

# OSH Recovery Times

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## Joint Commission Expected

by Ted Ficken

The Joint Commission (JC) conducted a full accreditation survey at OSH in August 2006. As a result of that survey, the hospital developed plans to address requirements for improvement. Our “Evidence of Compliance” plan was processed by the JC in February 2007. We are expecting an unannounced follow-up survey at any time. The OSH Laboratory had a full JC survey in the summer of 2005, so it is also due for its two-year unannounced survey.

With two JC surveys on the horizon, staff should be prepared to experience surveyors conducting tracers in all areas. During tracers, surveyors will trace patients through the continuum of care and will observe staff members in their day-to-day work with patients and with each other. In patient care areas surveyors will be looking for good communication and effective staff and patient interactions. High-quality patient care should be provided at all times, not just when surveyors

are present. However, here are some reminders of items from our August survey:

1. All patients receiving pain medications should have a current RN pain assessment in their medical record, the effectiveness of prn pain medications should be documented and pain should be addressed in their treatment care plans.
2. RNs should be using the new stamp to document the “read back” of verbal or telephone orders.
3. Staff should be aware of the list of do-not-use abbreviations. There should be a sticker identifying the do-not-use abbreviations in each medical record.
4. The laboratory and nursing services should be using the newly implemented logs to document the timeliness of communication of critical lab results.

5. All staff members should be practicing good hand hygiene. Wash your hands frequently or use hand sanitizer.

6. All required documentation should be completed within timeframes set for each discipline. Hand written documentation should be legible and interdisciplinary annual reviews current.

7. All refrigerators should have current thermometers and temperature logs. Refrigerators used for storing

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# Promoting Patient Health and Wellness

By Marvin D. Fickle, M.D.

In our efforts to address the health and wellness issues of patients at the hospital, Dr. John Bischof, Rob Cameron, Maynard Hammer, Debbie Granum and I have been reviewing information and data gathered by Food and Nutrition Services (FNS). There are many factors that contribute to the emotional and physical health of the patients at the hospital.

As we begin looking at weight gain issues at the hospital, an area we are reviewing is those foods made available through the FNS department. Changes began in January to increase snack offerings in the evening. Meal times were changed in March to move dinner later and increased the offerings of fruits and vegetables in daily menus. The caloric offerings per day actually increased to accommodate these changes. Steps to have been completed by May 8 include:

1. Discontinuing additional supplemental snacks. All patients will continue to receive three meals a day and an evening snack.
2. Discontinuing large portion and double portion diet orders.

3. Making soy milk available only to patients who have a medically documented allergy to milk, receive a Vegan Diet or who do not respond to Lactaid.

4. Making sugar-free candy available to patients who take medications indicating dry mouth as a side effect, including, but not limited to: diphenhydramine, benzotropine, trihexyphenidyl, metoclopramide, chlorpheniramine, furosemide, lithium, heterocyclic antidepressants, or to those who acquire a medically approved exception from Dr. Bischof.

All bulk and individual sugar-free candy orders for patients that do not meet the above criteria will be discontinued.

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## "JC" cont. from page 1...

medications should have new digital thermometers, and the new medication refrigerator temperature logs should be in use.

8. The new medication reconciliation policy and procedure should be in use by RNs and MDs.
9. Fire extinguisher tags should indicate that monthly checks have been completed.
10. Patients who have had multiple episodes of falling should have a part of their treatment care plan that addresses fall reduction.
11. All exit signs should be visible and lit.
12. Medication rooms should have a list of "look alike/sound alike" drugs posted (also referred to as "frequently confused" drugs).

Obviously, these are not the only areas that contribute to good patient care, but these items were noted during the last survey as areas requiring improvement. During past surveys, comments were very positive about the quality of OSH staff. Staff members were complimented for being helpful, compassionate, hard working, therapeutic and patient-focused. We expect to continue that tradition during our pending surveys. Address questions to the Quality Improvement department at (503) 945-2857.

