

Reconnecting with culture helps OSH patients work toward recovery

By Robert Yde,
Public Affairs Specialist

For many Native American patients at Oregon State Hospital, reconnecting with their culture can be a major step in their healing process and recovery.

When Doug Styles, a Native American enrolled in the Klamath and Modoc tribes, first came to Oregon State Hospital, he was holding on to more than a century’s worth of bitter feelings and resentment. His anger over the mistreatment of his ancestors and the deterioration of their culture led him down a destructive path that ended at the hospital.

“I’ve had to learn how to deal with my negative views appropriately, because if I don’t, then I’m not being respectful of my culture,” Styles said. “I’ve learned we should forgive rather than harbor hard relations against people, and that’s been a real important part of it for me.”

The hospital serves approximately 60 Native American patients at any given time. And while every patient has his or her own unique set of circumstances, Native Americans share a common history marred by tragedy and a culture that has been largely abandoned. However, like Styles, many Native Americans are finding answers by learning about and reconnecting with their traditional ways and beliefs.

“Culture’s the prevention, and culture’s the cure,” said Cynthia Prater, OSH’s Native American services coordinator. “It prevents



Larry, an elder from Washington’s Chehalis tribe, leads a Saturday morning Red Road to Wellbriety group. The group combines elements of Alcoholics Anonymous’s recovery model with traditional Native American beliefs and practices. Larry works as a group facilitator for the Native American Rehabilitation Association and has been involved in OSH’s Native American services program for the last year.

illness, and it heals illness, so if we know our culture, we can use it to heal ourselves.”

Although records of Native Americans being treated at the hospital date back to the 1800s, it’s only been in recent years that clinicians

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OSH Recovery Times

is edited by Robert Yde. Contact him at 503-947-9982 with questions, comments or suggestions.



Greg Roberts

Message from the superintendent

Dear OSH Team:

I'd like to start off by wishing you a happy new year. I hope a wonderful holiday season capped off your busy year.

This past year, we saw ideas on paper become reality as we seek to create a world-class facility where our patients can heal in a safe and therapeutic environment. In March, we open the final phase of construction at the Salem Campus, Bridges and Springs, bringing an end to the years of planning and hard work.

Creating this new physical environment was essential to the hospital's continuous improvement process; however, a new building is only one piece of our transformation. The truly significant changes are still to come. Entering 2012, we will shift even more attention to the transformation needed to fulfill our vision of hope, safety and recovery.

As many of you already know, last month, the Substance Abuse and Mental Health Services Administration (SAMHSA) announced a new working definition of recovery. They defined recovery as "a process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential." Additionally, SAMHSA also described the four major dimensions needed to support a life in recovery:

- Health: Overcoming or managing one's disease(s) as well as living in a physically and emotionally healthy way;
- Home: A stable and safe place to live;
- Purpose: Meaningful daily activities, such as a job, school, volunteerism, family caretaking or creative endeavors, and the independence, income and resources to participate in society; and
- Community: Relationships and social networks that provide support, friendship, love and hope.

I'm sharing this definition for two reasons. One, it encompasses everything we should be doing for our patients. And two, it's inherently linked to a concept you will hear more about throughout the year — person-centered care.

For those not already familiar with this term, person-centered care is about the interpersonal relationship between you and your clients — not as clinician to patient, but as one human being to another. During the past two decades, person-centered care's core principles have revolutionized the way long-term care facilities operate. These principles include recognizing patients as unique individuals; giving them choices, privacy and independence; showing them dignity and respect and fostering a sense of community.

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Message from the superintendent

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In recent years, the person-centered care approach has gained popularity in the mental health field as we've shifted toward individualized treatment and a shared decision-making model that relies on consumer direction, input and collaboration with his or her provider.

Instead of a traditional medical model, in which treatment is based on making a diagnosis and then treating symptoms associated with that diagnosis (you're diagnosed with X, so you get treatment X, if you're diagnosed with Y, you get treatment Y) person-centered care is a holistic approach that requires highly individualized treatment plans. Two clients with similar histories and identical diagnoses may receive vastly different treatment depending on their strengths, abilities, needs, challenges and personal recovery vision.

While person-centered care has been effectively used in community settings, to my knowledge, this approach has never been put into place on a large scale in a forensic setting. Starting this year, however, we are going to change that by making OSH the first hospital to implement person-centered care.

