



**Letter from Your Interim President ~
Paula Nedlecoff LMFT**

Greetings NCAMHP members,

I am sending you this President greeting from Japan. I will be working here until mid June. I am working on Camp Zama Army Base with middle and high school kids, many whose parent is deployed. It is cold here but we have not had the weather that you and apparently all of California have experienced. What I want to report is again how important it is to have as much involvement as you can give.

I would love to hear from you as members how this group is working for you, what you see as necessary and or not necessary. As a Board, we do not want to take steps in a direction that folks do not want. We do feel that the needs of our NCAMHP community may have changed and we want to work with that change. I know many of us are addressing issues with our clients who are experiencing stress with the ever-changing issues being brought forth by our new administration. I want you all to know how valuable your work is to your clients and to our community. I don't want anyone to feel they are not welcomed to share ways in which this group may give you the support you may desire.

Please let me hear from you. Be sure to watch for information about our Spring General Meeting and up coming trainings. Take good care of yourselves. Remember we put the oxygen mask on first in order to help others.

Paula Nedelcoff MFT
NCAMHP Board Interim President
therapydok@sbcglobal.net



Introduction of Newest NCAMHP Board Member, Lori Davidoff,

As the newest member of the NCAMHP board I'd like to say a quick hello and briefly explain why I'm so excited to be part of our local NCAMHP community. So... hello! My name is Lori and I'm a current MFTI earning intern hours at a local non-profit agency.

Recently, I have found myself describing the process towards becoming a licensed MFT as "a long road". When I first began interning each step was taken with curious trepidation met with unknown variables at every turn. Continuing on my way, I have gained some skills, experience and confidence within the lay of the land. As I progress, difficult moments have become immeasurable learning experiences allowing me to feel into the flow of the art of therapy when working with clients. Moving forward, I feel significantly more equipped for the journey into my new profession as a psychotherapist.

I attribute a large portion of this growth to our northern Humboldt mental health community. I have been greeted with warmth and openness from a majority of the community and that guidance means so much to me. With support and encouragement from my immediate supervisor, fellow practitioners at the non-profit agency and NCAMHP members like you, I have been able to transform dynamically.

For me, this is the essence of NCAMHP. As a group of mental health practitioners we can be available to inform and support one another as we individually and collectively serve the greater community. For years, NCAMHP has fortified local practitioners by bringing in relevant speakers, holding space for round table discussions and encouraging us all to get to know one another's skill sets for appropriate referrals.

I have some new ideas to share with you all this coming year and I hope that you do too. It is my vision to continue upon this journey as part of an inspired symbiotic community characterized by the wisdom and curiosity of new interns and seasoned practitioners. Perhaps together we can make the "long road" (and further) as enjoyable as possible. I look forward to meeting you all.

Sincerely,
Lori Davidoff
Marriage and Family Therapy Intern



The Rewards of Caregiving: Escaping Negative Cycles

The following is excerpted and summarized from the article “The Rewards of Caregiving: Escaping Negative Cycles” by Barry Jacobs and Julia Mayer in the [May/June 2016](#) in the Psychotherapy Networker at:

<https://psychotherapynetworker.org/magazine/article/1017/in-consultation>.

Barry Jacobs, Psy.D, is the Director of Behavioral Sciences for the Crozer-Keystone Family Medicine Residency Program in Springfield, PA. Julia Mayer, Psy.D, has a private practice in Media, PA. They are also the coauthors of AARP Meditations for Caregivers: Practical, Emotional and Spiritual Support for You and Your Family (Da Capo, July 2016).

This article addresses how therapists can support clients who feel anguish and dread about caring for family members with whom they’ve had bad relationships. These clients often feel overburdened by caregiving tasks, unacknowledged by those they’re caring for, and unsupported by family members who take their herculean efforts for granted. If they’ve been previously neglected or abused by the relative they’re now caring for, they feel even more put-upon, entrapped in an intolerable bind, in which they’re being tortuously re-victimized.

