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Governor recommends state hospital sites

Overnor Ted Kulongoski is recommending state-owned sites in Marion and Lane counties as locations to build two new state hospitals to replace Oregon State Hospital in Salem.

The Governor recommended sites that ranked highest, using criteria adopted by a committee of legislators that took public testimony, in a rigorous process followed by DHS and Department of Administrative Services staff.

KMD Architects, the consulting firm with which the state has worked since February 2005, recommended a 620-bed hospital be sited in the Salem or Portland area and a 360-bed hospital in western Oregon south of Linn County.

The recommended northern site is part of the Salem property on which the existing state hospital has operated since 1883. Under the Governor's recommendation, the 620-bed hospital would be built on the south side of Center Street.

Among advantages listed for the Salem site are patient access to public transportation, availability of professional staff and an experienced workforce, state ownership and correct zoning, availability of needed infrastructure and community acceptance. Building on the site also is estimated to be slightly less expensive than building on the second-ranked site, Oregon Department of Corrections-owned property in east Salem.

The recommendation takes into account demolition of buildings on the south side of Center Street, temporary relocation of some patients and staff to the north side of Center Street during construction, and continued provision of food and other essential services.

The southern site is Junction City-area land owned by the Department of Corrections. The 320-bed hospital would be built adjacent to where Corrections intends to build a medium-

or minimum-security prison at a future date. Among the site's advantages are its state ownership, lower development costs resulting from its flat topography, strong local support, access to a partnership with the Oregon Health and Science University, and access to an educated workforce and professional staff.

The two hospitals' capacity would be complemented by a schedule for opening new community placements for patients and projected shortened lengths of

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

Heroes at OSH

By Jessica Loewen Preis

During the month of February, OSH staff became heroes to thousands of hungry Oregonians. In an average month an estimated 194,000 people in Oregon and Clark Co. Wash., ate meals from an emergency food box last year.

This year OSH raised \$14,546.82 or the equivalent of 87,280.92 pounds of food for the Food Bank. Contributions were made in the form of money and food donations and fundraiser participation. Those who agreed to facilitate the donations and/or

fundraisers in their area of the hospital were Lawana Church, Lesley Conahan, Olga Dean, Dan Distler, Lynn Glantz, Chris Graham, Linda Marshall, Kitty Mckiernan, Denny Nash, Stefani Pastoor, Bea Quest, Monte Rice, Cindy Rochetto, Sharon Rome, Brenda Ross, Barbara Strauch, Stephanie Susee and Kirsten Swanson. OSH's substantial contribution to the Food Bank this year is due in large part to their hard work. Thanks also go to Gary Sjolander for hauling our donated food to Marion-Polk Food Share.

This year's fundraisers included a variety of bake sales, a book sale and separate soup and bread, baked potato, chili cook-off, soup and salad and chili and chowder lunches. The single largest fundraiser was again the 50 Building Silent Auction. Staff from all over the hospital donated and bid on a variety of goods and services including delicious home cooking, custom crafts and a variety of outings that sold for a total of \$4,744. On behalf of the hungry people of Oregon, thank you for all of your support.

A job well done

By Nancy Frantz-Geddes

On the morning of Feb. 12, OSH had a surprise visit from DHS' Health Care Licensure and Certification Department. Janelle Pilmer, R.N., a Client Care Surveyor, came to investigate an anonymous patient safety complaint regarding the Jan. 1, 2007, couch fire on 48B. After reviewing our policies and procedures, interviewing staff and touring the unit, Nurse Pilmer has made a preliminary finding that the complaint content is unsubstantiated; the official report will follow. Our documentation review and staff interviews

revealed that OSH has formal, active and well-communicated plans in place for fire safety, building evacuation, emergency notification, security measures and contraband. Nurse Pilmer commented that our hospital staff clearly know how to function in an emergency.

Yet again, OSH has demonstrated its attention to high-quality patient care and well-trained staff who make important differences every day, both individually and collectively. My personal thanks go to Jeff Birkholz, Christie Gallegos, Sue Zakes, Bea Quest and Valerie Anderson for making this survey process go smoothly and efficiently.

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patient stay. Under the timeline proposed to lawmakers, who now will consider the Governor's recommendations, the 620-bed hospital would open in 2011 and the 360-bed hospital in 2013.

For a copy of the OSH Replacement, Site Recommendations report, go to www.governor.oregon.gov/Gov/pdf/letters/osh.pdf. OSH Siting Questions and Answers prepared by DHS can be found at www.oregon.gov/DHS/mentalhealth/osh/main.shtml, and additional information can be found at www.oregon.gov/DHS/mentalhealth/osh/site-recommend/main.shtml.