Changing the way we approach treatment is not going to happen over night. It's going to require a major commitment of time, energy and resources from all of us. However, for OSH to become what we all envision, this is the next logical step in our transformation. It will be more challenging than simply knocking down a building and putting up a new one in its place, but I can promise it will also be more rewarding. More importantly though, it's the right thing to do for our patients — not as people for whom we're responsible, but as fellow human beings who need our help. It's what you and I would expect if we were patients or family members of a patient.

So what does this mean for you? We are entering exciting new territory, and you can expect opportunities and challenges along the way. Currently, we operate in an environment largely made up of rules and policies that are applied in the same way to everyone. A person-centered care approach will introduce many shades of gray.

You will have more autonomy in how you engage patients and work with them toward their recovery. However, that independence also means added responsibilities and expectations. While establishing interpersonal and meaningful relationships will be key to this approach, relationships must always remain professional, therapeutic and, above all else, safe — for you, the patient and the community.

A performance improvement team guided by our chief medical officer, Rupert Goetz, M.D., is laying the groundwork to introduce a person-centered care approach to OSH. One of the team's biggest challenges is balancing the principles of person-centered care with a forensic facility's role. What will it look like? Right now, it's too early to say. All of us — patients, staff, family members and advocates — must participate in the discussion. Working together, we'll find the hospital's path to person-centered care. It's a journey I'm excited to take with you.

Sincerely,



Greg Roberts
Superintendent

Continuous improvement means continuous readiness

By J.S. 'Doc' Campbell, CPHQ
Standards and Compliance

As you all know by now, The Joint Commission (TJC) will conduct its survey of Oregon State Hospital sometime in the coming weeks. In the November and December issues of "The Recovery Times" we shared with you some common survey questions and tips on answering those questions and interacting with the surveyors. This month we'd like to offer you some final advice and words of encouragement before the survey.

The surveyors will spend about a week at OSH, and most of that time will be spent on the units and treatment malls. Because we use many cutting-edge approaches in treating our patients, you can expect plenty of questions about treatment malls, person-centered treatment and the best-practice approaches we have adopted. Surveyors will also want to know how we are ensuring the safety and recovery of patients with high-risk issues, such as anticoagulant therapy, suicide risk, seclusion and restraint, pain management and other medical issues.

Is OSH ready ?

While the results of each TJC survey must stand on their own, surveyors do take into account the findings from previous surveys to see how and where improvements have been made.

For OSH, the three years that have passed since our last survey have been filled by a phenomenal number of transitions and changes including constructing new, world-class facilities; hiring new staff, implementing a new electronic health record and embracing a clear vision guided by new leadership.

Along with what we've already accomplished, surveyors also want to know that we have a plan in place for continuous improvements. With the integration of the Lean Daily Management System (LDMS), we now have

that and are using proven methodologies to generate employee-driven improvement ideas every day.

A great example of this was during the staff tours before the new units opened. Your feedback and ideas led to several improvements and modifications made to create a safer environment.

Through it all, we've learned it takes time, patience, energy and motivation to make major changes. We have also learned how to begin incorporating the components of our vision into the daily lives of those we serve — we now have in place the environmental cues that help create an atmosphere of hope, the technology and training to provide for the safety of both our patients and staff, and the leadership and support necessary to integrate strong recovery elements in all aspects of our treatment.

By continually making improvements centered on these components — hope, safety and recovery — OSH will create a state of continuous readiness. So whether we're preparing for a survey or just another day at work, OSH will not be just another hospital that meets the required standards, but rather a world-class treatment facility that is setting new ones.

For more information on The Joint Commission survey, please contact **Doc Campbell** at **503-945-0901**.

In November, a TJC surveyor visited OSH to conduct a specific spot audit of our cottages. During her time here, the surveyor spoke with several staff about the excellent work we are doing. Here is what your coworkers had to say about the experience:

Chuck Chan – "To me, the experience was really pleasant. There was no pressure, and I just answered what she asked me."



HEART

responders are here to help

*By Hospital Employees
Assistance Response Team*

Although helping our patients with their recovery can be very fulfilling, working at an in-patient facility like the Oregon State Hospital is also full of challenges. On any given day, you may find yourself in a situation that could potentially lead to emotional, mental or physical harm.

Recognizing the negative effects these types of experiences can have on you — both at home and at work — OSH has a response team in place to provide crisis support and help you work through your situation.

The Hospital Employees Assistance Response Team (HEART) is a team of OSH staff trained in critical



(from left) HEART responders Katherine Heicksen, Julee Engelsman and Char Barber meet. The HEART team is a resource made up of hospital staff specially trained in critical incident stress management. If you are having trouble coping with a stressful situation or just need someone to talk to, feel free to contact a HEART responder any time of day.

