

OSH RECOVERY TIMES

A glimpse of history

By Patricia Feeny

Whether they were history buffs, movie fans or curiosity-seekers, the recent J Building tour had something for everyone.

Members of the OSH Replacement Project Team led 21 tours for 180 people on Saturday, June 13.



former OSH superintendent (1955-1982).

The Hollywood references brought levity to some otherwise somber tour stops, including a prototype of a no-longer-used patient room complete with

single, exposed light bulb and bare-bones furnishings.

The campus has 1.87 miles of steam and transportation tunnels, which are the primary means of access to all patient care buildings. Tunnels are used to provide food, supplies, equipment, utilities and maintenance to buildings across the Salem campus.

The project team is developing a virtual tour of the hospital that will capture the existing hospital up to the opening of the new facility.

“This was a very successful event and we have so many to thank,” said Dawn Bass, replacement team operations manager. “We want to thank our incredible security staff, our accommodating kitchen staff, and our energetic volunteers.”

“The interest in the tour has been overwhelming,” said Jodie Jones, deputy administrator of the project. “People saw first-hand why we need to replace the hospital but also the need to preserve this historic J Building.”

The J Building was made famous by the 1975 Oscar-winning film “One Flew Over the Cuckoo’s Nest,” and tour guides peppered their narratives with references to the film, pointing out where some of the more notable scenes were filmed. A dormant shower room even featured the hydrotherapy machine that one of the film’s characters threw out a window at the end of the film.

The documentary about how the film was made at OSH also was shown as part of the tour. On hand to answer questions about the movie and the hospital was one of the film’s actors, Dean Brooks, who is also a

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

Nutrition news you can use: fiber

By Vicki Duesterhoeft, M.S., registered and licensed dietitian

What gives fruits and vegetables their crunch and makes grains, beans and legumes chewy? It is the part of plants that our bodies cannot digest called fiber. So, if fiber is not digestible why do we need it? Eating adequate fiber as part of a healthy diet can reduce the risk of chronic diseases, including type 2 diabetes, stroke, some types of cancer, and coronary artery disease. Additionally, fiber can treat and prevent constipation, hemorrhoids and diverticulosis, and plays a role in modulating the immune system.

Fruits, vegetables, whole grains, legumes (beans and peas), nuts and seeds are all rich in different types of dietary fibers such as pectin, gum, mucilage, cellulose, hemicellulose, lignin and soluble fiber. Unprocessed foods are the best sources of fiber and consuming a variety of fibers is suggested to gain the maximum benefits of a high-fiber diet.

Foods high in fiber are usually nutrient dense, meaning they are high in vitamins, minerals and phytochemicals while usually being low in calories and fat. (Note: nuts and seeds are nutrient dense but also calorie dense, so watch portion size.)

Eating legumes and grains such as oats and barley can help lower high levels of blood cholesterol.

Research has shown that a high-fiber diet containing eight to 10 servings of fruits and vegetables and seven to eight servings of whole grains every day, can help lower high blood pressure.

Interested in weight loss? The added

bulk of fiber-rich foods can help us eat less because the increased satiety fiber provides makes us feel full longer with fewer calories.

Currently, most U.S. citizens consume about half of the recommended amount of fiber they need. The recommended daily allowance of fiber for adults 50 years of age and younger is:

38 grams per day for men;

25 grams per day for women.

Eating more fiber than the currently recommended amount may improve blood sugar control for people with diabetes.

Here's how you can increase your fiber intake:

Eat at least two cups of fruit and 2-1/2 cups of vegetables every day (limit fruit juice to no more than one-half cup per day).

Eat fruits and vegetables in a rainbow of colors: green, orange, yellow, red, blue, purple and white. Fruits and vegetables that are darker in color usually contain more nutrients.

Include a variety of fruits and vegetables as the main dish, with meat and starches as the accompaniments.