## Together, We Save Lives

By Kim Buckner, American Red Cross

Last year OSH staff potentially gave the gift of life to as many as 381 people. During 2006, the Red Cross collected 127 units of life-saving blood from generous OSH staff. The blood may be processed into components that may be transfused to up to three patients in need. This is a tremendous support to our community blood supply. The Red Cross has been holding quarterly blood drives at OSH since 1997. Mark your calendar for the next blood drive at OSH, which is scheduled for Thursday, June 7, from 10 a.m. to 3 p.m. at the Administration Building.

In the midst of a very demanding work schedule, Marilyn Nichols does a tremendous job of supporting this important community service event. She has acted as our blood drive chairperson at OSH for the past four years. Her dedication and commitment to the blood donor program is commendable. Marilyn's organization and inspiration contributes significantly to the success of all of the OSH blood drives.

On behalf of the American Red Cross, the anonymous recipients and their families I would like to extend a huge THANK YOU to the fantastic OSH employees who continue to make a tremendous difference each and every day in our community. Together, we save lives.

## OSH Employees Go to College

By Ted Ficken

OSH employees were recently given the opportunity to take a class at Chemeketa Community College. The class, titled "Illness Management and Recovery," covers the contents of an evidence-based practice toolkit that was produced by the national Substance Abuse and Mental Health Services Administration. We are currently using portions of that toolkit throughout the hospital to teach patients relapse prevention and medication management skills.

The instructor of the class provided six slots for OSH employees, and the Addictions and Mental Health Division offered to pay for the class. The hospital also agreed to allow the six employees to work flexible schedules so that they could take the class on work time.

More than thirty employees expressed interest in this opportunity, which demonstrates the dedication of our staff. The six employees selected for this opportunity are Nancy Stephen, Jodi Lessaos, Christina Steiger, Yvonne Rice, Cathy Krahenbuhl and Marion Hopper.

## May Calendar

**14th — 10:00 a.m.**

### OSH Foundation Meeting

Callan Room

Contact Jessica Loewen Preis:  
(503) 945-2892

**16th — 1:30 p.m.**

### Valuing Diversity Committee

Brooks Room

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

**18th — 8:15 a.m.**

### Wellness Committee

Callan Room

Contact Sue Wimmer:  
(503) 945-2886

**20th — 1:00 p.m.**

### NAMI Wellness Walk

Vera Katz Esplanade, Portland  
Check-in at noon, walk at 1:00

Contact Linda Marshall:  
(503) 945-9838

**23rd — 2:30 p.m.**

### General Staff Meeting

30 Building Gym

Contact Pam Dickinson:  
(503) 945-2852

**28th**

## Memorial Day Holiday

**30th — 1:30 p.m.**

### Superintendent's External Advisory Committee on Cultural Competency

Brooks Room

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

## NAMI Walk

By Linda Marshall

Please join “Team OSH” in the NAMI Walk on Sunday, May 20, at Vera Katz Eastbank Esplanade in Portland. Check-in time is at noon and start time is 1:00 p.m. Distance of the walk is 2.8 miles. The National Alliance on Mental Illness (NAMI) is a non-profit, grassroots organization founded more than 25 years ago by families affected by mental illness. NAMI members believe that unified efforts can eliminate stigma and create a system of recovery for people living with mental illness.

NAMIWALKS for the mind of America is a fundraising and awareness-raising component of NAMI’s Campaign for the Mind of America. Launched in 2003 with 12 pilot sites, the program has grown to include nearly 70 communities around the country in 2007. It is expected that these walks will raise approximately \$7 million dollars in 2007. All walkers are encouraged to reach out to family, friends, co-workers and business associates to raise NAMI Walk support and participation. All proceeds from the NAMIWALKS will be used to fund NAMI’s programs, which include support, education, advocacy and the encouragement of research involving mental illness. NAMI plans to continue to grow the NAMIWALKS for the Mind of America program in the years to come.