Our first job with these clients, of course, is to commiserate with them for making years-long personal and professional sacrifices on behalf of family members they still experience as hurtful. But we do them only limited good if we only reinforce their view of caregiving as an unremitting ordeal. Instead, we need to find ways to identify and highlight how their work can be experienced as positive, even life-enhancing. As therapists, we can promote positive caregiving with clients like in several ways. First, we can help them identify the positive values or meanings behind their conscious choice to serve as a caregiver. After listening to their caregiving stories and validating the challenges they face, we can ask, “Why do you do what you do for your loved one?” Their answers often reflect complex, personal, and spiritual reasons that they’ve never expressed, such as “he always took good care of me,” or “it’s what I believe a good daughter should do,” or “this is my way of doing God’s work in this world.” Whatever reason they give, our role is to offer ourselves as allies for sustaining them as caregivers who uphold those values.

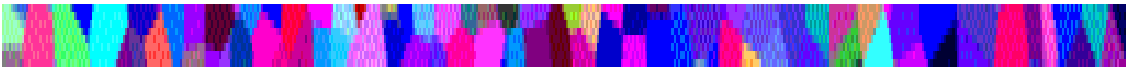
Another strategy is to use what we call prospective retrospection, or “pre-hindsight,” to imagine how they’ll regard their caregiving from some point in time in the future. Specifically, we ask clients, “How do you think you’ll look back at this time in your life five years from now?” It helps to remind them that their current struggles are time-limited, and in the long run they may judge them as ultimately gratifying.

The article uses the example of one client to discuss several methods used to help her gain a longer view on her caregiving. Eventually, this client came to recognize that her old hopes from childhood—to have a more loving connection with her mother—would have to change to fit the current reality, now that her mother was weakened and diminished by illness. Instead, the client began to imagine their relationship as one of two adults: the competent daughter and the failing, if still powerful, mother.

She quickly learned that, if she stopped playing the vulnerable, overeager-to-please daughter, then her mother's rejections would fall flat. Instead, the client found that with compassion but also some emotional distance, the easier it was for her mother to accept her care and stop responding negatively. Over time, these women forged a relationship of mutual respect and even admiration. Her mother allowed her to make decisions about her care, advise her about treatments, and manage her personal affairs.

Another aspect of our therapy with caregivers is to work toward increasing their affect tolerance and discernment. We accomplish this, in part, by teaching them mindfulness skills to observe and accept whatever they're feeling. But we also explicitly tell them that it's normal to have some negative feelings—such as sadness, anger, and anxiety—about caregiving, and that no caregiver need feel guilty about being ambivalent about his or her duties. We acknowledge their past resentments about the care receiver, but we caution them about conflating their old emotions with current frustrations over the rigors of caregiving. We tell them that the present is hard enough without letting the past completely color their current experiences. For the client used as an example, caring for her mother would remain challenging. In therapy, this client admitted to feeling angry, resentful, and frustrated. Predictably, she also felt guilty about having these feelings. She'd believed that caregiving should come from love and dedication and that, because she'd chosen this path, she had no right to her own negative feelings. We worked to differentiate her old resentments from new ones arising from the challenges of her caregiving. And then we focused on how we all have a range of feelings, and that feelings are always acceptable. We worked to observe them, accept them, and let them pass. Then, the client could decide what to do with them.

The client's caregiving years came to an end when her mother died. When this client looks back today on that period in her life, she acknowledges the hurdles she had to overcome and the hours of effort she endured. But mostly, she feels what we hope to foster with all our caregiver clients: immense gratitude. She had the opportunity to forge a new relationship with her mother, one in which she could feel good about herself. In fact, their relationship during that time was better than at any other time in this client's life, and she could feel a sense of competence and confidence that she'd done a difficult task well.



Staying Close to Older Kids – How Special Time Can Work with Pre-Teens and Older Children

The following is excerpted and summarized from the article “Staying Close to Older Kids – How Special Time Can Work with Pre-Teens and Older Children” by Madeleine Winter at: <http://www.handinhandparenting.org/article/staying-close-older-kids-special-time-can-work-pre-teens-older-children/>. Winters is a Parent Coach, certified Hand in Hand Parenting Instructor, and founder, in 2009, of Listening to Children Through Play in Sydney, Australia. She works across Sydney including with culturally diverse communities and families for whom English is not the first language.