Evidence-Based Practices update

By Ted Ficken

Where does OSH stand on its goal of implementing Evidence-Based Practices (EBP)? First, some brief background information: Senate Bill 267 requires that certain state agencies demonstrate that a percentage of their clinical budgets are spent on EBPs. An EBP is a clinical practice that has undergone some scientific scrutiny and is found to be effective.

An EBP has produced positive outcomes, has been validated through rigorous research, is transparent (research is readily available), has been standardized, has been replicated and usually has a fidelity instrument (a tool to check if it is implemented correctly). OSH efforts to comply with Senate Bill 267 include the following:

- A meeting with the EBP manager at the Addictions and Mental Health Division (AMH) resulted in an initial goal that each OSH unit would implement at least one EBP.
- ♣ It was decided that all OSH units would implement Relapse Prevention, which helps patients learn skills that will assist them in being more successful in the community and managing their mental illness or substance abuse problems so that they do not require additional hospitalization in the future.
- ♣ Mental health specialists and social workers were trained in the Relapse Prevention and Medication Management modules from the Illness Management and Recovery (IMR) toolkit, available from the Substance Abuse and Mental Health Services Administration (SAMHSA). Psychiatric Rehabilitation training modules from UCLA were also approved as being acceptable EBPs related to relapse prevention. Nicole Wirth and Greg Zurbrugg provided the training.
- All units are now expected to be providing Relapse Prevention to their patients, either through a unit-based group/class or a treatment mall, centralized approach.
- Mental health specialists and social workers have begun to implement these Relapse Prevention groups/classes, and have identified additional

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March Calendar

8th — 2:30 p.m.

Diversity Celebration

African-American Culture

OSH Portland

Contact Griffith: (503) 731-8658

12th — 10:00 a.m. OSH Foundation Meeting

Callan Room Contact Jessica Loewen Preis: (503) 945-2892

14th — 1:00 p.m. Friends of Forensics Meeting

Brooks Room Contact Deborah Howard: (503) 945-7132

16th — 8:15 a.m. Wellness Committee

Callan Room Contact Sue Wimmer: (503) 945-2886

21st — 1:30 p.m. Valuing Diversity Committee

Brooks Room Contact Rebecca A. Sweetland: (503) 945-2806

> 28th — 2:30 p.m. General Staff Meeting

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

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staff members who can be co-leaders. An additional training will be provided for the co-leaders, also to be done by Nicole and Greg. Support meetings for group leaders have also been established.

- ♣ Work areas have implemented other EBPs, beyond the required Relapse Prevention. For example, some units have implemented Motivational Interviewing, 12-Step Facilitation (not to be confused with offering 12-step groups), DBT, the Matrix Model and others.
- ♣ OSH employees have submitted approximately 20 practices for consideration to be placed on a list of AMH approved EBPs. The following have been accepted for inclusion on the list: Music Therapy for Dementia, Prepare/Enrich, Cognitive Retraining, and UCLA psychiatric rehabilitation modules.

The full list of over 100 approved EBPs is available at *www.oregon*. *gov/DHS/mentalhealth/ebp/main.shtml*. Employees who lead treatment groups or classes are encouraged to visit the Web site and to use approved EBPs.

Several trainings on EBPs have been offered through EDD. Jim Mills will be offering additional trainings related to EBPs on an ongoing basis.

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OSH diversity meal

By Heike Tash

On Saturday, March 17, OSH Food Services will be serving a special meal to patients in honor of St. Patrick's Day. It will include corned beef with mustard sauce, mixed carrots, onions and cabbage, colcannon potatoes, apples and shortbread cookies. Legend has it that the ancient Scots baked shortbread in the winter months and put cuts in the shortbread rounds to represent the sun's rays. Perhaps this was some sort of ritual to persuade the sun to return and do away with the cold winter. For more information on this meal, contact Food and Nutrition Services at (503) 945-2915.

Joint Commission update

By Ted Ficken

On Aug. 7-11, 2006, OSH had an unannounced survey, conducted by the Joint Commission (formerly known as the Joint Commission for the Accreditation of Healthcare Organizations or JCAHO).

Following the survey, a final written report was received which contained "requirements for improvement."

A meeting was held to review all of the concerns with individuals who were directly responsible for corrective actions. A corrective action plan was developed and submitted to the Joint Commission in December. The plan is referred to as an Evidence of Compliance, or EOC plan.

