

OSH Recovery Times

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Feb. 2006

Oregon State Hospital Grounds

By John Hamilton

The 144 acres of lawn, trees, roadways, hedges and fields that make up the Oregon State Hospital campus have historically been some of the more beautiful areas in Salem. Over the past year the four-member “grounds crew” has focused on three specific tasks to make them even better.

First, we invited a Department of Forestry Community Assistance forester to inspect all the trees on campus. She worked with our grounds foreman, Peter Torossa, and gave suggestions for care of the healthy trees and recommendations for the removal of those that were diseased or presented a danger to people or property. Trees that have to be removed will be replaced.

The second task was to bring the lawns back to their original beauty. Over the last year, Dave Holley, Garage and Grounds Manager, ensured that the lawns were fertilized, aerated, and sprayed for weeds. Irrigation systems were installed in the 34 building front and the 35 build-

ing patient yards. A drainage system was installed in the 50 building west yard to make it more usable during the winter.

Many projects have been completed for the third grounds task to increase the number of plants around campus. Along Bluejay Drive, 2,000 bulbs, including daffodils, tulips and hyacinths, as well as eight Hibiscus trees were planted. Bean’s Nursery of Silverton graciously donated the bulbs and trees. A sprinkler system was installed to water the new plants and trees.

Twenty-six other trees have were planted around the campus last year, and over the holidays, seven trees were placed throughout the campus and decorated with over 7,000 lights.

Projects are scheduled to continue. In the spring, thanks to the Salem Rose Society, new rose bushes will be planted west of the Administration Building.

Thanks to the grounds crew for the work they’ve done and continue to do to beautify our campus.

Special thanks

Hello Groundskeepers. I walk with my owner Paul twice a day on the hospital grounds. He keeps telling me that living for 14 years across the street, the grounds have never looked better. Many new trees have survived since this time they got watered. Also, cutting the dead limbs of the walnut trees, keeping the lawns cut and picking up leaves are big jobs. Now Christmas trees are everywhere you look. My name is Cody and I’m a dog. I’ve been around four years and have only one question: do we really need more trees? It just gives the squirrels more places to hide from me. We had to write to say what a great job you all have done this past year.

-----*Paul and Cody*

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OSH Recovery Times is edited by Jessica Loewen. Contact her at 503-945-2892 with questions, comments or suggestions.

Evidence-Based Practice: Some Answers

By Ted Ficken

What exactly is Evidence-Based Practice (EBP)?

An EBP is a practice that has been tested through research, and has been found to be effective. EBPs have been shown to have positive outcomes for patients, and are cost effective. People who pay for health care are more willing to pay for things that have been proven to work.

Why is the hospital focusing on the implementation of EBPs?

Senate Bill 267 calls for the Department of Human Services, which includes OSH, to spend portions of its mental health and addiction services budget on the implementation of EBPs. The call for the use of more EBPs was also present in the OSH System Expert Review Committee Report (2004). Additional support for the use of EBPs was found in the Governor's Mental Health Task Force Report (2004) and the President's New Freedom Commission on Mental Health Final Report (2003).

Is Oregon the only state that is focusing on EBPs?

No. Efforts to increase the use of EBPs have been national and, in some cases, international in scope. Most mental health and substance abuse disciplines, including psychiatry, psychology, social work, pastoral services, occupational therapy, therapeutic recreation, music therapy, art therapy, and nursing have supported the increased use of EBPs. Professional journals from those disciplines have published information about EBPs.

As a clinician, am I limited to using only EBPs?

No. You are encouraged to use your clinical judgment to provide services to your patients. However, you should consider using EBPs whenever possible. For example, in trying to teach your patients community transition skills, you might use the UCLA Community Transition module. When starting new treatment groups, it may be helpful to look at what is available in that area.

Where is the flexibility and room for creativity with EBPs?

EBPs have been proven effective as developed. However, EBPs can be adapted for use with your patients. You might choose to repeat certain aspects of a curriculum or to skip or modify others. Fidelity means that you have implemented an EBP based how it was designed and that you remain true to the original program. Realistically, you will continue to make adjustments based on the needs of your patients.