Eat at least three to five servings of whole grains every day. Check to be sure a whole grain, such as whole wheat, is listed first on the ingredients label and look at the nutrition facts label for at least two grams of fiber per serving.

Use whole wheat flour to replace one-

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What's cooking in the kitchen?

By Patty J. Thompson



The Food & Nutrition Services (FNS) management team recognized employees with a cake and ice cream reception in honor of National Healthcare Food Service Week October 6-12.

The motto this year was "Nutrition is our Mission." That perfectly describes our department. Our 57 employees cover two shifts, seven days a week, preparing and serving approximately 70,000 meals to 650 OSH patients.

In the 28 years I have worked in this department, the meals have always been delivered. Regardless of bad weather, lack of electricity or water, we have always provided the basic necessities to our customers.

The food service industry often has significant staff turnover, but this department has employees with tenures of 20, 25 or 30 years. The management team has a combined experience of more than 100 years just here at the hospital.

In this department, we pride ourselves in being one big family. Like any family, we have our moments of disagreement



Food Service Staff

Jacqui M, Pat D, Greg H, Keith L, Anne R-W, Mary C, Zeke P

Sareth S, Pat M, Theo A, Jennie C, Joyce C, Lisa P, Shelly K, Hattie A, Ernestina C, Annie D, Gary S, Jordan W, Michael D, Duke C

Jack H, Kitty M, Norma P, Cathy G, Becki H-D, Jodi L, Jeannie B, Geri G, Connie M, Cary F

Brian P

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How are we going to get there from here?

BHIP transition plans

Open, transparent communication

The official BHIP Communication Plan is 27 pages long, but it boils down to this: BHIP will embody an open, transparent, two-way communication path. Because people are busy, we will target information so that you get the specific information that is vital to your job when you need it. No question is out-of-bounds and you may hear, especially while we are still shopping for the electronic health record (EHR) we will purchase, "We don't know the answer to that yet."

The communication path needs to be two-way so that we know what you want and need. We have talked to people from every corner of the hospital and we appreciate the openness and the incredibly valuable information. The information has not only helped develop the Functional Requirement Document (the main shopping list), but has helped us to cultivate our communication plans, business transition plans and training plans.

We will continue to visit the units and departments, use the BHIP Beat and OSH Recovery Times to provide updates, participate in open houses and use the BHIP Project e-mail address. When we buy the EHR system, communication will increase radically. We will share templates from the new system as soon as possible. We will ask people to join groups to help us configure and test the system. We need to hear from you if you have ideas, concerns or questions.

Tools for transition

Case studies of EHR implementations and our conversations with other hos-

pitals have consistently indicated that common mistakes have been a narrow focus on the technology combined with "taking for granted" of the staff. Focusing on the technology of the implementation leaves out the most important factor: the user. EHR implementation is not only turning on a new system, but also helping people through the transition.

The transition to an electronic health record from blue charts, the OP/RCS and electronic forms will coincide with treatment mall changes and the move into a new building. Each of these three major changes would be incredibly stressful by itself. OSH will be going through all three at the same time. To deal with these challenges we all need to be flexible, have the training and information we need to succeed, and keep a sense of humor. BHIP will provide comprehensive training on the new system before it is in place.

"E" environment

We have the responsibility to create an "E" environment for everyone using the new system:

Engage - We need to hear your ideas, concerns and questions. We need to learn from you. We are trying to have many and varied ways for you to share concerns with us.

Enable - We need to give you the specific information you need to do your job. Training will be given just in time so that what you have learned stays fresh and useful. In addition, we will have a train-the-trainer program ensuring that training will come from staff who



know the business of OSH.

Empower - We will train "SuperUsers" to be available for all shifts. These individuals will receive additional back-end training so that unit and department staff can use the SuperUsers knowledge before contacting BHIP team members. If you are interested in becoming a SuperUser, please e-mail us (GroupWise address is Project,BHIP). And finally, the BHIP SWAT Team will be available "24-7" to support implementation and answer questions as they come up.

