

Treatment for the Seriously Mentally Ill in Northern Arizona

Presented by Terry Vaughan, MD, DFAPA

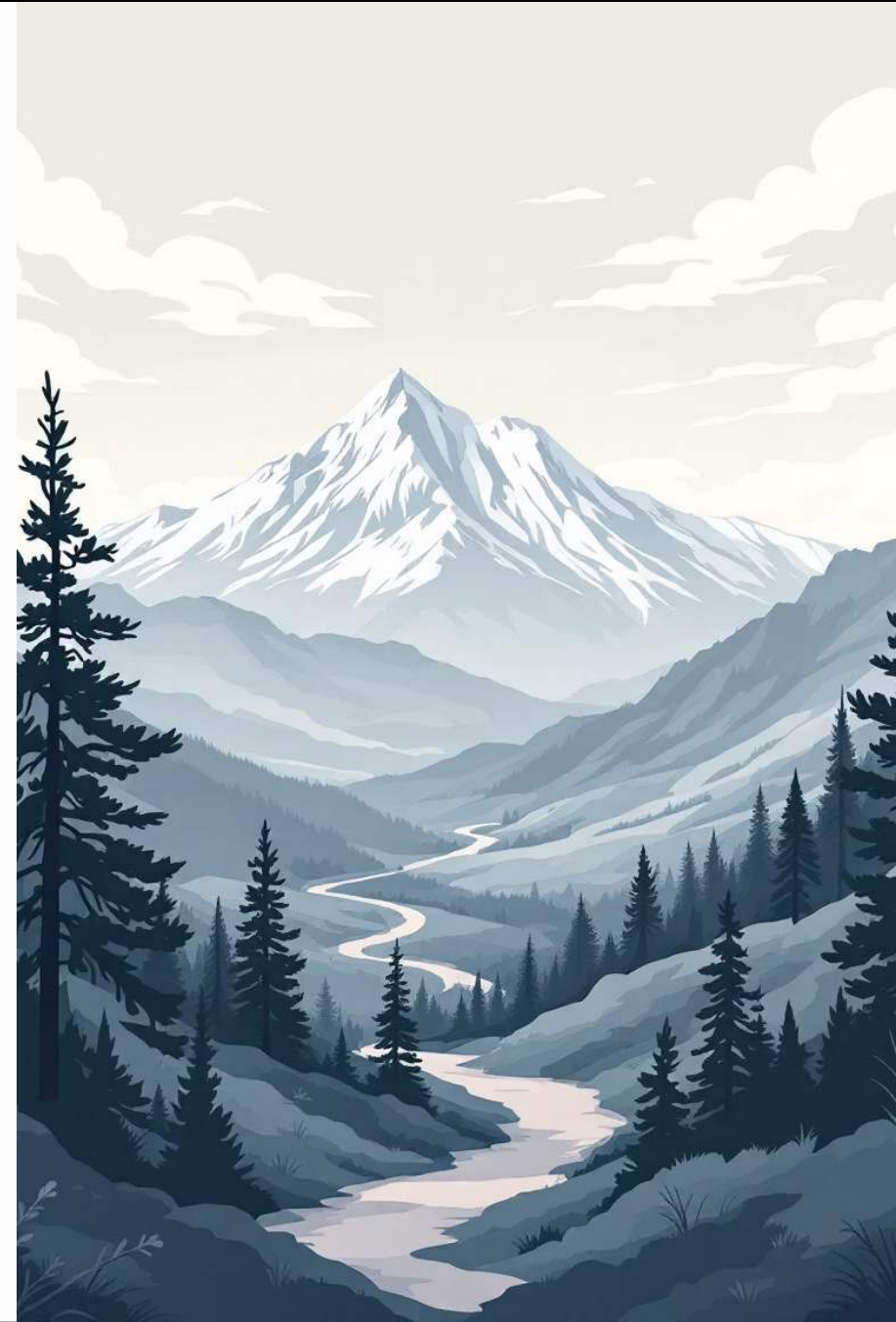
Medical Director, Viewpoint Dual Recovery Center

with Amy Fackrell, JD, MACP

CEO, Viewpoint Dual Recovery Center, CEO Myogenes, Inc.

Association for the Chronically Mentally Ill (ACMI)

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Meet Our Presenters



Terry Vaughan, MD, DFAPA

Dr. Terry Vaughan is a board-certified psychiatrist and addiction medicine specialist with over two decades of clinical leadership. A graduate of Indiana University School of Medicine and Fellow of the American Psychiatric Association, she served as Medical Director at West Yavapai Guidance Clinic, leading a team of 16 providers in delivering comprehensive psychiatric care.

She now also serves as Medical Director of Viewpoint Dual Recovery Center, where her compassionate expertise has guided thousands of patients through recovery. Honored by NAMI as one of America's Exemplary Psychiatrists, Dr. Vaughan is recognized for her clinical excellence and dedication to patient care.



