green cupcakes, green punch and so much more green. Of course, Ms. Sarah provided trivia about St. Patrick's Day to keep the wheels turning in the resident's minds.

While finishing up the winter season, our residents have continued to enjoy their indoor activities such as our Mardi Gras parade and party, the Generations Valentine's Day party in McMinnville, and movies. The weekly favorites for our folks has been going to Generations Church to help uplift their spirits, going to the library to do yoga, reading and arts and crafts. Of course we always enjoy getting to go out on the town when we can. Sarah has produced some die hard Predators fans by taking them to Predator Hockey games in Nashville during the hockey season. She has also taken them out to eat, to the Cookeville History Museum to learn about their local surroundings and, of course, shopping to work on budgeting.

Gardening has been slow due to the rainy weather. Mrs. Ellen Wolfe has kept our residents busy with other horticulture activities such as planting indoor plants to enhance the natural beauty of the Skylar House. Sarah built the residents a bench with recycled pallets next to our garden where they can relax and enjoy the outdoors. With the spring season here, we are all looking forward to working with Ellen on the garden and learning how our small efforts can produce good fruits.

Until next time, enjoy this beautiful spring time weather!



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Jennifer Gish

7 Ways to Improve Caregiver Patient Relationship

In order for quality care and healing to take place, the caregiver and the patient must foster a good relationship, no matter how difficult that may be at times. Here are seven steps caregivers and patients can take to improve their relationship and form a genuine bond:

1) Learn to Ask for Help

The caregiver/patient relationship is very intimate and it often involves difficult, confusing or emotionally challenging scenarios. One of the first steps toward high-quality communication and a safe, healing relationship is transparency and the ability to ask for help. This is true for both the patient and the caregiver.

In order to build trust, the patient needs to be able to request help when it is needed, and in order to provide quality care, the caregiver needs to be able to ask the patient for help in understanding something new or clarifying a preference or concern. Asking for help is central to communication and communication, in turn, is central to the rest of the caregiver/patient relationship.

2) Exercise Compassion

A home care environment often entails a severely disabled or wounded person who may not have full command of brain function and capacities such as motor skills, memory and speech. These types of disabilities are difficult and can easily create frustration within both the client and the patient.

Frustration, however, leads to a strained and fractured relationship, which is not appropriate for the home care setting. Instead of allowing frustration to take hold, caregivers and patients alike should seek to exercise compassion. Compassion for self and others allows people to soften their hearts toward another person and get to a place of honest communication.

3) Be Patient

Patients who have suffered a traumatic brain injury often have difficulty with skills like speech and memory. Additionally, since traumatic brain injuries often affect the part of the brain that deals with response to stimuli, risk-taking and adherence to rules, injured people may exhibit less concern for rules and an increased level of risky or downright dangerous behavior.

Patience is the most important virtue a caregiver can have in situations like these. It is important for a caregiver to understand that injured people are not always in complete control of their actions and, with that in mind, to give the person extra time to calm down and make different decisions. This often requires reasoning, positivity and empathy.

...continued on pg. 19



Buffy Gaither

Generations of Spencer

(Acute Skilled Nursing Facility)



April is National Mental Health Month

Generations of Spencer provides a unique blend of physical and mental health services, supporting the aging process. Mental health is essential to overall health and well-being of the aging population and although there is a widespread correspondence between aging and depression, the diagnosis is not a normal part of the process.

Depression is a true and treatable medical condition. Older adults are at an increased risk for experiencing depression due to the onset of other illnesses (such as heart disease or cancer) or among individuals whose functions become limited. At Generations of Spencer, we place emphasis on the holistic approach of care, supporting an individual's life experiences and incorporating the preferences in the plan for treatment. We also incorporate diet, exercise, daily routine habits, fun, and relaxation into the care model for each resident.