Ensure - We will have feedback mechanisms to determine if systems and processes are working correctly and meeting people's needs during the implementation. In addition to feedback during the project, support and maintenance plans are being developed with DHS Office of Information Services and the State Data Center to provide additional ongoing support.

EHR technology is similar from system to system. The key to success is an implementation strategy that emphasizes the people using the system. Open, transparent communication, just-in-time training using various methods, SuperUsers, and the BHIP SWAT group are some of the tools that we will use to help you survive the chaos of change and end up with an electronic health record that will benefit both you and the patients we serve.

Remembering safety: Stretch and flex exercises

Make stretching a part of your daily routine *(Third of a three part series)*

Provided by the OSH Safety Department

Before starting work, stretching and flexing warms you up and gets your muscles ready for the day. These short, simple exercises can help you avoid possible strains and sprains. Making it a part of your preparation before starting work increases circulation and helps your overall fitness.

General guidelines:

If you have questions about your ability to perform any stretch, consult your physician. Here are some guidelines:

- Consult your physician before starting any program or if you have questions about your abilities to perform any stretch.
- Do the stretches at your pace ability and pace.
- Before any stretch, relax and stand with your feet shoulder-width apart, keeping your knees slightly bent. Keep your back straight..
- Stretch to the point of comfortable tension. Don't bounce or strain.
- Hold each stretch while counting to three slowly.
- Breathe in a relaxed manner.
- Repeat the stretch, or a set of stretches, three times.



Upper back stretches

Shoulder stretches

- Stand upright with your feet shoulder-width apart;
- Clasp your hands behind your back;
- Raise clasped hands, bending your elbows until you feel a stretch;
- Do not bend your body forward during the stretch; and
- Take a deep breath, count to three and exhale.



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What's cooking in the kitchen?

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and personality conflicts, but we are in this together with a common goal that we successfully complete every day.

Visitors and observers who come to the kitchen are amazed by all the commotion and detail required to prepare, deliver and provide service for this many meals. We serve 22 different areas in two different service styles (bulk food and tray service), involving three different textures, with unlimited variations for therapeutic, religious and cultural reasons.

Every member of this team works hard and takes pride in the products and services provided to OSH patients every day. This essential service complements and supports the mission of this hospital on a daily basis. Help us extend our thanks and appreciation to FNS staff by giving them a thumb's up for a job well done!

Nutrition news you can use: fiber

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quarter to one-half of the all-purpose flour in recipes.

Include at least one high-fiber food at every meal.

Snack on fruit (apple, banana, berries, orange, peach, pear), whole-grain cereal, air-popped popcorn, or dry-roasted nuts and seeds.

It is very important to drink enough liquid when eating a high-fiber diet.

When adding fiber to your diet, increase the amount you eat gradually to avoid a painful, bloated abdomen and flatulence.

CADC: OSH Certified Alcohol Drug Counselor program

The purpose of the OSH CADC program is to help staffers develop the skills and experience they need to pass their Certified Alcohol and Drug Counselor exam. A CADC I requires a written exam. A CADC II requires a written and an oral exam.

The following CADC candidates have passed their written exam:

Dan Costello (50H) is our first staffer from OSH's Cohort 1 in CADC, which began in January 2007, to complete the course. Dan's program supervisor Carlene Shultz. He is now a certified alcohol and drug counselor. Congratulations, Dan!

Gregory Rundo (48C) came to OSH in the spring of 2008 with a strong substance use disorder treatment background. The OSH CADC supported him in his application and preparation for certification. He is now a CADC I. Way to go, Greg!

Peggy Love (50E) is a longtime OSH staffer who entered the CADC program so that she could receive the supervision she needed to apply for her CADC II. She is eligible now to take her oral exam to complete her CADC II. Peggy is supervised in the program by Jim Mills. Well done, Peggy!



