



Oregon Department of Human Services  
Addictions and Mental Health Division

**Psychiatric Nurse Workforce Development  
Team Report**

June 6, 2008

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# **Psychiatric Nurse Workforce Development Team Report June 2008**

## **Introduction**

In November 2006 the Addictions and Mental Health Division (AMH) of the Oregon Department of Human Services (DHS) created the Psychiatric Nurse Workforce Development Team. The team was charged with identifying barriers to developing a strong psychiatric nurse workforce in Oregon. The charge included making recommendations to increase the number of psychiatric nurses practicing in Oregon's state hospital and community-based treatment settings. This report summarizes the team's findings and recommendations.

## **What Psychiatric Nurses Do**

Psychiatric nurses are the treatment backbone in psychiatric hospitals and community-based treatment settings. They provide therapeutic contact time with patients and play a key role in their recovery.

Psychiatric nurses specialize in the prevention, diagnosis, and treatment of mental, addictive and emotional disorders. Depending upon licensure and certification levels psychiatric nurses may be trained in the following areas:

- Biological and psychological principles of mental health and illness;
- Diagnostic classification systems;
- Psychotherapeutic modalities
- Diagnosis of substance abuse and dual diagnosis;
- Care of populations at risk and identified;
- Cultural and spiritual implications of nursing care;
- Family of dynamics in mental health and illness;
- Psychopharmacology; and
- Legal and technical requirements specific to identification and treatment of people with mental illness.
- Teaching principles of wellness and recovery

Psychiatric nurses make comprehensive health and social assessments; provide evidence-based interventions; administer and monitor medication; coordinate relevant resources for clients and families; and foster interdisciplinary collaboration.

## Identifying The Barriers

Oregon, like other states in the nation, is faced with a critical shortage of nurses in general and an even more critical shortage of psychiatric nurses. According to the U.S. General Accounting Office, the Honor Society of Nursing and others, the nationwide shortage is largely caused by:

- A steep growth in the population requiring nursing and other health services;
- A diminishing pipeline of new students entering nursing and historically low numbers who choose psychiatric nursing in particular; and
- An aging nursing workforce.

According to the Oregon Center for Nursing (OCN), **Oregon's shortage is due to a shortage of educational opportunities rather than a shortage of nurse applicants.** The center estimates that in 2006 there were six applicants for each available placement. The center predicts that this ratio will increase because of the number of nurse educators expected to retire in coming years.

Oregon's shortage of psychiatric nurses is further exacerbated by the fact that relatively few nurses specialize in mental health. According to the Oregon State Board of Nursing only 16 percent of licensed nurses specialized in mental health treatment in 2004. Of that number, only 5 percent went to work in public agencies. Furthermore, only 3 percent became psychiatric nurses.

Oregon has 15 associate degree programs for registered nurses and six baccalaureate degree programs. Acceptance into Oregon's nursing schools is highly competitive. Oregon's investment in higher education has suffered in recent years. The OCN reports that dwindling staffing, technical and clinical resources that limit educational opportunities have forced Oregon's nursing schools to turn away five qualified applicants (up from 2 in 2005) for every one applicant admitted. An insufficient training and clinical opportunity specific to patients with mental health needs further contributes to the shortage of psychiatric nurses.

The OCN predicts that 15 percent of community college nursing faculty and 23 percent of baccalaureate program faculty are expected to retire within the next five years. Further, nurses who want to become nurse educators must accept a significant decrease in pay, as much as one third a year less, to move from active nursing to teaching.

Practicing nurses are expected to retire in record numbers in the next few years. The OCN reports that in 2004 nearly half of Oregon's licensed registered nurses were 50 years or older. The center estimates that 41 percent of the state's registered licensed nurses will retire by 2025.

Younger nurses are leaving for reasons unrelated to retirement. The OCN reports that 17 percent of nurses ages 20-49 plan to leave the state and another 10 percent plan to leave the profession altogether. Nurses' report leaving the field for the following reasons:

- An inability to provide enough direct patient care due to non-nursing job requirements;
- A work environment that is unsafe, ineffective, and not supportive;
- A lack of collegiality and mutual respect among team members;
- Insufficient compensation; and
- Inadequate career advancement opportunities.