On Feb. 21, 2007, we received notification that our EOC plan had been processed, and we have been found to be compliant with the requirements for improvement.

The hospital has been granted conditional accreditation, pending a follow-up survey in approximately four months.

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The follow-up survey will be unannounced, so we will not know the exact date of the survey.

Over the next four months, we will continue to review all of our corrective actions to ensure they were completed and maintained.

We will be sharing additional information so staff members understand what improvements have been made.

The OSH Laboratory will have a Joint Commission survey this summer. Jan Rutherford

and laboratory employees have been busy submitting their application for survey, reviewing lab standards and preparing for the upcoming survey.

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Wellness program support needed

By Ted Ficken

o you participate in OSH Wellness walks or attend yoga classes? Have you indulged in our on-site massage therapy or checked out wellness materials from the staff library? Do you participate in the annual Race for the Cure, Memory Walk, NAMI-Oregon Walk or play on the OSH softball team? Have you participated in the "Weigh the Same" program over the holidays or made use of the onsite health risk assessments?

If you answered yes to any of these questions, then you have benefited from OSH Wellness Committee efforts. The committee is voluntary and meets monthly to discuss, plan and carry out a variety of wellness-related activities. We meet the third Friday of each month at 8:15 a.m. in the Callan Room. New members are always welcome. The committee does not use any state funds to support its activities. Instead, it relies on donations from individual employees, and has established a voluntary payroll deduction option through the First Tech Credit Union (formerly State Employees Credit Union).

How does this work? If you would like to support the Wellness Program, you can fill out a voluntary payroll deduction form (available from Sue Wimmer, Director of Rehabilitation Services and chairperson of the Wellness Committee) and have your contribution automatically go to the wellness account each month. You can contribute any amount—nothing is too small. Imagine if each employee gave just one dollar per month.

How are these funds used? They are used to pay for speakers, posters, books, videotapes, CDs, DVDs, equipment and prizes—all related to the wellness program. Our goal is to have a well-equipped fitness/wellness area for employees (the current designated area is in the basement of the 40 building), so we would like to see the account grow to the point where we have enough to purchase some state-of-the-art fitness equipment. You can help. Contact Sue Wimmer today at (503) 945-2886 or via GroupWise to get a voluntary payroll deduction form.

AS400 migration project update

By Chris Betts

nother month has already come and gone. We are confident March will bring yet more forward momentum toward our goal of decommissioning the AS400 system by early July 2007.

With the requirements-gathering phase fully behind us and development of new database tools now under way in earnest, our efforts to identify, archive and delete user files and other data from the system are in full swing. Specialty printer replacements are moving forward as well with networked printers now in production in the food service area and now being tested for deployment to the pharmacy. The laboratory's label printers will be next.

We have asked for and are getting excellent response from you, our customers, about disposition of old files. The visitor list is now being fully utilized. It needs some fine-tuning, but it seems to be performing quite well. A replacement for the key issue log is in user acceptance testing by Communication Center and Physical Plant staff. System developers at the Human Services Building (HSB) are preparing to soon roll out a Web-based replacement for medical records services to track transcribed documents. All these activities represent excellent progress toward meeting major project milestones.

Diana Marshall, our lead project trainer, has been having excellent attendance rates in classes she has facilitated and is doing a fair amount of business with one-on-one consultations around the campus. Kudos to Diana!

We have some staff changes to report as well. Chris Betts accepted a promotion to project manager in the Children, Adults and Families Self-Sufficiency Reporting unit at HSB effective March 2. Our project support person, Rose Martin, has been reassigned to HSB, but will continue doing project work from there.

Best wishes to all for a rejuvenating spring season and, as always, thank you for your continued support and cooperation with your AS400 Migration Project Team.

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- As new programming is planned, EBPs will be utilized whenever possible. In the Community Reintegration Program, its four areas Supported Employment/Supported Education, Community Transition, Sex Offender Treatment, and Co-Occurring Disorders have all used EBPs in their program planning.
- An EBP (Relapse
 Prevention) Steering
 Committee has been
 formed. It includes George
 Bachik, Ron Glaus, Vern
 Eggiman and Ted Ficken.
 This group is in initial
 discussions about how to
 complete fidelity checks
 of the Relapse Prevention
 groups/classes twice a year.

We will continue our efforts to strengthen the Relapse Prevention groups and classes and to implement additional EBPs in the future.

For more information, please contact Quality Improvement at (503) 945-2857.