The following CADC candidates have applied to take their written exams in December:

Rakesh Sharma (35C) entered the program with the first CADC program cohort at OSH in January 2007 and completed all of the requirements to take the written exam in December. Rakesh is supervised in the program by Nicole Wirth. Way to go, Rakesh!

Carry Fairchild (50D) began the OSH CADC program with the first cohort in January 2007 and has met all of the requirements to take the written exam in December. Carrie is supervised in the program by Sharon Perry. Awesome, Carrie!

Scott Garred (P6A) started in the OSH CADC program in January 2007 and diligently pursued his supervised client contact hours so that he is prepared to take his CADC I exam in December. Scott collected all of his hours here at OSH. Scott is supervised in the program by Nicole Wirth. Great job, Scott!

Sara Slack (CODTP) is a mental health specialist in the Co-occurring Disorders Treatment Program. She has worked previously in substance abuse programs and will be taking the exam for CADC II. Sara is supervised in the program by Jim Mills. You go, girl!

Tyler Case (CODTP) worked in the substance use disorder field before coming to the CODTP. He will be taking the CADC II exam in December. Congratulations, Tyler!!

The OSH CADC program is forming a new class to begin in January. For more information about the program contact Jim Mills at jmills@dhs.state.or.us or call 503-947-1011.

COME CELEBRATE WITH US AT OUR NEXT CULTURAL DIVERSITY EVENT!!!

(This will also be our last event for the 2008-year)



NATIVE AMERICAN HERITAGE WILL BE CELEBRATED DURING NOVEMBER, ON THE OSH CAMPUS

ON THURSDAY, **NOVEMBER 20th** FROM 12:00-2:00, the 50 bldg. visitors center and gym will be full of patient art, festive music, drumming and a flutist, storytelling and a presentation from our own "Quest School" and, of course, there will be Indian Fry Bread served!!

If you have Native American items to share with us, please contact Jenny Rogers -48B 945-9287, and we will make sure you have a table reserved in the visitors area.

The Cultural Diversity Activities Committee Welcomes your participation and looks forward to seeing you November 20th!!! A Huge Thank you to all of those that have helped organize this event and for your hard work!!!

Thank you, Jenny Rogers – Cultural Diversity Activities

Remembering safety: Stretch and flex exercises

Make stretching a part of your daily routine *(Second of a three part series)*
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Mid back stretches

Side turning stretch

- Stand upright with your feet shoulder-width apart and your left hand on your right hip;
- Reach your right arm straight up from your side, then move it slightly back with your palm forward and thumb up. Look over your shoulder at your right hand; and
- Take a deep breath, count to three, exhale, and repeat the exercise on the opposite side.

Mid back stretches

Cat stretch

- Stand with your feet shoulder-width apart. Bend down, putting your hands on slightly bent knees;
- Look up, point your chin at the ceiling and creating an arch in your back; and
- Take a deep breath. As you exhale, count to three, tuck your chin into your chest, and round your back.

Lower body stretches

Calf stretch

- Stand up straight with your feet slightly apart;
- Step forward with your left foot. Bend your right leg, leaning slightly forward and keeping both feet flat on the floor; and
- Take a deep breath, count to three, exhale and repeat the exercise on the opposite side.

Employee Wellness wants you...

... to help us come up with a new name and logo for the committee.

We're looking for something that will reach out and grab everyone's attention, make them say "Yeah, I have to start getting myself healthier and this is the place to start." To that end, we are sponsoring a contest with exciting prizes. There will be one prize for the person who comes up with the new wellness committee name, another prize for the winning logo, and a third prize for a person drawn from all the other entrants. (Specific prizes yet to be determined.)

So try putting your mighty intellects to work on coming up with a new name for Employee Wellness that will inspire our staff to improve their health. And for those of you with an artistic leaning, please try designing a "logo," a symbol for wellness that, just by its appearance alone, will motivate all towards fitness.

OK, those last few lines may be a bit grandiose but the contest stands. Give it some thought and see what you can come up with.