There is no registration fee for the walk, but donations can be made to NAMI. If you can’t walk but would like to contribute, or if you would like a registration form or more information, please call me, Linda Marshall, at (503) 945-9838.

### **“HEALTH AND WELLNESS” continued from page 2...**

**5.** Regular lemon-lime soda pop will be provided only when patients have symptoms of nausea, vomiting or diarrhea. The Supervising Nurse can contact a dietitian, FNS manager or person in charge to have product sent to the ward. There will be no standing orders for soda pop.

Dietitians have been instructed to modify diet order screens to implement the above changes.

*FNS staff will continue to work with ward staff during this transition. They will be sharing information with wards regarding foods that are available on perishable order, how to effectively utilize leftovers following meal periods and how to work with patients who may feel hungry between meals.*

## What Would You Do in a Flu Emergency?

By Ted Ficken

“Mayor George L. Baker ordered all mass activities shut down. Schools were closed (36,000 children and 1,000 teachers), as well as approximately 50 theaters. All lodge meetings, club activities, pool halls, bowling alleys and outdoor meetings and parades were banned. For the first time in the history of Portland, no church services were held.” This is an account of the 1918 Spanish Influenza Pandemic in Oregon. (*September 1963 Oregon Historical Quarterly, Vol. 64, No. 3*)

Given our recent norovirus incidents and publicity surrounding bird flu in other parts of the world, a bird flu epidemic is not out of the question at OSH. It seems appropriate to consider our processes for responding to infection control issues. A new workgroup is doing just that.

The workgroup consists of Walt Lockett, Bob Prouty, Jackie Bowman, Jackie Schultz, Angelika Schmoll, Don Abel, Ted Ficken, Donna Halvorson and Debbie Granum. The group is conducting a “Failure Mode and Effects Analysis,” to determine the steps in our infection control response process and what could go wrong (“failure modes”), at each step. The workgroup will identify where improvements can be made, and it will make recommendations for proactive solutions.



# Examining Core Values: Stewardship

By Lisa Harnisch

A steward is defined as one who manages another's property, finances or other affairs for a specific purpose. However, stewardship is about more than just the money. As OSH employees, we are all stewards of the public trust—no matter our job. It is our duty to be good stewards of the resources we have to fulfill the department's mission: *"Assisting people to become independent, healthy and safe."*

Stewardship includes money, time, power, equipment and the tools we have available to conduct our business. As employees we have many materials and resources available to us to perform our work, and we are accountable for the efficient use of our time at work. DHS and the state have entrusted us with resources to perform our jobs.

The choices we regularly make have a big impact—not only on

those we serve, but also on those we work with and the public at large. At OSH we can be good stewards of DHS resources by:

- ✿ Turning off the water in the ward showers when nobody is taking a shower
- ✿ Recycling ink jets, toner cartridges, batteries and paper
- ✿ Checking to see what is available in the warehouse before ordering new items
- ✿ Carpooling when going to meetings or events off campus
- ✿ Copying single-sided documents to two-sided documents
- ✿ Repairing something rather than replacing it
- ✿ Canceling unnecessary meetings, or ending them early
- ✿ Reducing the number of interview panelists when a

small interview panel would be adequate

- ✿ Using sick time only when appropriate
- ✿ Following SPOTS card procedure
- ✿ Reporting maintenance issues before problems become bigger

In order to examine Core Values in a way that is most relevant to people at OSH, *we need your input*. If you have additional examples of good stewardship, or an ethical dilemma you would like to see addressed here, we would like to hear about it.

All submissions will be kept confidential. Please email your story to: [core.values@state.or.us](mailto:core.values@state.or.us).