By the time children are 10,11,12, the parent/child relationship has history. There will be some communication, which works well and others, which don't work so well. Parents expect more of their older children. But expectations are often dashed, as older children are buffeted by massive brain changes and big hormonal shifts. Older children also have things they would like parents to do, or not do, but they may not be able to express these directly or politely. And teens get a bad rap. In general, our culture has low expectations of them, and a dim view of what they have to offer. While things may not be as easy between parents and their pre-teen, the fact is young people still want and need a deep sense of connection with their parents. Often as children get older, parents are tempted to focus on all the things that are going wrong, not being done, or could be improved. Parents encounter difficulties in their relationship with their older children, and they immediately start worrying: is this a sign of things to come? Will they ever be able to take responsibility for themselves? Are they going to end up screen- or drug-addicted for life?

Research is clear that multitasking, something that is so much a part of parenting, doesn't really work because human minds cannot function well when we are trying to pay attention to a number of things at a time. Winters writes that setting aside “Special Time” is a way to make sure that there is time for parents to give the focused attention their older children needs to build and maintain connection and closeness. Special Time is the regular commitment by an adult to spend time with a young person delighting in doing just what the young person wants. Distractions are put away, parents give their child their full attention, and they do not try to direct the time together or offer judgment or criticism. It is a “trouble free zone,” where parents are careful not to bring up sore topics (although their child may choose to raise them!). It is a powerful way to build emotional safety into parents' relationships with their children. Over time, this safety allows children to feel safe enough to express what is really going on for them, and to ask for help when they

need it. And it buffers and balances the times when parents need to provide necessary corrections if they're pre-teen or teen has gone off-track.

Winters recommends both announcing and timing Special Time, or whatever a family decides to name it. Both parent and young person need to be clear about what it involves: the parent's undivided attention on their child as the young person leads the activity and the parent's enthusiasm for whatever they want to do. With an older child, Winters advises at least 30 minutes, as well as stating ahead of time if there is a limit on going places or spending money. Using announced and timed Special Time helps young people understand it is "protected time" when they can really count fully on their parent's attention. It also helps parents keep their end of the bargain, sticking with them even if they are doing something you don't really want to do. Stating limits -- around time, travel and money-- ahead of time avoids getting caught in a situation where a parent has to say "no" instead of "yes" in Special Time. It also gives the young person a chance to think about how they want to work within these limits, get upset about them, or make an alternative proposal. It may be necessary for a parent to be adaptable and flexible. For example, if there is not enough time this week to travel to the mall and go on a shopping expedition, is that something a parent could find the time to do once every couple of months or so?

As children grow older, they are developmentally at a point where they need to have more control over when and where things happen. Special Time is an opportunity to give a child of any age this kind of control, at least for a while. Older children may choose to control whether, and on what terms Special Time will happen at all. Parents may need to come at it more subtly, and choose times when the young person is free and receptive. In particular, parents need to work out times so that their older children do not have to choose between their parent and their friends. If the offer of Special Time is rebuffed, Winters suggests offering "unannounced Special Time." Parents can still hold to the general principles of Special Time: a time to notice and appreciate their young person, put aside parental concerns and preoccupations, and follow their lead. But a parent might not want to announce it, or draw attention to themselves. A direct offer to connect may pull up the defensiveness, fear of criticism, or a wall of feelings which a pre-teen or teen has had a tight lid on all day. Listening to those feelings is not a bad thing, however, it is also important to figure out times when the young person can tell the parent is really there, not wanting anything from them, quietly interested and appreciative. These are times when a parent can quietly fish for an opportunity to engage. A teen might not take immediate advantage of a parent's unspoken availability. It may look like the young person doesn't notice, but that is still fine. Parents are still making a commitment in their mind and heart to offer their attention, and to trust their young person to take the offer eventually. Every time a parent hangs around, content to be in their teen's presence, they are making it safer for their teen to eventually talk with them about important things.