Please submit your entries by e-mail or 100-mile flier to Penny VanSanten or Walt Lockett and see if good fortune is on your side. Decision of the judges will be final and all entries become the property of the committee, or something official like that. And take good care of yourselves.

Need to talk?

Call the David Romprey
Oregon Warm Line

Staffed by trained peers

"People just want to be heard."

800-698-2392

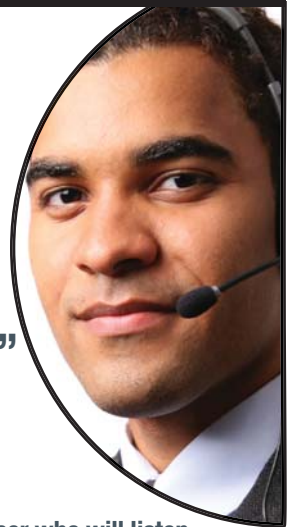
This warm line is not a resource line

Call to have a confidential conversation with a peer who will listen without judgment or criticism. Together we can learn and grow.

Community Counseling Solutions is pleased to announce an increase in Warmline hours. Effective October 15, 2008, hours are:

Monday 3 – 8 p.m.	Thursday 1 – 6 p.m.	Sunday 5 – 10 p.m.
Tuesday 5 – 10 p.m.	Friday noon – 5 p.m.	
Wednesday 9 a.m. – 2 p.m.	Saturday 5 – 10 p.m.	

Sponsored by: Community Counseling Solutions (including Morrow, Wheeler Gilliam and Grant counties), Greater Oregon Behavioral Health Inc. (GOBHI), Clatsop County, Deschutes County, Columbia County, Douglas County and Benton County



BHIP is ready to go shopping!



BHIP has hired Fox Systems, Inc., to help us make sure that the system we purchase will work for OSH. The contractor officially began work October 20, 2008. With the contractor in place, we can now start the purchasing process for the new integrated software solution.

If the name seems familiar, it's probably because Fox Systems coordinated gathering business requirements for the new system from both hospital and community providers in 2007-2008.

Fox Systems' first responsibilities will include:

- Reviewing BHIP project plans for completeness;
- Helping the hospital prioritize requirements ;
- Helping us write the official software request for proposals.

Prioritizing requirements is vital because no single electronic charting system will provide 100 percent of the functionality that is needed. So we need to know what's most important to OSH now and what can be added to the system later. In addition, we need to know the best way to implement ("roll out") the new software.

To help us prepare for this prioritizing process, the BHIP team will meet with OSH staff to verify that the requirements you gave us are still valid. This is all contained in the BHIP Functional Requirements document. You'll find it under "BHIP Documents" on the BHIP Web site at bhip.shorturl.com.

Remember, we need to hear from you with your concerns, ideas and questions. This is the time for your voice to be heard before the new system is purchased. Please contact us at Project, BHIP in GroupWise or come see us on 41A.

— NOTICE —

Wellness Committee meeting change

The Wellness Committee's meeting dates and times have changed.

The committee meets every month on the first Wednesday, 1:30 – 2:30 p.m., and on the third Friday, 8:30 – 9:30 a.m. Meetings are held in the Medical Records conference room in the basement of the 33 Building.