Does this mean that we should use only "canned" treatment modules?

As much as possible, we should provide services that have been demonstrated to produce successful outcomes for our patients. There will always be treatment services that have not been researched, are "home grown," have low fidelity with an existing EBP, are experimental, or are more art than science. If you are providing a self-designed treatment service, you should consider collecting outcome data to determine if the service is effective. You might even consider developing a formal research proposal and publishing your results. In addition, any practice can be submitted to the Office of Mental Health and Addiction Services (OMHAS) for review to be placed on the list of approved EBPs. The Quality Improvement (QI) Department will work with individuals to prepare submissions.

For more information about Evidence-Based Practices, you can contact Quality Improvement or go to: <http://www.oregon.gov/DHS/mentalhealth/ebp/main.shtml>

OSH Staff Library

By Carol Snyder

Top five new books for winter 2006

1. *Textbook of Geriatric Psychiatry* by Dan Blazer.
2. *Violence Prediction; Guidelines for the Forensic Practitioner* by Harold Hall.
3. *Cognitive Behavioral Treatment of Sexual Offenders* by William Marshall.
4. *Textbook of Traumatic Brain Injury* by Jonathan M. Silver.
5. *Substance Abuse Treatment for Persons with Co-occurring Disorders*, Substance Abuse and Mental Health Services Administration.

Top five new videos for winter 2006

1. *Adult ADHD: New Perspectives on Diagnosis and Treatment* (2003), 60 minutes.
2. *Depression - Discovery Channel's "Body Invaders" series* (2001), 50 minutes.
3. *Dual Diagnosis - an Integrated Model*, Kenneth Minkoff (2000), 120 minutes.
4. *Inside/Outside - Building a Meaningful Life After the Hospital* (2004), 68 minutes.
5. *One Flew Over the Cuckoo's Nest* (1975), 133 minutes; *The Making of One Flew Over the Cuckoo's Nest* (2002), 47 minutes.

The OSH staff library is located in the Education and Development Department on 40C, Salem Campus. Regular hours are 8:00 a.m. to 5:00 p.m., Monday through Friday, with Librarian Carol Snyder on duty from 11:00 a.m. to 3:00 p.m. daily. All library materials may be requested by phone at (503) 945-2880 or through GroupWise (Snyder, Carol), and these materials may be sent through the hospital mail.

Library resources include books, videos, audiotapes, journals and Internet access. Books may be checked out for one month and videos and audiotapes can be checked out for two weeks. Journals may not be checked out, but the library staff will photocopy articles on request. Books, videos and articles can also be requested from other libraries

February 2006 Calendar

1-28: Governor's State Employees Food Drive

Contact Jessica Loewen:
(503) 945-2892

13: OSH Foundation Board

10:00 a.m.
Callan Room

Contact Jessica Loewen:
(503) 945-2892

15: Diversity Committee

1:30 p.m.
Callan Room

Contact George Bachik:
(503) 945-2860

17: Wellness Committee

8:15 a.m.
Callan Room

Contact Sue Wimmer:
(503) 945-2886

Feb. 20: Presidents' Day

22: General Staff Meeting

2:30 p.m.

30 Building Gym
Contact Pam Dickinson:
(503) 945-2852



Expanded EAP Services Available

By Cheryl Miller

In previous years, DHS has maintained its own contract with Cascade Centers for our Employee Assistance Program (EAP), which has limited benefits based on cost to the agency. This year, DHS joined the Public Employee Benefits Board (PEBB) contract, which provides additional benefits not previously available to DHS employees.

EAP is a great benefit provided by PEBB that can provide assistance to employees and eligible family members in a variety of ways. Employees and family members are encouraged to utilize the resources that will best meet their needs.

Benefits continue to include free counseling sessions, an anonymous information hotline, a listening library, and 24-hour crisis counseling. New benefits include legal and financial consultations, a home ownership program, assistance in locating information related to eldercare, childcare, identity theft, and concierge services, and an interactive Web site. For more information, go to www.cascadecenter.com, or call 1-800-433-2320.