### **Immediate Effects of Oregon's Shortage**

The generally accepted inpatient staffing pattern for psychiatric nurses is one nurse for every five or six patients. The current ratio at Oregon State Hospital (OSH) ranges from one nurse for every 18 to 42 patients. The hospital's vacancy rate for psychiatric nurses generally ranges from 15-20 percent compared with a 4 percent vacancy rate in community hospitals ("Update on Nursing Workforce," Oregon Center for Nursing, October 2004). Staffing shortages often are filled using overtime and/or local contract nursing agencies, practices that further strain state budgets.

In January 2008 the U.S. Department of Justice delivered its 2006 review of conditions and practices at the Salem and Portland campuses of OSH to the Oregon DHS. The USDOJ claimed deficiencies in the following five areas, all of which are related to the facilities' supply of psychiatric nurses:

- Adequately protecting patients from harm;
- Providing appropriate psychiatric and psychological care and treatment;
- Use of seclusion and restraints;
- Providing adequate nursing care, and
- Providing discharge planning to ensure placement in the most integrated settings.

Oregon State Hospital's Continuous Improvement Plan developed well in advance of the USDOJ report, is addressing each of these areas and will benefit from additional nursing staff to fully complete all goals over the next several years.

### **Addressing The Problem**

The Oregon Department of Human Services, the Addictions and Mental Health Division, their legislative and community partners, and the OCN are among those who have worked vigorously to improve mental health services for all Oregonians.

Plans to replace the crowded and aging OSH in Salem include building a 620-bed state facility in Salem, a 360-bed facility in Junction City and at least two 16-bed facilities east of the Cascades. The commitment to community-based mental health care means serving people where they live, where they are closer to family and other support systems, and where the supports will be more cost-effective.

The Division expects to approximately double the number of registered nurses from the current and adding about 200 new Certified Nursing Assistants (CNAs) in order to meet the requirements of the Oregon State Hospital's Continuous Improvement Plan and staff the new facilities. It will require considerable effort for the agency to meet these staffing requirements that are for the new inpatient facilities in addition to new community programs that will come on-line during same time period.

The situation at OSH reflects state trends. The average nurse age is 50 and the average service is 9.7 years. Building new state-of-the-art psychiatric facilities will improve patient care, as well as help in the recruitment and retention of nursing staff by offering a safer, more efficient and effective care environment.

### **Recommendations**

The statewide nurse shortage is occurring just as the demand for nurses is growing. As Oregon's population both increases and ages, the need for nurses will increase. The OCN estimates that employment opportunities will increase by 26 percent between 2005 and 2012. These projections do not take into account the state's need to hire additional psychiatric nurses to appropriately staff two new state psychiatric facilities scheduled to open in 2011 and 2013.

The following recommendations, developed by the Psychiatric Nurse Workforce Development Team, are intended to guide the DHS recruit and retain qualified nurses despite the competing forces described throughout this report.

## Area I: Training and Education

<b>Goal</b>	<b>Agencies</b>	<b>Responsible</b>	<b>Actions</b>	<b>Timelines</b>
Expand 18-month RN training to include more participants & geographic areas.	<ul style="list-style-type: none"> <li>•OSH •BMRC</li> <li>•Schools</li> <li>•Stakeholders</li> <li>•OCN •ONLC</li> <li>Education Comm.</li> </ul>	<ul style="list-style-type: none"> <li>•Chris Wilson and Nancy Stephen or</li> <li>•Nancy Frantz-Geddes</li> <li>•Hospital training staff</li> </ul>	Action plan under development at OSH	Present to 2009
Support expansion of nursing programs statewide & advocate for inclusion of dedicated education units in psychiatric mental health nursing.	Same as above		Action plan under development at OSH	Present to 2009
Provide community-based continuing education in psychiatric nursing.	Same as above		Action plan under development at OSH	Present to 2009
Participate in LPN TF, which is working on building education capacity for LPNs in Oregon.	Same as above		Action plan under development at OSH	Present to 2009
Develop a psychiatric nurse specialty consortium with training schools & other employers.	Same as above		Action plan under development at OSH	Present to 2009
Expand clinical opportunities for nursing students in all aspects of mental health care.	Same as above		Action plan under development at OSH	Present to 2009
Develop opportunities at state facilities for clinical & post-	<ul style="list-style-type: none"> <li>•OSH •BMRC</li> <li>•Nursing Schools</li> </ul>	<ul style="list-style-type: none"> <li>•Roy Orr •Kerry Kelly</li> <li>•DHS Training</li> </ul>	<ul style="list-style-type: none"> <li>•Add training capacity</li> <li>•Join Student MAX</li> </ul>	Present to 2009



