

New substance abuse treatment unit planned

Brighton Hospital will break ground this summer for a new 20-bed inpatient adolescent substance abuse treatment unit.

Farmington Hills-based Architectural Resource is designing the building under the direction of Kenneth Czaromski, principal in the firm.

Ivan Harner, the hospital's president, announced the building plans during the facility's observance of National Hospital Week May 8-14.

For 38 years, the hospital has specialized in alcohol and other drug abuse treatment for adults. In eastern Livingston County, the 63-bed

center treats patients from all areas of Michigan and the Midwest.

Because the hospital already serves a large portion of Michigan, nearby states and Ontario, Harner expects that patients for the adolescent unit will come from communities throughout the state and from other areas of the Midwest.

"For the past several years, many parents and community leaders have been asking us to help meet the urgent need for inpatient treatment for youngsters," said Harner in announcing the building plans.

"At the moment there are only a

handful of inpatient facilities in this state for kids who are abusing alcohol and other drugs. In fact, most parents in Michigan are forced to send their children to other states for help," he said.

The hospital began working on plans for the unit almost two years ago, shortly after completing the expansion and extensive renovation of its present facility.

A committee of parents and others with firsthand experience with adolescent treatment programs participated in the planning process. Staff members visited treatment centers in Michigan, Ohio and Minnesota to

gather ideas from other professionals both for the building and the treatment program itself.

Parents whose children had been in inpatient treatment commented on what they liked and did not like about several facilities. Treatment professionals offered practical tips about building and program design.

The study concluded that a new building on the hospital's campus was needed. Treating young people in the same building as adult patients was not considered feasible or desirable because the needs of the two age groups are so different.

To illustrate some of the tough problems involved in treating chemically dependent adolescents, Harner cited a recent study of patients at Hazelden, a treatment facility in Minnesota.

Sixty percent of the center's adolescent patients were reported to have behavior problems. Nearly one-third had learning problems. Sixteen percent had attempted suicide while under the influence of alcohol or other drugs, and 9 percent attempted suicide while not using other drugs. Sixteen percent of the patients reported that they had been physically or sexually abused by a family member, and 15 percent were abused by a non-family member.

The treatment program at Brighton Hospital is still being fine-tuned, said Harner, but will be similar to that used in several other centers. A 42-day program is being developed with heavy emphasis during the first days on assessing individual needs.

The 23,000-square-foot Adolescent Center will be built on the eastern edge of the hospital's 69-acre campus. In addition to a 20-bed residential area, it will include group meeting rooms, a small chapel, classrooms, a dining room, family visiting area, a bookstore, and office

space for the clinical and administrative staff.

A gymnasium and recreation/activity room will be housed in one wing of the building. When younger patients are not using these areas, the hospital will schedule programs for its adult patients.

The building is being designed to accommodate community programs and meetings by self-help groups, such as Alcoholics Anonymous and Al-Anon, that are emphasized in the hospital's treatment program.

A house on the grounds that was formerly occupied by the hospital's founder will be moved and converted into the Family Center. This building will accommodate up to five families at a time with overnight accommodations, a kitchen and meeting rooms.

"Treatment for the entire family is extremely important," Harner said. "The center will make it much easier for family members to participate — especially those who don't live within commuting distance."

The \$2.5 million project will be financed through the sale of tax-exempt bonds and with donations. A formal groundbreaking ceremony is planned for July. Construction is scheduled to be completed in the autumn of 1989.

Mercy Foundation president resigns

Yvonne Gellise, Mercy Health Foundation president, resigned from the Farmington Hills-based Mercy Health Services Board of Directors.

The foundation is a subsidiary of Mercy Health Services.

Sister Gellise will join the executive management team of Catherine McAuley Health Center, Ann Arbor, as vice president of external relations in September. She will continue to serve as chair of the foundation board.

"Sister Gellise has provided sensitive leadership to Mercy Health Foundation as its first president since its inception in 1985," said Edward Connors, Mercy Health Services president.

He commended her efforts in program development, staff recruitment, and education and motivation for governance and management throughout the system.

The turbulence of today's health care environment coupled with our commitment to help the economically poor and underserved emphasize the importance of philanthropy. Philanthropy remains a key strategy for accessing capital," he said.

MERCY HEALTH Foundation (MHF) was organized to support the health care ministry of the Sisters of Mercy-Province of Detroit through organized and ongoing fund development.

The priorities for MHF in the up-

coming year include improving the hospital's capacities for philanthropy in each locale; improving the system's ability for success in foundation grants; and determining the feasibility of a systemwide campaign to generate funds targeted for the economically poor.

"Catherine McAuley, the Sisters of Mercy founder, gave her considerable personal fortune to serve the sick and poor and encouraged others to join her efforts," Sister Gellise said.

Consistent with the ministry of the Sisters of Mercy, this concept of

linking resources to human need has defined the mission of MHF. Michael Mangan, MHF executive director, will continue his leadership role in fund development for the system.

Sister Gellise served as president of St. Joseph Mercy Hospital, Ann Arbor, from 1985 until her appointment as vice president of the Eastern Michigan Region of Sisters of Mercy Health Corporation (SMHC) in 1976. SMHC is the largest subsidiary of Mercy Health Services, with hospital divisions serving people in communities in Michigan, Iowa, Indiana and New York.

CITY OF FARMINGTON NOTICE

PLEASE TAKE NOTICE that there will be a Public Accuracy Test for the Primary Election to be held Tuesday, August 2, 1988. The test will be held on Friday, July 29, 1988 at 3:00 p.m. at Farmington City Hall, 23600 Liberty Street.

JOSEPHINE M. BUSHEY
City Clerk

Published July 28, 1988

CITY OF FARMINGTON NOTICE

NOTICE IS HEREBY GIVEN that the last day to file for absentee ballots to be mailed is Saturday, July 30, 1988, by 2:00 p.m. Thereafter, no ballots can be mailed to voters. The Clerk's Office will be open on Saturday, July 30, 1988, from 8:30 a.m. to 2:00 p.m. to accept applications from qualified voters. For those qualified to vote absentee, application may be made in person for ballots to be voted in the Clerk's Office on Monday, August 1, 1988, until 4:00 p.m. Please call the Clerk's Office at 474-5500 to request application or for additional information.

JOSEPHINE M. BUSHEY
City Clerk

Published July 28, 1988

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