There is no sure way to prevent depression; however the following strategies may assist:

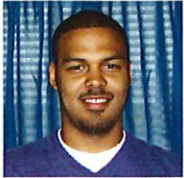
- Take steps to control stress, to increase your resilience and boost your self-esteem.
- Reach out to family and friends, when you're feeling down to maximize your support system.
- Get treatment at the earliest sign of a problem to help prevent depression from worsening.
- Consider getting long-term maintenance treatment to help prevent a relapse of symptoms.

Spencer MVP

Jeff Martin joined our team October 2016 as a janitor. He has been a valuable member of the team, always greeting others with a smile. He is a husband of almost four years, a father and, step father. He enjoys spending his free time with his family. He is a member of a church in Cookeville and delivers papers in the Rocky River area. Jeff Martin has been a good employee and always goes above and beyond.

Generations of Middlesboro

(Personal Care Facility)



Generations Center of Middlesboro is a 64 bed, nonprofit, personal care facility located amid the natural beauty of Middlesboro, Kentucky, and just outside of Tennessee and Virginia.

Corey Oslonian



Gardening for the Soul

What is a weed? A plant whose virtues have never been discovered. Here at Generations of Middlesboro, our ultimate goal is to help our residents discover their strengths, to grow together and live life to their fullest potential. Now that the winter seasons are vanishing and warm weather is approaching, it is very essential for our residents to be outside as much as possible. Not only is gardening good for the soul, it is good for the body. Naturally the body absorbs the UV rays that the sun produces which provides the body with vitamin D. Gardening is a great way to exercise and improve the cardiovascular system and also improves strength which helps physical conditioning that contributes to better mood and anxiety control. Gardening also promotes play, which is social support and is one of the best predictors of good mental health. Enjoying time with friends and loved ones is the best medicine of all. Gardening can also manage stress; another goal is for us to encourage our residents to engage in activities to develop skills to tolerate stress. Ultimately, gardening builds confidence. By seeing their projects grow and flourish that gives them a sense of pride. The residents are really excited to tend and care for their own personal plants so when the flowers get mature enough they can be planted in the garden. Their flowers are representations of themselves, we can feed and nurture ourselves and grow, but when put together we make a beautiful garden. Gardening is where our residents can put their hands in the dirt, heads in the sun, and hearts commune with nature. To nurture a garden is to feed not just on the body, but the soul.

...continued from pg.17

4) Use Encouragement

Encouragement is an underrated soft skill. In addition to motivating patients to behave differently when needed, encouragement also goes a long way toward boosting a patient's self esteem and making him or her feel capable and in charge once more. Additionally, since being encouraging with patients benefits both the caregiver and the individual, it can rapidly increase the fullness of the relationship.

5) Be an Active Listener

Each client has a story to tell and learning to truly listen to that story will quickly foster a bond and encourage increased communication and understanding. Additionally, active listening with clients encourages increased rapport and allows the caregiver to better pick up on potential warning signs.

When having a conversation with a client, make eye contact and turn your body toward the person speaking. Be careful not to interrupt and ask plenty of good questions to ensure that the client feels heard and respected.

6) Do What the Patient Loves

Do you have a patient who loves to read but cannot anymore due to poor vision or impaired brain function? Maybe you have a patient who loves puzzles, scrapbooking or board games. Whatever the case may be, make a concerted and honest effort to engage the patient in these pastimes.

In addition to helping a client feel more involved, whole and capable, these activities can go a long way toward decreasing feelings of distress in a patient and encouraging positive changes in behavior.

7) Practice Respect

Caregivers must have a deep respect for the patient and his or her family. The patient's home is a workplace and must be treated like one. When a caregiver is respectful of a patient's home, belongings and preferences, the patient feels respected in turn, which leads to less distress and an increased feeling of relaxation and comfort. Additionally, practicing constant respect serves to place the patient and the caregiver on the same plane, encouraging increased communication and a deeper relationship.

When practices like empathy, active listening, respect, transparency and patience are exercised, both a patient and a client can find themselves in a deep, caring and safe relationship. In a home care setting, these types of relationships are integral in creating healing and comfort. Although home care relationships can be challenging, at times, both patient and caregiver can take a variety of simple steps toward improving the relationship and creating a lasting bond.



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