<b>Goal</b>	<b>Agencies</b>	<b>Responsible</b>	<b>Actions</b>	<b>Timelines</b>
graduate experience, fellowships, internship & degrees.	<ul style="list-style-type: none"> <li>•Supt. Of Education</li> <li>•OHWI</li> <li>•Stakeholders</li> </ul>	Manager <ul style="list-style-type: none"> <li>•OSH Training Manager</li> <li>•Nancy Stephens</li> <li>•Jo Isgrigg</li> </ul>	Connection for increased student nurse placements. <ul style="list-style-type: none"> <li>•Increase nurse educators.</li> <li>•Schools to exchange course credit.</li> <li>•Update curriculum to include EBPs.</li> </ul>	
Identify opportunities for mental & behavioral health care training programs within the Dept. of Community Colleges and Workforce Development's [CCWD] Healthcare Workforce Initiative [HWI] (POP) for distance and distributed education.	AMH	<ul style="list-style-type: none"> <li>•Bob Nikkel</li> <li>•Shawn Clark</li> </ul>	<ul style="list-style-type: none"> <li>•Work with Oregon Healthcare Workforce Institute [OHWI] to convene meetings with CCWD's HWI representatives.</li> </ul>	<ul style="list-style-type: none"> <li>•Initial introduction meeting held 3/2008.</li> <li>•Follow-up meeting May 1, 2008.</li> </ul>
Support Education Enterprise Initiative.	<ul style="list-style-type: none"> <li>•OHWI</li> <li>•OCN Healthcare Career Pathways Initiative</li> <li>•Stakeholders</li> <li>•Pathways Initiative</li> </ul>	<ul style="list-style-type: none"> <li>•Sherry Whitehead</li> <li>•Jo Isgrigg</li> <li>•Kris Campbell</li> <li>•Mimi Maduro</li> </ul>		Present to 2009 and beyond

## **Area II: Recruitment**

<b>Goal</b>	<b>Agencies</b>	<b>Responsible</b>	<b>Actions</b>	<b>Timelines</b>
Develop internships for	•OSH Admin.	•Roy Orr	•Grant Writing	Present to 2009

<b>Goal</b>	<b>Agencies</b>	<b>Responsible</b>	<b>Actions</b>	<b>Timelines</b>
current state hospital employees (focus on areas of interest)	<ul style="list-style-type: none"> <li>•OSH Replacement Project Unit</li> <li>•Union</li> <li>•Schools</li> <li>•Stakeholders</li> </ul>	<ul style="list-style-type: none"> <li>•Kerry Kelly</li> </ul>	<ul style="list-style-type: none"> <li>•Policy Option Package Budget</li> </ul>	
Upgrade compensation package including wages & retirement benefits.	<ul style="list-style-type: none"> <li>•DAS</li> <li>•Union</li> <li>•Legislature</li> <li>•Stakeholders</li> </ul>	<ul style="list-style-type: none"> <li>•Bob Nikkel &amp; assigned staff</li> <li>•Nancy Frantz-Geddes</li> </ul>	<ul style="list-style-type: none"> <li>•Develop budget proposal/POP</li> <li>•Analyze return on investment for using traveling nurses.</li> <li>•Bob N. to meet with OHWI Director and OCN ED to develop shared proposal.</li> <li>•Engage DAS early in process.</li> </ul>	<ul style="list-style-type: none"> <li>•Now-Ongoing: advocacy; next contract negotiation.</li> <li>•Implement SB4 policy changes – PERS relief &amp; the ability to offer benefits to part-time employees.</li> </ul> <p>Summer 2008</p>
Develop & implement recruiting strategies including “marketing” plan.	<ul style="list-style-type: none"> <li>•DHS HR and Communications</li> <li>•OSH Nursing staff &amp; WDU.</li> <li>•Stakeholders</li> </ul>	<ul style="list-style-type: none"> <li>•Cheryl Miller</li> <li>•Nancy Frantz-Geddes</li> <li>•Nancy Stephen</li> <li>•Chris Wilson</li> </ul>	<ul style="list-style-type: none"> <li>•Design psychiatric nurse website, perhaps with OCN.</li> <li>•Strengthen ties to nursing schools.</li> <li>•Attend nurse career fairs.</li> <li>•Advertise in appropriate journals.</li> <li>•Initiate outreach to</li> </ul>	<ul style="list-style-type: none"> <li>•1st Mtg. Feb. 2008</li> <li>•Site-up April 2008</li> <li>•Meeting in Winter 2008</li> <li>•Follow-up ongoing</li> </ul>