OSH new hires and retirees

Welcome to OSH

Gabriel Ambriz	Recreational Specialist
Carrie J Barber	Mental Health Therapy Tech
Charlene K Barber	Mental Health Specialist
Dana L Barber	Habilitative Training Tech 1
Jayson E Boaz	Habilitative Training Tech 1
Laurie L Burke	Clinical Psychologist 1
Anthony D Callaway	Mental Health Therapy Tech
Crystal L Clore	Habilitative Training Tech 1
Frederick J Colbert	Mental Health Registered Nurse
Sandra D Cordes	Medical Lab Technologist
Linda J Cuyler	Mental Health Specialsit
Deann E Dipasquale	Habilitative Training Tech 1
Ruth E Evans	Mental Health Specialsit
Erin N Fusco	Mental Health Specialsit
Robert W Garber	Psychiatric Social Worker
Brittany M Geomans	Habilitative Training Tech 1
Sunny L Gonzales	Habilitative Training Tech 1
Kimberly M Greiner	Habilitative Training Tech 1
Cameron M Haider	Habilitative Training Tech 1
Roger F Henninger	Laborer/Student Worker
Tracy L Hoover	Pharmacy Technician 2
Kyla C Hughes	Recreational Specialsit
Sean Imeson	Habilitative Training Tech 1
Stephen M James	Clinical Psychologist 1
Natasha J Keller	Habilitative Training Tech 1
Ann M Knapp	Habilitative Training Tech 1
Victoria Mayhue	Pharmacy Technician 2
Chattie A Miranda	Mental Health Supervising RN
Berdean Molan	Habilitative Training Tech 1
Coleman E Montgomery	Habilitative Training Tech 1
Michelle L Moore	Mental Health Therapy Tech
Christian Y Niece	Laborer/Student Worker
Jean L Peters	Habilitative Training Tech 1
Tracy Phillips	Laborer/Student Worker
Michelle Praskievicz	Habilitative Training Tech 1
Robin Ramsey	Pharmacy technician 2
Melissa L Rose	Mental Health Therapy Tech
Brittney K Schafer	Habilitative Training Tech 1
Donna A Shamblin	Habilitative Training Tech 1
James T Shrewsbury	Training and Development Spec 2
Richard Stansfield	Research Analyst 3
Kimberly A Thoma	Habilitative Training Tech 1
Mark J Thomas	Laborer/Student Worker
Dana S Thompson	Pharmacy Technician 2
Jenifer M Thorsted	Office Specialsit 2
Katrina K Timmen	Mental Health Therapy Tech
Jamie Waters	Rehabilitation Therapist
Andrew P Weitzman	Clinical Psychologist
Emmaly V Williams	Mental Health Specialist
Martha K Zeleke	Mental Health Therapy Tech

Retirees

Patricia G Merritt	Cook 1
Phyllis A Woellmer	Mental Health Therapist 2

EDD November 2008 events

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
						01
02	03 General Orientation 40C Conf Room 1	04 General Orientation 40C Conf Room 1 ED Day 40C Conf Room 2	05 General Orientation 40C Conf Room 1	06 General Orientation 40C Conf Room 1	07 General Orientation 40C Conf Room 1	08
09	10 General Orientation 40C Conf Room 1	11	12 General Orientation RN/LPN ONLY 40C Conf Room 1	13 General Orientation RN/LPN ONLY 40C Conf Room 1 ProACT Refresher Training 40C Conf Room 3 8a-5p	14 ProACT Refresher Training 40C Conf Room 3 8a-12p	15
16	17 General Orientation 40C Conf Room 1	18 General Orientation 40C Conf Room 1 Ed Day 40C Conf Room 2 1p	19 General Orientation 40C Conf Room 1 CMA Pharmacology 40C Conf Room 3 8a-12p	20 General Orientation 40C Conf Room 1 ProACT Refresher Training 40C Conf Room 3 8a-5p	21 General Orientation 40C Conf Room 1 ProACT Refresher Training 40C Conf Room 3 8a-12p	22
23	24 General Orientation 40C Conf Room 1 Group Facilitation Skills Day 1 40C Conf Room 2 9a-4:30p	25 General Orientation RN/LPN ONLY 40C Conf Room 1 Group Facilitation Skills Day 2 40C Conf Room 2 9a-4:30p	26 General Orientation RN/LPN ONLY 40C Conf Room 1	27	28	29 30



Upon request this publication can be furnished in an alternate format for individuals with disabilities by contacting: Patricia Feeny, Communications Manager, telephone: 503-945-9073 or FAX: 503-373-1893.

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