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If you would like help working through a traumatic experience or just someone to talk to, feel free to contact any of these HEART responders directly:

Malcolm Aquinas	Terry Miller
Carrie Barber	Patty Ott
Char Barber	Richard Ott
Vince Boaz	Kathleen Park
Lenette Bultena	Mel Penne
Aaron Cain	Nina Perard
Michele Carbone	Toni Place
Tyler Case	Paul Praskievicz
James Clay	Omar Reda
Carol Draper	Don Reisner
Rebecca Edens	Michael Robbins
Ruth Evans	Laurier Rokusek
Dave Gassner	Danielle Sherbuorne
Linda Good	Rick Snook
David Hampton	Renee Tiffany-Luna
Jeanette Hartnell	Terri Tourville
Lori Hays	Pat White
Katherine Heicksen	Nicolas Wilkes
Selena Hess	Ashley Yokota
Judy Imig	
Shirley Jorden	
Tassi Keener	
Cynthia Kountz	
Peggy Love	
Charity Mann	
Karen Marshall	

Recognizing your hard work – OSH’s Employee Recognition

By Sara Walker, M.D., Chairperson

During the past year, you’ve received emails about employee recognition. You may have responded to a survey, attended a World Café event or commented on the new policy. Thank you for your help. Now it’s time for you to enjoy the results of your input.

The new Employee Recognition Committee is made up of staff from several different departments and offices. What we have in common is we’re proud of the work being done every day at OSH and committed to making this a better place for all of us. We know that when you feel your good work is noticed and

valued, you are more excited, creative, satisfied and productive. When done right, employee recognition benefits everyone.

The committee’s first goal is to establish an employee-to-employee recognition program. We will soon have recognition cards available for you to fill out and give to one another for good work that promotes hope, safety, recovery, innovation and quality improvement. These cards are intended to be used by any employee — management, represented, contract, you name it.

As if having your efforts recognized by a colleague isn’t enough, there are prizes involved as well! (Do you think “reserved parking” is a pipe dream? Don’t be so sure.) Be on the lookout for emails, “Recovery Times” articles and personal visits by committee members to explain the program and how you can participate and help.

Other goals include establishing a program to recognize teams, improving the process for years of service recognition and following up with you to see how well the program is working.

If you have suggestions on how to recognize your fellow employees, please contact one of our committee members. We have already received a

Employee Recognition Committee members

- **Sara Walker** (Chair)
503-945-8872
- **Patty Foster**
503-945-7135
- **Marj Eley**
503-945-9751
- **Andre McGuire**
503-731-3073
- **Amy Smith**
503-945-0966
- **Cathy Van Enckevort**
503-945-9744
- **Jesse Rodriguez**
503-945-9992
- **James Clay**
503-945-9499
- **Nancy Stephen**
503-945-2878

It Is My Pleasure To Recognize

Name _____ Unit/Work Area _____

For great work in the area(s) of:

INSPIRING HOPE **PROMOTING SAFETY**

SUPPORTING RECOVERY

IMPROVING QUALITY **INNOVATING**

I noticed you: _____

OREGON STATE
HOSPITAL
HOPE • SAFETY • RECOVERY

From: _____
Name _____ Unit/Work Area _____

Thank you for making a difference!

Employee recognition cards like the one above will soon be available. Use them to show your appreciation for your coworkers’ hard work.

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Mindfulness helps OSH patients recover from mental illness

By Robert Yde,
Public Affairs Specialist



Mental Health Specialist Cary Fairchild (left) leads a yoga class at OSH. Yoga is just one of several mindfulness-based activities the hospital is using to help patients work toward recovery.

Patients at Oregon State Hospital are using some age-old philosophies and practices to stay grounded while working toward a healthier future. Mindfulness, once thought to be solely the realm of Eastern religions and the counterculture, is now recognized as an effective tool for treating a variety of health issues, including mental illness.

“I have come [to group] with migraines; I’ve come with my body out of whack, and I’m able to realign myself – physically and mentally – and leave feeling a whole lot better,” said patient Tyechimba Yafeu.

As OSH continues its efforts to provide high-quality care designed to meet the unique needs of individual patients, mindfulness is an important treatment option for patients like Yafeu. More and more, mindfulness groups and activities are becoming an integral part of treatment.

The hospital offers patients a wide range of mindfulness

activities like yoga, meditation, tai chi and Pilates, as well as classes that incorporate mindfulness techniques into everyday life, such as mindfulness-based stress reduction, relapse prevention for addictive behavior and daily living.