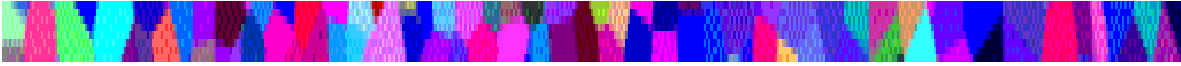
If parents are unable to announce the time as Special Time and therefore have the young person notice that it has happened, it is worth finding ways to gently refer back to these times spent together. Research suggests that we remember what we have paid attention to. Quietly recalling and relishing the time spent together will reinforce it. Deciding to do this is also good for parents. It helps to focus the parents' attention on the connection side of their "relationship bank balance". This will counter the tendency to be preoccupied with things, which tend to damage a sense of connection such as often noting what is wrong or what they have not done.

Developmental brain changes may also mean that a young person may misread parental communication and an offer of Special Time as hostile. As children move toward adolescence, the various parts of their brain start to develop unevenly. The prefrontal cortex, responsible for reasoning, balance and careful consideration of things, is the last to develop. And the limbic brain, in particular, the amygdala, which is involved in fear response, is in overdrive. Research suggests that this can cause teens to misread even neutral cues and facial expressions as hostile. Parents need time to be listened by other adults on developing their best warm, relaxed tone and lining this up with their body language. Parents also will want to be working on how it feels to have their positive overtures met as if they were unfriendly. Younger children offer kisses, cuddles and appreciations of parents, sweet reassurances that they love and want their parents. While research suggests teens both need and want their parents, unfortunately, they are often less and less able to show directly how much parents matter to them. Parents will need emotional support for themselves for the big job of providing the guidance and encouragement your child needs as they navigate adolescence.



Beacon/Partnership Provider Assistance

I had a very helpful phone call with the Beacon/Partnership office that covers Humboldt and nearby counties. Although I'd been told before that I could not see clients anywhere but in my office, she explained that the number I'd been calling was for a group that supports all the Beacon programs in all of California so they do not always have good information about our local Beacon/Partnership coverage. She understood my access issues for a particular client easily. She stated for Beacon/Partnership covered mental health services can be provided at a client's home or school if there are access barriers to office-based services, however there is no travel reimbursement. I also learned that for Beacon/Partnership providers, when there are any questions about member eligibility or benefits we can call the local team: 707-564-6444 or 707-564-6441. I'm sharing this information in case it is helpful to others. Emily Siegel LCSW



Trainings

NCAMHP Events for Spring 2017 are available on the website.

April 20, 2017 Caryn J. Lowe, LCSW will be presenting a 1 hour workshop *A Short Overview of Eye Movement Desensitization and Reprocessing (EMDR)* [flyer here: http://ncamhp.org/General%20Meeting%20Flyer%20042017.pdf](http://ncamhp.org/General%20Meeting%20Flyer%20042017.pdf)

For the Fall 2017, the educational committee wants to provide a workshop on self-harm. If you have any suggestions for presenters regarding the topic of self harm, any other topics you would like the educational committee to research, or any questions, please contact Judy Judge, Educational Coordinator at [\(707\) 443-3384](tel:7074433384) or eduCOORD@ncamhp.org

We appreciate our membership, so help us help you get the most out of your association.

2 Free Autism Spectrum Disorder Trainings from RCRC

There will be 2 free trainings will provide information regarding how to best support clients with Autism Spectrum Disorder and co-occurring mental health disorders. Clinicians will receive the tools needed to provide therapeutic supports for our mutual clients. We're hoping that you can share this training opportunity so that we can build a better more informed community of mental health professionals. The attached flyers have more details, and below is a short summary.

Redwood Coast Regional Center (RCRC) invites you to participate in two free training events on April 26, 2017 presented by Jed Baker, PhD. and sponsored by RCRC's Community Placement Plan funds. These trainings will provide information regarding how to best support clients with Autism Spectrum Disorder AND co-occurring mental health disorders. Clinicians will receive the tools needed to provide therapeutic supports for our mutual clients. RCRC is hoping that you can share this training opportunity so that we can build a better more informed community of mental health professionals.