<b>Goal</b>	<b>Agencies</b>	<b>Responsible</b>	<b>Actions</b>	<b>Timelines</b>
			states with adequate nurse pools.	
<ul style="list-style-type: none"> <li>•Provide outreach to high school health education classes.</li> <li>•Focus on underserved populations.</li> </ul>	<ul style="list-style-type: none"> <li>•AMH/OSH &amp; BMRC</li> <li>•Consumers</li> <li>•Interested Schools</li> </ul>	<ul style="list-style-type: none"> <li>•Shawn Clark</li> </ul>		Present to 2009
Develop incentive programs for new recruits to train, then work for AMH.	<ul style="list-style-type: none"> <li>•DHS - AMH, PH, &amp; HR</li> <li>•Legislature</li> <li>•OCN</li> <li>•Advocacy Groups</li> <li>•NAMI</li> <li>•Unions</li> <li>•Schools</li> <li>•Businesses</li> <li>•Hospitals &amp; Physicians</li> <li>•Stakeholders (PDS)</li> </ul>	<ul style="list-style-type: none"> <li>•Shawn Clark</li> <li>•Nancy Frantz-Geddes</li> <li>•Kerry Kelly</li> <li>•Joel Young</li> <li>•Jo Isgrigg</li> </ul>	Work with Joel Young at DHS/Office for Health Systems Planning to research state and federal NHSP and nursing loan forgiveness opportunities in health professional shortage areas for OSH and others.	Initial Data collected Summer 2008
Establish a Behavioral Health Care CNA Level II.	<ul style="list-style-type: none"> <li>•AMH</li> <li>•OSH</li> <li>•OSBN</li> <li>•PH</li> <li>•AOCMHP</li> <li>•Agency responsible for creating/monitoring same</li> <li>•Stakeholders</li> <li>•Peer-Delivered Services [PDS]</li> </ul>	<ul style="list-style-type: none"> <li>•Nancy Frantz-Geddes</li> <li>•Joel Young</li> <li>•Gina Nikkel</li> </ul>	<ul style="list-style-type: none"> <li>•Meeting to discuss with agencies responsible</li> </ul>	Initial meeting July 2008
Recruit nurses working in hospitals outside of AMH	<ul style="list-style-type: none"> <li>•DHS Workforce Development Unit</li> </ul>	<ul style="list-style-type: none"> <li>•Nancy Frantz-Geddes</li> <li>•Chris Wilson</li> <li>•Nancy</li> </ul>	<ul style="list-style-type: none"> <li>•Provide onsite trainings</li> <li>•Provide internships</li> </ul>	Plan to be developed

<b>Goal</b>	<b>Agencies</b>	<b>Responsible</b>	<b>Actions</b>	<b>Timelines</b>
facilities.	•Budget Unit	Stephens •Deon Johnson •Bob Gebhardt	•Provide fellowships	
Develop high school “academies” for health & behavioral health careers.	•DHS •WDUs	•Shawn Clark •Jo Isgrigg	Work with OHWI to convene meetings with Dept. of Education health education specialist and with Oregon Health Education Center to obtain “best practice” models	Develop with OHWI