What is mindfulness?

Depending on whom you ask, mindfulness can be defined in several ways, but at the heart of each definition is one deceptively simple-sounding concept – present-moment awareness.

“When we focus on the past, we tend to dwell on things we can’t change, which increases depressive-type symptoms. When we’re more future-oriented, we have more anxiety-type symptoms and worry about things we can’t do anything about yet,” said OSH psychologist Andrew Weitzman, Psy.D. “With mindfulness, you learn

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OSH Briefs

Doré Jaeger, a patient on 35B, displays some of her recent artwork. A lifelong artist, Jaeger enjoys creating abstract artwork and writing poetry in her free time. "It's definitely an outlet. It gives me peace and serenity and calm," she said. Her artwork is displayed throughout 35B, and she recently finished a children's book that she gave to the unit's office specialist, Melissa Pelton. "It's a great book. It's about the solar system and my four-year-old son really enjoys it," Pelton said. "In fact, my husband said it's so good it should be published."



Patients on Tree 1 came together to build a gingerbread village for the unit just before the holidays. After creating their own gingerbread houses, the patients brought them all together and then added the final touches such as the gingerbread children sledding down the hill and the candy-cane street lamps. Word of the village brought staff from throughout the hospital to the unit to see this festive and edible creation.



Box your butts to help keep OSH's grounds beautiful

By Diana Marshall, Education Coordinator
Education and Development Department

As an OSH employee, I am proud of our hospital. With all the new trees, flowers, bushes and grass, I want to do my part to keep the campus looking beautiful. As a smoker, this means making sure that my cigarette butts don't end up on the ground.

Although OSH, like all state buildings, is a non-smoking facility, many smokers use the city-owned sidewalks along Center Street or 24th Street to smoke. However, with no ashtrays or trashcans nearby, this always leads to the same question: "Where do I put my cigarette butts?"

I don't want to see the campus littered with cigarette butts, and I have spoken with other staff who feel the same way. Now, with the teamwork of Deputy Superintendent Lee Hullinger, a non-smoker, I think we have come up with an idea that just might work. We're calling it "Box your Butts."

It's a simple solution — stop by my office (EDD, third floor of Kirkbride) any time, Monday through Friday, 7 a.m. to 4 p.m., and I'll give you a small, washable and re-useable plastic box that you can use to store your extinguished cigarette butts until you can dispose of them at a later time. The box is small enough to easily fit into your coat or pant's pocket, so there's no reason not to carry one.

Stop by EDD to pick up your box, and let's all do our part to keep the OSH grounds looking beautiful.

Please note: No OSH funds are used to purchase boxes for storing cigarette butts.



After finishing a cigarette during her break, Education Coordinator Diana Marshall places the extinguished butt into a plastic box until she can dispose of it. These small, reusable boxes are part of the new "Box your Butts" effort to keep the hospital grounds clear of cigarette butts. If you're a smoker, stop by EDD to pick up your box today.

Your wellness update

By Erica Johnson, RD, LD, Clinical Dietitian
Food and Nutrition Services

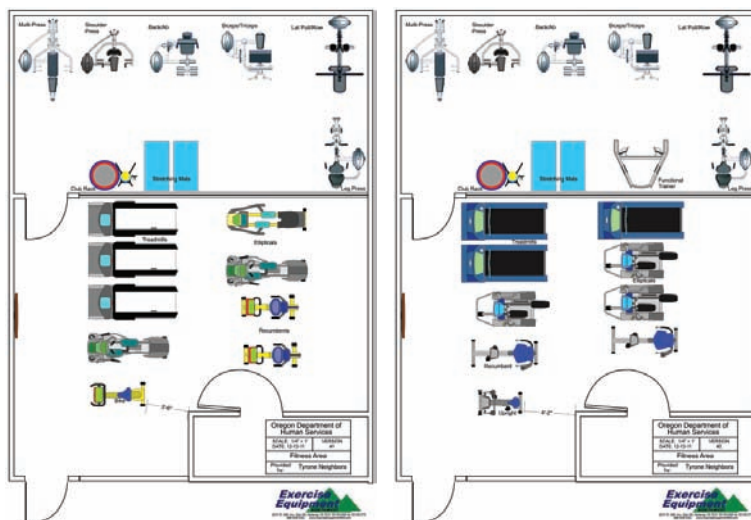
As the Wellness Committee continues to work toward increasing the wellness offerings at OSH, we'd like to update you on some of our projects:

- **Wellness Committee folder:** There is now a Wellness Committee folder available to all staff (both Portland and Salem) located on the I-drive at I:\Wellness Committee. Here you will find wellness information, meeting minutes and the preliminary fitness room designs. Please take a few minutes to check out the folder and let us know what you think.
- **Fitness room:** The staff fitness room has sparked a great deal of conversation. At this time we have two proposed layouts for the space (available to view in the Wellness Committee folder) — one with all Paramount equipment and the other with Paramount weight machines and Precor cardio machines. I want to stress that we are still in the planning phase for this area — nothing has been decided, and suggestions are welcome. Our intent is to have two rooms available 24/7 for all staff to use during scheduled breaks and off-time hours. The committee is working to obtain the necessary funds to stock the room with commercial-grade exercise equipment. Staff who choose to use this space will likely have to pay a small monthly fee (in the \$5 to \$10 range). These funds will go toward services not provided by the hospital, such as cleaning the area, linen service and the ongoing maintenance of the machines.
- **Campus walking routes:** A campus loop map created by the Safety Department will soon be available on the I-drive as well. The map will include checkpoints with directions on how to accumulate “steps” to help you reach your walking goal. We'll let you know when the map is available.

Other wellness ideas under consideration include:

- Bike boxes – indoor bike storage during work hours;
- Resource list – list of mind, body and wellness classes available in the Salem and Portland areas, as well as fitness clubs that provide discounts to state employees;
- Library – education materials such as books and DVDs that can be checked out by staff;
- Walking groups – one of the easiest and cheapest ways to get exercise is walking. We encourage staff to coordinate walking groups during their break or lunch time.

If you have any questions regarding the Wellness Committee or would like to be added to the Wellness Committee listserv, please contact **Erica Johnson** at **503-945-9892**.



Informing the pursuit of excellence

By *Bob Gebhardt*,
Director of Quality Management



Happy New Year! As 2012 gets underway, I wanted to take a moment to let you know about some of the recent changes made in Quality Management (formerly the Health Information Group). Quality Management staff are excited about these changes, which position us well to serve you in the new year and beyond.

As part of the Excellence Project, the Health Information Group was transformed into the Quality Management Department late last year to provide a wide array of services more clearly aligned with OSH's vision of hope, safety and recovery for all. Our mission: To provide support for data-driven solutions in the relentless pursuit of clinical excellence.

This change led to the names of our five departmental units being updated to more appropriately reflect the essence of their work, while emphasizing our commitment to quality and excellence.

There's no quality without 'u'

Everyone at OSH, no matter what you do, plays an important role in helping the hospital achieve its goal of becoming a world-class psychiatric treatment facility. Through the use of quality objectives and measurements, QM provides services designed to give you the tools and information you need to work toward this goal.

As the new director of Quality Management, I am truly excited about working with the exceptional people who make up the OSH community and the superb work being done every day to turn our vision into a reality. We look forward to working with you and we'll let you know more about our services in future editions of "The Recovery Times."

Informing the Pursuit of Excellence

For more information on the Quality Improvement Department, contact **Bob Gebhardt** at **503-945-9403**.

Below you'll find the new name for each of QM's units, as well as the unit's supervisor and contact information. Please feel free to contact any member of the leadership team at any time. We look forward to hearing from you.

New department/unit	Former name	Leadership contact	Phone
Quality Management	Health Information Group	Bob Gebhardt	503-945-9403
Health Information	Medical Record Services	Joni Detrant	503-945-2981
Standards & Compliance	Quality Improvement	Ted Ficken	503-945-0916
Performance Improvement	Lean Team – Strategic Planning	Derek Wehr	503-945-9034
Data & Analysis	PAR (Planning, Analysis & Research)	Aaron Dunn	503-947-1029
Technology Services	Technology Services Management	Dan Pasch	503-945-9795

Staff, consumers work together to improve trip slip process

By Amanda Rillema, Lean Leader
Office of Performance Improvement



The trip slip RPI team: (from left) Alberto Guillen, Mike Pantalone, Chuck Porter, Trevor McMurray, Yvonne Blakemore, Kristen Newton, Michelle McGraw-Hunter, Katie Hurckes, Amanda Rillema; (front row, from left) Michelle Swanger, Chattie Miranda.

Supervised trips into the community are an important part of recovery for many of our patients. Whether they need off-grounds medical services, are part of a treatment group focused on community reintegration or are volunteering, these trips allow them to practice social skills and start the process of learning to readjust to life outside the hospital.