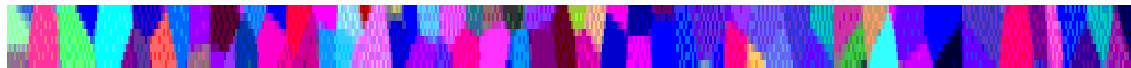
(1) "Managing Frustration and Anxiety and Teaching Social Skills" at Fortuna's River Lodge: 9:00 AM-3:30 PM, 4/26/17 (registration required, CEU's available)

Individuals with ASD, ADHD, anxiety, mood disorders, and learning challenges often present with difficulty regulating feelings. This workshop describes how to best think about difficult moments in order to achieve better outcomes. The first half of the presentation describes how to create prevention plans to reduce debilitating anxiety and frustration. The second part of the presentation details strategies to motivate individuals to learn, ways to teach social skills, how to generalize skills into the natural setting and increase acceptance and tolerance from peers.

(2) "A Clinical Discussion Managing Anxiety, Frustration and Teaching Social Skills: An Application to Your Clients" at Sea Grill Restaurant: 6:00 PM – 8:00 PM 4/26/17 (For clinicians only, registration required, includes free dinner and 2 free CEUs)

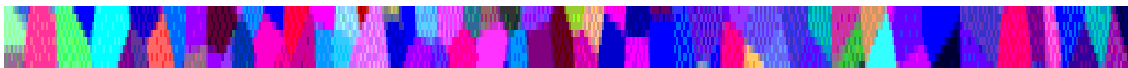
Jed Baker, PhD is the director of the Social Skills Training Project, a private organization serving individuals with autism and social communication problems. He is on the professional advisory board of Autism Today and several other autism organizations. He writes, lectures and provides training internationally on the topic of social skills training and managing challenging behaviors. He is an award winning author and has been featured on several television shows.

Please contact Leah Thompson, CPP Resource Coordinator with questions and to register by 4/20/17 at (707) 445-0893, Ext. 321 or lthompson@redwoodcoastrc.org



NCAMHP Spring General Meeting: April 20, 2017, 5:30 – 8:00 pm

Join your NCAMHP colleagues at the Humboldt Area Foundation 373 Indianola Road, Bayside for the Spring General Meeting on Thursday, April 20, 2017, 5:30 – 8:00 pm. There will be Networking, a brief General Meeting and a delicious, catered dinner by Nourish Bistro and Catering. Dinner is followed by presenter Caryn J. Lowe, LCSW, for a 1 CEU workshop, "A Short Overview of Eye Movement Desensitization and Reprocessing (EMDR)."



Announcements

Local Pain Management Support Services Guide

As part of a "managing pain safely" grant to address the over use of opiates, the Humboldt Independent Practice Association is creating a resource guide to alternative therapies for pain management. There is no charge to be included, and it will be posted online on the IPA's website and also distributed in print to medical providers. We are trying to identify mental health practitioners that specialize in pain management and/or CBT or behavior modification. If you would like to be listed in the guide, please contact Beth Shipley at bethship@yahoo.com or 407-8521

Redwood Coast Village

Redwood Coast Village is a member-run, volunteer-based organization. Members are Humboldt County residents ages 50 and older. Volunteers come from all age groups and walks of life. They coordinate matching members' needs with volunteers' services, disseminate information from member recommendations, and help to ensure high quality in all that we do. Redwood Coast Village is a program of the Area 1 Agency on Aging, a 501c3 organization.

Redwood Coast Village has continued to grow. Volunteer-based services are now being offered Eureka and Trinidad. Outreach to areas in the Eel River Valley will begin in the first half of the year. The most popular requests for services are people are mostly asking for help with rides and home technology. There have also been requests for things like dog walking after an operation and replacing a deadbolt lock. For more information: <http://www.redwoodcoastvillage.org> or call Susan Rosso 442-3763 x 217.



NCAMHP Resources

NCAMHP has an Internet library, located on the NCAMHP website. To submit a paper/article for the library, please contact Caitlin Scofield at: Crs102@humboldt.edu

NCAMHP has a Listserv. It is intended for communication with the NCAMHP general membership. To be added to the Listserv, please email Sarah Haag, PhD at sarahcatherineh@gmail.com. NCAMHP encourages members to join the Listserv. It is a way to have questions answered and get clarification on issues common to NCAMHP members. It is a way to connect with the larger group, and gain access to a wider range of answers to your query. It is also a way to share other interesting information such as resources available for clients.