Soldier "Adopted"

By Melissa Pelton

This past holiday season, Carolyn Carter, supervising nurse in Psychiatric Recovery Services (PRS), spearheaded a wonderful activity. She "Adopted a Soldier" for the holidays. With the help of PRS night shift and administration staff, she adopted Spc. Christine Hillman.

Christine sent a note to anysoldier.com, which is a Web site set up for our soldiers overseas. They can send a note to the Web site asking for support from folks back home for their unit. Christine was writing for an Army medical unit based in Baghdad. Her unit consisted of seven soldiers who would be far from home for the holidays.

Upon receiving the holiday packages, Christine sent us a letter thanking us for all of the wonderful items they received. Two large boxes of presents were sent. Donated items ranged from toiletries and snacks, to games, decorations, and other entertaining items.

A huge THANK YOU goes out to Carolyn for taking on this task and bringing it to us, as well as to all of the staff members who donated items for "our soldier."

Employee Recognition

Congratulations to all OSH employees reaching December milestones.

•25 Years of Service•

Wayne Stanley, Physical Plant

•20 Years of Service•

Norma Pruitt, Food Services

•15 Years of Service•

Valerie Aerni, 48C

•10 Years of Service•

Jeanne Dalton, Gero Outreach

Ronald Victor, 50E

•5 Years of Service•

Karissa Audette, Pharmacy

Stephanie Kintner, Rehab Services

Joanna Lehman, 50F

Nancy Wiles, 50D

•Retirement•

Judy Endabl,

Principal Executive Manager D



Parent of OSH Patient Speaks Out

By Jim Sellers

“He’s had opportunities to have treatment on every ward he’s been on,” a father says of his son, a forensic patient at OSH. “Anytime he’s been ready for treatment, he’s had access to it.” The Salem-area man doesn’t want his name used to avoid his son being identified, but he does want it known that he doesn’t agree with the description of OSH that he often reads about in the papers. His opinion has been formed by first-hand experience since he visits his son at OSH multiple times per week and has for nearly five years. “Staff have really worked hard to help him get his act together,” he says of his son. “He’s gone through all sorts of different groups, he has access to AA and Narcotics Anonymous. When he went to the State Hospital, he had a lot of violent behavior. That is no longer a part of his treatment plan.”

He asks rhetorically, “Would we like more programs? Of course. Even Senator Courtney said we just haven’t put the money into the program. (But) I just think that for the amount of money we have, there’s access to treatment and medication.” He says the hospital’s staff who check visitors in and out of the hospital, in both the Communication and Visitor Center, are great. “They bend over backwards to see that family are comfortable when visiting. Just being able to hug your loved ones is something you can’t do if they’re locked away in jail.”

“We’ve seen a lot of growth during the past five years,” he concludes. So much so that his son appears to be ready for a community placement when there’s an opening. “The bottom line is he’s gotten to the point where he’s able to have that opportunity.”

Notes From the AS400 Migration Team

Thanks to the 454 of you who filled out the electronic survey. We’ve learned that “training” and “keeping it simple/easy” are your top answers to the question, “As we migrate to more current technology, what are your top three concerns that the Migration Team needs to keep in mind?” Many others have similarities, and the team will be consolidating those answers for a future issue of the newsletter.

Your comments are posted in the basement of building 33, in the hall outside of the AS400 Migration office. You can add comments that perhaps didn’t occur to you earlier. We love feedback! The team will continue to work on this question, and the other comment questions are in the process of being posted right now.