Amy Fackrell, JD, MACP

Amy Fackrell is a visionary entrepreneur transforming the future of mental healthcare. After earning her law degree from Northwestern, she built a successful career in securities litigation before leaving private practice to confront America's mental health crisis. In 2010, she co-founded Viewpoint Dual Recovery Center in Prescott, growing it into a recognized leader for treating complex addictions and co-occurring disorders.

Today, as CEO of Myogenes Inc., she leads breakthroughs in pharmacogenetics and personalized medicine, pioneering solutions for treatment-resistant conditions and reshaping outcomes for vulnerable populations.

Today's Discussion

01

Arizona Mental Health Crisis

Current landscape and workforce challenges

03

Cost-Saving Potential

Financial benefits of residential programs

05

Viewpoint's Approach

Integrated dual recovery model

07

Policy Solutions

Strategic priorities for improvement

02

Northern Arizona SMI Population

Demographics and service needs analysis

04

Treatment Facilities Overview

Current resources in Northern Arizona

06

Family Barriers

Legal and systemic challenges

08

Open Discussion

Questions and collaborative dialogue



Arizona's Mental Health Crisis

10%

Needs Met

Arizona meets only 10% of its
mental health need

47th

National Ranking

Behavioral health workforce
availability

144

Provider Shortage

FTE psychiatrists/prescribers
needed statewide

97%

Urban Concentration

Of psychiatrists practice in urban
areas only

Arizona is growing 1.13% annually—more than double the U.S. median of 0.47%—yet lacks providers trained in treating chronically mentally ill patients.

Northern Arizona SMI Population Profile

Population Size

7,745 individuals with SMI in Northern Arizona (12.3% of state's 62,963 total SMI population)

4.7%

Incarcerated

Demographics

Median age: **51 years**

55% female, 45% male

58% White, 28% Unknown, 9% American Indian

5.5%

Homeless

Financial Impact

\$100M expenditures in Northern Arizona

\$1.13B statewide total

14.7%

Employed

The Economic Case for Residential Treatment



Reduces Costly Hospitalizations

Fewer emergency room visits and inpatient psychiatric stays through preventive residential care



Decreases Homelessness Costs

Supportive housing reduced overall costs by 12% while improving outcomes



Avoids Criminal Justice Expenses

Prevents costly jail and prison stays through proper mental health treatment

- ✔ Crisis residential programs alone saved **\$2.8M annually**. Assertive Community Treatment (ACT) significantly lowers inpatient costs while improving patient outcomes.



Northern Arizona Treatment Resources

—— Polara Health

Comprehensive services including crisis unit, 24-bed hospital, residential programs, and outpatient care across multiple locations

—— Southwest Behavioral & Health

Specialized outpatient programs focusing on community-based mental health treatment and support services

—— Yavapai-Apache Nation Medical

Culturally-informed tribal behavioral health services for Native American communities

—— Spectrum Healthcare

Full-service behavioral health with clinics, crisis response teams, psychiatry services, and therapeutic programs

—— Community Health Center of Yavapai

Integrated primary care and behavioral health counseling services for comprehensive patient care

—— NAZCARE

Peer housing programs, wellness centers, and comprehensive recovery support services throughout the region

Policy Priorities & Breaking Down Barriers

Immediate Policy Actions

- Restore funding for Secure Behavioral Health Residential Facilities
- Expand psychiatric workforce development programs
- Continue residential support for stabilized patients at high relapse risk
- Address 1-4 year waitlists for SMI housing

Family Advocacy Challenges

- **Anosognosia:** 80% of schizophrenia patients lack illness awareness
- **HIPAA barriers:** Conservative interpretation limits family involvement
- **Civil liberties vs. protection:** Balancing patient rights with safety
- **Legal advocacy:** ACLU and DRAZ opposition to involuntary treatment

Supporting families and provider voices in policy debates while prioritizing stability, recovery, and cost-effective system design for Northern Arizona's most vulnerable populations.



Viewpoint Dual Recovery Center

Where Hope Meets Healing. Most programs treat symptoms. We transform lives.

When traditional systems fail, when hospitals become revolving doors, and when families are out of options, that's exactly where we begin. Viewpoint is the bridge between crisis and lasting recovery for adults facing the most complex psychiatric challenges.



Complex Psychiatric Conditions

Specializing in schizophrenia, psychotic disorders, and treatment-resistant cases that others can't handle.



Dual Diagnosis Expertise

Treating severe mental illness and substance use simultaneously with equal precision and expertise.



Families in Crisis

Supporting families who have exhausted traditional options, offering comprehensive integration and advocacy.

01

Phase-Based Healing

3-6 month trauma-informed program for stabilization and transformation, not quick fixes.

02

Medically Grounded

Leading expertise in specialized medications, including in-house Clozapine titration and management.

03

Family-Centered

Integrating families from day one as a clinical necessity for lasting recovery and support.

04

Integrated Support

24/7 residential structure, unlimited individual therapy, and a bridge to long-term community stability.

The Reality Check: We are not a detox center, a crisis facility, or a 30-day program. We are where the system ends, and real recovery begins—a clinically-designed environment where psychiatric recovery actually happens.