The listserv can be accessed at: ncamhp@groups.electricembers.net To get started you may wish to access the introduction page at: <http://groups.electricembers.net/lists/help/introduction>

Internet Resources

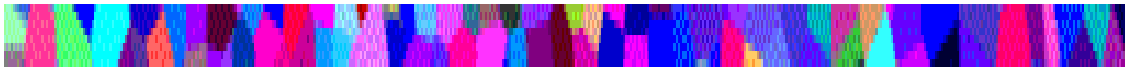
For becoming a Medi-Cal or Medi-Care provider, contact Beacon at: <http://beaconhs.com>. To apply by phone you may contact the California office at: 800 723-8641.

A report has been released by the American Psychiatric Association about growing body of evidence on integrated medical and behavioral health care demonstrates the promise of these models for providing better care, improving patients' health, and lowering health care costs. It is called: "Integrated Primary and Mental Health Care Reconnecting the Brain and Body" and can be found at: <http://psychiatry.org/integratedcare> or archived at: <http://psychiatry.org/practice/professional-interests/integrated-care-reconnecting-the-brain-and-the-body>

A resource for information on acting on Blue Cross claim problems, countering negative online reviews and 12 practice management/billing programs for therapy practices; with links to their websites at: <http://cpapsych.org/displaycommon.cfm?an=18> HYPERLINK "http://cpapsych.org/displaycommon.cfm?an=18&subarticlenbr=47"& HYPERLINK "http://cpapsych.org/displaycommon.cfm?an=18&subarticlenbr=47"subarticlenbr=47

Also for more information about ICD-10 codes, see:

<http://aparacticecentral.org/update>



Job Announcements:

Beacon Health Options is currently seeking a dynamic "Manager, Provider Partnerships" to join our team at our office in Eureka. The Manager, Provider Partnerships (MPP), is primarily responsible for interfacing with a strategic subset of Beacon's network of behavioral health providers. The Manager Provider Partnerships (MPP) is expected to lead analysis of data sets to be able to identify data outliers and opportunities for improvement for individual providers. The MPP will share strategic data with providers to help educate the provider about Beacon's mission and vision. The MPP will be responsible for bringing innovative thinking into the provider community in the region, by identifying high-performing providers who may be interested in new and innovative payment or program models, and then working with those providers to implement the new concepts. The Manager will report to Client Partnerships in the region, with dotted line responsibility to the corporate Provider Partnerships department, where centralized training, coaching, and data analysis reside.

Position Requirements:

- Master's degree in Behavioral Health required,

- Independently licensed behavioral health clinicians strongly considered.
Licensure: Independently licensed behavioral health clinicians strongly considered.
Relevant Work Experience/Knowledge:
- Knowledge of managed care, analytics, performance improvement and clinical skill preferred.
- Strong execution and follow-up skills, analytic skills, organization, and ability to multi-task are key.
- Knowledge of Microsoft Office Suite (Word, Excel, PowerPoint)

For more details about the position and to apply go to :

<http://careers.beaconhealthoptions.com/job/CA-Eureka/MANAGER--PROVIDER-PARTNERSHIPS/J3L3C76PR06R37BDNDF>



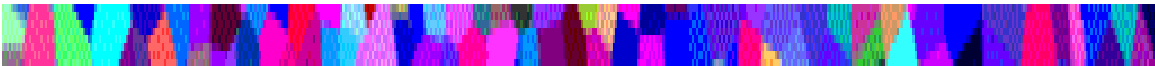
Your Voice is Important! Contribute to This Newsletter!

Contributions are always welcome; anything from a paragraph to a couple of pages would fit well in the newsletter. The deadline for the Fall NCAMHP Newsletter is 9/16/16. Send your articles and announcements to the newsletter committee: emilysiegellcsw@sonic.net

Members may advertise and post announcements for office rentals free of charge via the web at any time:

- Step 1: Go to www.ncamhp.org
- Step 2: Click on Member Login and Login
- Step 3: Click on Member Discussion Board
- Step 4: Choose "Office Rental"

Please give us feedback about this newsletter: emilysiegellcsw@sonic.net



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