Welcome

December hires and promotions

Julie Aldous, MH Registered Nurse

Alvina Alexander, MH Therapist 1

John Angus, MH Therapist 2

Lisa Bacilio, Food Service Worker 2

Danielle Bauer, MH Therapist 2

Fawn Cserep, MH Security Tech

Branden Eslinger, MH Therapist 1

Laura Evenbus, MH Therapy Tech

Denis Fiallos, Physician Specialist

Leticia Fleisher, MH Therapist 1

John Gentry, MH Security Tech

Paula Gonzalez, MH Therapy Tech

Debra Harlan, Word Proces. Tech 2

Lawrence Hawkins, MH Therapist 1

Rebecca Heckel, Office Specialist 2

Gwenn Keuscher, MH Therapy Tech

Kathleen Kuntz, Info Systems Spec. 2

Aimee Laney, Word Process. Tech 2

Velinda Mack, MH Therapy Tech

Thu Mai, MH Therapist 1

Luke McColligan, MH Therapy Tech

Jeff McKercher, MH Security Tech

Ruth Peet, MH Therapist 1

Michael Rogers, MH Therapist 1

Euphemia Saryon, MH Therapy Tech

Susanne Schuch, MH Therapy Tech

William Thompson, Cook 2

Bonita Tucker, MH Therapist 1

Brian Walker, Principal Exec.Mgr. D

Davita Wright-Plasker, Office Spec. 2

Family Medical Leave: Frequently Asked Questions

By Becky Hawkins

Confused by complicated Family Medical Leave laws and requirements? You are not alone.

This article is intended to answer some of your frequently asked questions and to provide information regarding recent changes in the SEIU contract allowing employees to retain up to 40 hours of vacation leave under certain qualifying conditions.

What is Family Leave?

The Federal Family Medical Leave Act (FMLA) and the Oregon Family Medical Leave Act (OFLA) were created to protect you as an employee against loss of employment and, in some cases, loss of insurance coverage in the event you must be absent from the workplace due to your own illness or the illness of a family member.

You do not receive “extra” leave but are guaranteed a maximum amount of time off work that is either paid or unpaid, depending upon your leave accruals.

Both FMLA and OFLA apply to state government employees. The State of Oregon is considered “one employer” for the purpose of implementing

these two leave laws. Employees are required to apply for family medical leave for qualifying events, even if you have enough accrued leave time to cover your absence.

How do I qualify for FMLA and/or OFLA?

To qualify for FMLA benefits you must have worked for the state for at least 12 months (it does not have to be consecutively) AND you must have worked 1,250 hours during the 12-month period immediately preceding the beginning of your leave.

To qualify for OFLA benefits you must have worked for 180 calendar days immediately preceding the leave AND you must have worked an average of 25 hours per week during the six-month period immediately preceding the leave (except for parental leave, for which the weekly average is not required).

How long can I be absent from work?

Generally, full-time employees may be absent from the workplace for up to 480 hours (12 weeks) during a consecutive 12-month period due to medical reasons for yourself or a family member.

Part-time employees working 60% or more receive a pro-rated amount of the 480 hours, which is determined by the percentage of time worked.

Part-time employees working less than 60% are not eligible for family leave, except for Parental Leave under OFLA.

Employees who qualify under both FMLA and OFLA will have time away from work deducted from both FMLA and OFLA entitlements simultaneously.

The amount of parental leave to which you are entitled depends upon deductions already made against your FMLA and OFLA entitlements during the past 12 months.

If an employee requires 12 weeks of pregnancy leave (considered as disability leave under FMLA and OFLA), that employee could then take 12 more weeks of parental leave under OFLA.

In addition, if the newborn child became ill, the employee could also take another 12 weeks of leave under OFLA.

“Leave” continued on page 7

“Leave” continued from page 6

What types of absences qualify for FMLA and/or OFLA?

- In-patient care.
- Critical illnesses or injuries diagnosed as terminal or which pose an imminent danger of death.
- Conditions that require “constant” or “continuing” care.
- Permanent or long-term incapacity due to a condition for which treatment may not be effective, such as Alzheimer’s disease, a severe stroke, or terminal stages of a disease.
- Period of Incapacity (“Absence Plus Treatment”): incapacity for more than three consecutive calendar days, which also involves:
 - (a) two or more treatments by the health provider or
 - (b) one treatment followed by a regimen of continuing treatment.
- Absences for chronic conditions.
- Absences for prenatal care.
- Multiple treatments for conditions that, if not, treated would likely result in incapacity of more than three days.

- Absences for pregnancy-related disability.

Absences that generally do not qualify include the common cold, flu, ear aches, upset stomach, routine headaches, sore throat, and routine medical or dental visits.

Who is considered a family member?