### **Area III: Retention**

<b>Goal</b>	<b>Agencies</b>	<b>Responsible</b>	<b>Action</b>	<b>Timelines</b>
•Develop appropriate staffing and service model at state psychiatric hospitals. •Improve physical working conditions through construction of new facilities.	•AMH •OSH Admin. •Federal guidelines & professional organizations best practices.	•Linda Hammond •Roy Orr •Bob Nikkel	•HR to find data •Draft proposal •Present to stakeholders	•April 2008 •June 2009
Develop advanced degree programs for nurses currently employed by the state hospitals.	•AMH •OSH Admin. •OSBN •OHSU/OUS (private colleges?)•Union •Legislature	•Nancy Frantz-Geddes •Jo Isgrigg	Partner with graduate nursing program.	2010
Develop and implement preceptor/mentor programs at	•AMH •OSH	•Roy Orr	Review plan	2010

<b>Goal</b>	<b>Agencies</b>	<b>Responsible</b>	<b>Action</b>	<b>Timelines</b>
state hospitals.	•BMRC •DHS HR Unit including Workforce.			
Implement program of individualized development plans.	•DHS HR staff •OSH Managers & staff •Union	•Cheryl Miller •Cynthia Gregory		2008
Assign appropriate caseloads and job tasks; non-nursing duties to other staff.	•AMH •OSH Managers & Unit Supervisors •Union	•Cheryl Miller •Roy Orr •Kerry Kelly •Nancy Frantz-Geddes	Plan to be developed by OSH	2008 & Ongoing
Implement recognition programs.	•OSH & BMRC Management & HR •Advocacy groups •Union	•Nancy Frantz-Geddes •Cheryl Miller •Managers & Unit Supervisors		2008
Build career ladders and pathways.	•AMH, OSH, BMRC, DHS HR Unit •Union •	•Bob Nikkel •Jo Isgrigg	Work with OHWI to convene meetings with CCWD Pathways representative	2008 - 2011
Improve ergonomics, workflow/workload through participating in planning for new state hospital information system and training in the use of information system.	•OSH Replacement Project Unit	•Linda Hammond	Build into schematic design	2008
Design new facilities with an educational focus including appropriate learning areas including observation rooms and distance technology.	•OSH Replacement Project Unit •DAS & DHS facilities & training staff •Educational	•Linda Hammond	Build into schematic design	2008

<b>Goal</b>	<b>Agencies</b>	<b>Responsible</b>	<b>Action</b>	<b>Timelines</b>
	Institutions •OIS Staff			

#### **Area IV: Legislative**

<b>Goal</b>	<b>Agencies</b>	<b>Responsible</b>	<b>Action</b>	<b>Timelines</b>
Have accurate information regarding the need/availability of psychiatric nurses to present to policy-makers	<ul style="list-style-type: none"> <li>•AMH/OSH</li> <li>•Board of Nursing</li> <li>•National Data</li> </ul>	<ul style="list-style-type: none"> <li>•Bob Nikkel</li> <li>•Roy Orr</li> <li>•Marna Flaherty-Robb</li> </ul>	<ul style="list-style-type: none"> <li>•Obtain data on Oregon's nurse workforce from the Oregon Center for Nursing</li> </ul>	2008 & Ongoing

**HS Addictions & Mental Health Division  
Psychiatric Nurse Workforce Development Team**

**Membership Roster  
Updated November 24, 2006**

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Department of Human Resources  
Addictions and Mental Health Division  
Psychiatric Nurse Workforce Development Team Report

**Acronyms**

AMH	Addictions and Mental Health
DHS	Department of Human Services
OCN	Oregon Center for Nursing
OSH	Oregon State Hospital
USDOJ	U.S. Department of Justice
CNAs	Certified Nursing Assistants
BMRC	Blue Mountain Recovery Center
ONLC	Oregon Nursing Leadership Council
LPN	Licensed Practical Nurse
OHWI	Oregon Health Workforce Institute
CCWDs HWI	Community Colleges & Workforce Development's Healthcare Workforce Initiative
EBPs	Evidence-Based Practices
POP	Policy Option Package
DAS	Department of Administrative Services
WDU	Workforce Development Unit
PH	Public Health
HR	Human Resources
NAMI	National Alliance for the Mentally Ill
OSBN	Oregon State Board of Nursing
PDS	Peer Delivered Services
AOCMHP	Association of Oregon Community Mental Health Programs
OHSU/OUS	Oregon Health Science University
NHSP	