*Lisa Harnisch is the DHS Core Values Project Manager in the Office of Human Resources Training Unit.*

## National Training Comes to OSH

By Ted Ficken

On May 30, sixty-five OSH employees will participate in a special training provided by the National Technical Assistance Center of the National Association of State Mental Health Program Directors. The training is titled, "Creating a Trauma Informed System of Care." The training will provide information that is relevant to the recently released Continuous Improvement Plan and will focus on culture change, the role of leadership, reduction of the use of seclusion and restraint and trauma theory. Four of the participants, Jim Mills, Wendell Page, Nancy Stephen and Dawnielle Lorren-Roberts, will participate in a second day of training on May 31, so that they can offer the information to additional OSH employees through our education department.

## Thank You for Your Suggestions

By Ted Ficken

This past November the hospital initiated a process for patients and staff to offer suggestions in several key areas: patient assessments, treatment-care planning, treatment services, medication management, paperwork/record-keeping, medical and physical care of patients, discharge planning and community transition, protection from harm, hospital program structure, staffing and quality improvement. More than 40 suggestion forms have been received.

What happens to those suggestions? First, they are reviewed in the Quality Improvement department and entered into a tracking system. Some suggestions are taken to the Superintendent's Executive Council for discussion and consideration, and some suggestions are shared through newsletter articles such as this. Suggestions are then considered as part of the continuous quality improvement process. For those of you who have submitted ideas, you will notice that many suggestions have been incorporated into the new Continuous Improvement Plan. Recently, the Superintendent's Council talked about five suggestions:

1. Create a standardized filing system for hospital forms on each unit. This idea will receive additional consideration as we plan for the new hospitals and attempt to add ward clerks to each unit.
2. Set up a cottage on grounds where patients can practice independent living skills. Current plans are to construct the new hospital in Salem, primarily on the south side of Center Street, which would probably eliminate our current cottages. However, having a place to teach independent living skills will be considered in the design of the new facility, possibly as a part of a treatment mall.
3. Work with local businesses to establish vocational training programs for patients that will result in employment in the community. This is already being worked on through the Vocational Services Department and the Supported Education/Supported Employment portion of the Community Reintegration program.
4. Discontinue the practice of storing old medical records in brown charts as if the charts were one continuous chart. Instead, have each brown chart be for a specific time period. This idea will receive additional consideration as we add ward clerks.
5. Improve the ability to get timely eyeglass and dental appointments. Establish these services in Portland, so that patients do not need to be transported to Salem. This idea is already being worked on.

Thank you to all who submitted suggestions. Your input is valued.

## OSH Goes Green

By Jackie Schultz & Marlin Wynia

The housekeeping department at OSH is going "Green." This means the cleaning products used by the custodians meet Green Seal Certification. Managers and employees felt they should work to improve both the outdoor environment and the indoor air quality. The goal is to improve the environment for patients and staff by using fewer toxic cleaning chemicals. The first order of business was doing the homework to find chemicals that would meet the effectiveness of current cleaning chemicals being used. We then looked at chemical dispensing systems that accurately measure the quantity being dispensed. We are happy to announce that dispensers are currently being installed throughout the hospital and we are replacing the current cleaning chemicals with Green Seal products.

**EDD Schedule:** Classes are offered at the OSH Ed. and Development Dept. unless otherwise noted. For information, call: 503-945-2875

**Roadcraft Driver Training:** May 14, 23, 29 or 31, 8-12 or May 15, 1-5

**Pro-ACT Refresher Training:** May 15, 8-5 and May 16, 8-12

**Pro-ACT Refresher Training:** May 17, 8-5 and May 18, 8-12

**Ed Day:** May 22, 8-5

**Humor As a Therapeutic Tool:** May 22 or 24, 1-4 or May 24, 9-12

**Pro-ACT Refresher Training:** May 24, 8-5 and May 25, 8-12

**Pro-ACT Refresher Training:** May 29, 8-5 and May 30, 8-12

**Pro-ACT Refresher Training:** May 31, 8-5 and June 1, 8-12