Qualifying circumstances under FMLA extend to your spouse; parent; and biological, adopted or foster child (including newborn, newly adopted or newly placed foster child for parental leave). For the purposes of FMLA, children must be 18 years of age or younger.

Qualifying circumstances under OFLA extend to your spouse; same sex domestic partner; parent; parent-in-law; biological, adopted, or foster child (including parental leave for newborn, newly adopted, or newly placed foster child).

In addition, non-serious health conditions of a child requiring home care (sick child leave) is also covered under OFLA.

Grandchildren, unless you were in the position of “loco parentis,” are not considered as a family member under FMLA or OFLA.

Is my Worker’s Compensation (SAIF) claim and/or a modified work schedule counted as FMLA and/or OFLA?

Yes, if the reason for the absence meets the definition of a “serious health condition.” If you are on a SAIF claim which results in modified work and/or a modified work schedule, any hours not worked will be deducted from your FMLA and/or OFLA entitlements.

Am I required to use my accrued leaves while on FMLA and/or OFLA leave?

The state’s policy and collective bargaining agreements require that you use all of your accrued leave, except for accrued comp-time, before being eligible to use leave without pay.

Use of accrued leave, holidays and leave without pay are deducted from an employee’s FMLA and/or OFLA leave entitlements.

An employee can choose to use or not use their accrued comp-time. Use of accrued comp-time is **not** deducted from an employee’s FMLA and/or OFLA entitlements.

“Leave” continued on page 8

“Leave” continued from page 7

Leave time must be taken in the following order: (1) sick leave, (2) vacation leave, and (3) personal business.

Effective Sept. 1, 2005, the SEIU Collective Bargaining Agreement was amended to allow employees to retain up to 40 hours of vacation leave before accessing leave without pay. However, this election may only be utilized under the following criteria:

- The employee’s compensatory time balance does not exceed 40 hours.
- The employee’s compensatory time and retained vacation time do not exceed 40 hours.
- Designation to retain the leave must be made in writing **prior** to the beginning of the qualifying leave.
- Once the designation has been made and approved and the employee is on leave without pay status, the designation will continue for the duration of the leave and cannot be changed.
- Employees electing this designation will **not** be eligible for hardship leave donations.

Who can I contact if I have additional questions?

You can contact Becky Hawkins in the Office of Human Resources at (503) 945-2822.

OSH Governor’s State Employees’ Food Drive Fundraisers

February is food drive month. The Oregon Food Bank distributes emergency food to thousands of families and relies on the Governor’s food drive for a huge portion of that food. The need is greater than ever and many staff are hard at work raising funds for this important cause. Below are several fundraisers that are currently in the works. Look for more to come throughout the month.

What: Book Sale

Where: Sip’n Safari (35 Building)

When: The sale begins Monday, Feb. 6, at 10:00 a.m. and will begin at 7:30 a.m. each day after through the end of the month. The sale will end at 4:00 pm each day.

How to get involved: Donate or purchase books, magazines, videos, CDs. Prices are posted at the sale.

For more information: Contact Linda Marshall at (503) 945-9838

What: Chili Cook-Off

Where: Sip’n Safari (35 Building)

When: Feb. 22 from 11:00 a.m. - 1:00 p.m.

How to get involved: Volunteer to cook chili for the event or come buy some on the 22nd.

For more information: Contact Marilyn Nichols at (503) 945-2859

What: Silent Auction

Where: 50A

When: Feb. 1 through Feb. 24 at 12:00 p.m.

How to get involved: Donate a good or service to be auctioned off, or bid on one of the many items already posted. Some of the items include yard maintenance, lunch with Dr. Fickle, a Yamhill County winery tour, a Thai dinner, gutter cleaning and maintenance, bingo gift certificates, a board game, hand-made blankets and scarves, delicious cakes, CDs, a wild salmon BBQ, a Detroit Lake day cruise, custom jewelry, a beauty basket, Middle Eastern food, a handcrafted cross stitch, and a Sporting News magazine autographed by Tracy “T-Mac” McGrady. More items are being added daily.

For more information: Contact Chris Graham (503) 945-9819