Lift every voice

By Jessica Loewen Preis

he Valuing Diversity
Committee (VDC)
would like to
thank all those who
participated in the Lift Every
Voice, Celebrate Black History
Extravaganza and related Black
History Month activities.

More than 60 staff and patients attended the Feb. 28 celebration event held in the Sip n' Safari. All were entertained by poetry and music performed by a variety of very talented staff and patients.

Guest speaker Johnny Lake shared his personal experience as a black man growing up in Tennessee and moving to Oregon in his late teens. He also spoke of the tremendous impact that his "grandmamma" had on him and others as she encouraged him and stressed the importance of education even though she herself was not allowed to attend school beyond the fourth grade. "Black history is about all of our history," Johnny said. He emphasized that building self-worth transcends race or ethnicity.

The ward collages were also displayed and contest winners announced. Portland and Salem

campus wards were encouraged to get creative and put together a ward display honoring black history.

A panel of judges from the activities subcommittee of the VDC judged the entries on Feb. 26. **Wards 35C** and **50J** tied for first place, **50I** received second prize and third went to **50G**.

The judges would like to thank all who entered for their hard work creating both entertaining and educational displays.

Thanks also go to wards 34C, 41A and 48B for creating decorative, informative collages. All three were on display during the Extravaganza.

In addition, staff and patients were welcome to submit an essay. The judges awarded **Jeffery Anderson**, patient on 50E, first prize for his essay entitled "A Day of Reckoning," in which he wrote, "By means of hope known as the Underground Railroad and people's kindness, slaves were eventually freed."

Ginger Lett of 50J received second prize for her entry about Oprah Winfrey. **Tony Walsborn** of 35C and **Cerrie Tuski** of

50I both received honorable mention. Cerrie wrote about Ethiopia and Tony submitted an original poem.

Melissa Poteet from the lab and Ashley Eason from the Community Reintegration Supported Education Program tied for first place in the staff contest. Melissa wrote about Dr. Daniel Hale Williams, the first open heart surgeon and Ashley about Sojourner Truth, an anti-slavery activist.

Clemintene Benjamin and Joanne Trzcinski deserve recognition as well for organizing and coordinating the Black History Month Extravaganza. It would not have happened without their dedication and enthusiasm.

Staff and patients are welcome to attend VDC meetings and to help plan upcoming activities. The next meeting will be March 21 at 1:30 p.m. in the Brooks Conference Room.

Please contact Rebecca A. Sweetland at (503) 932-8835 for more information.

EDD schedule

The following is a list of classes being offered at the OSH Education and Development Department (EDD) during the remainder of March. All classes are located at EDD unless otherwise noted. For more information, please call (503) 945-2875.

Healthy Emotions II

March 6 or 13, 8 a.m. – 12 p.m.

Pro-ACT Refresher Training

March 6, 8 a.m. – 5 p.m. and *March 7,* 8 a.m. – 12 p.m.

Medication Aide

March 6 and 7 or March 13 and 14 or March 20 and 21 or March 27 and 28 8 a.m. – 5 p.m.

Pro-ACT Refresher Training

March 8, 8 a.m. – 5 p.m. and *March 9, 8 a.m.* – 12 p.m.

Co-Occuring Disorders

March 8 or 15, 10 a.m. – 3 p.m.

Evidence-Based Practice

March 9 or 16, 10 a.m. – 3 p.m.

General Orientation

March 12 – 23, 8 a.m. – 5 p.m.

Ed Day

March 13 or 27, 8 a.m. – 5 p.m.

Pro-ACT Refresher Training

March 20, 8 a.m. – 5 p.m. and *March 21*, 8 a.m. – 12 p.m.

Pro-ACT Refresher Training

March 22, 8 a.m. – 5 p.m. and *March 23*, 8 a.m. – 12 p.m.

Solution-Focused Brief Therapy

March 23 or 30, 10 a.m. − 3 p.m.

General Orientation

March 26 – 30 and *April 2-6* 8 a.m. – 5 p.m.

Pro-ACT Refresher Training

March 27, 8 a.m. – 5 p.m. and *March 28,* 8 a.m. – 12 p.m.

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Finally, OSH will be required to submit Periodic Performance Reviews (PPR), for both the hospital and the laboratory, to the Joint Commission in August. The PPR is a self-assessment of our compliance with all Joint Commission standards. A software program, Accreditation Manager Plus, is used to complete the self-assessment. Point people have been assigned to monitor every Joint Commission standard and to enter compliance ratings into this software.