The new Bridges and Trails treatment malls and the higher-functioning population these programs serve has created an increase in the number of “trip slips” — requests for community outings. The rise in requests also brought to light several issues with the hospital’s convoluted off-grounds authorization process. To address these concerns, a rapid process improvement (RPI) event was chartered and held in early November.

Trip slip RPI

Staff from Social Work, Nursing, Rehabilitation

Services, Security, and program and mall directors participated in the four-day RPI, with the goal of creating an improved, streamlined process that allows patients meeting certain criteria to take part in off-grounds trips while continuing to ensure risk management integrity is upheld.

The team received valuable input from two of our consumers. Among their concerns was the lack of transparency in the approval process. The paper-based system made it difficult to track where their request was in the process, which often led to anxiety over whether or not it would be approved in time. The consumers also asked for early feedback on trip request problems so they would have time to rewrite a pass if necessary. Finally, the consumers stressed their belief that the outings are a critical part of their recovery — they not only help them with community reintegration, but the trips also give them hope for discharge.

The future state of trip slips

Working together, the team crafted a future state approval process that is timely, standardized and ensures risk management and integrity. Some of the changes and highlights include:

- Interdisciplinary treatment (IDT) teams will play the primary role in determining whether a client goes on an outing. Taking into account each client’s individual treatment care plan goals, the IDT will assess the client’s need for the outing and determine how potential risks will be mitigated;
- No more paper — trip slip requests will be submitted and processed electronically;
- The number of people involved in the process will be reduced from 21 to five;

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OSH Human Resources positions: Employee management coaches

By *Patty Foster, Workforce/Recruitment Consultant*
Human Resources Department

During the past several months we have been taking a closer look at the specialty areas that make up the Human Resources Department. In the October edition of “The Recovery Times,” we introduced you to our workforce/recruitment consultants, and last month we discussed the role of our labor relations coaches. This month we’ll take a look at our final specialty area — employee management coaches (EMC).

Last, but certainly not least, employee management coaches have a variety of responsibilities, from assisting staff who have exhausted their Family Medical Leave Act and Oregon Family Leave Act benefits, to handling mandate requests for their assigned areas.

Other responsibilities include:

- Serving as part of the leadership team for their assigned areas;
- Consulting with managers — individually or in small groups;
- Consulting with individual staff and in tandem with their managers;
- Collaborating with union stewards, union representatives, managers and other staff to explore issues and identify common interests in line with staff development and training requirements;

- Supporting the development of training plans for their assigned areas;
- Driving the development and implementation of a work force strategy for the assigned areas;
- Supporting the sourcing strategies used within their assigned areas;
- Driving the rollout of “People Programs” such as a leadership model, performance feedback model and succession planning within their assigned areas.

For more information about the Human Resources Department, please contact **Patty Foster** at **503-945-7135**.

OSH employee management coaches and their areas of responsibility:

- **Luisa Amori** — non-nursing areas
503-945-2819
- **Audray Minnieweather** — nursing areas
503-945-2818

Recognizing your hard work – OSH’s Employee Recognition

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number of great ideas we’re excited about, and we look forward to helping everyone recognize the good work that is being done every day at OSH.

For more information on the Employee Recognition Committee, please contact Chairperson **Sara Walker** at **503-945-8872**.

Mindfulness helps OSH patients recover from mental illness

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to accept the present moment and the way things are in that moment instead of focusing on how you want them to be.”

Because our brains are constantly moving from one thing to the next, this is not as easy as it may sound. But with time and practice, patients gain increased control over their emotions, develop empathy and learn to manage their stress, pain, fear and anxiety. Best of all, mindfulness techniques can be used in any situation or setting.

“It’s a Swiss army knife type of skill,” Weitzman said “Whatever you’re doing, mindfulness can make it that much more effective and improve your quality of life.”

Through regular practice of mindfulness techniques, patient Kimberly Murphy recently took a major step forward in her treatment.

“I’ve gotten to the point that they took me off my medication a couple weeks ago to see how well I can use what I’ve learned to deal with my mental illness,” Murphy said. “So far, it’s going really good.”

While not every patient can get to this point, mental health specialist and yoga instructor Cary Fairchild said those committed to adopting mindfulness practices as part of their life will become more resilient and well-adjusted people.

“You learn to let things come and go, because the struggle and suffering actually comes from grasping after pleasure and pushing away pain,” Fairchild said. “When patients learn these skills, it’s amazing and can actually lead to a big transformation in their life.”

HEART responders are here to help

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incident stress management who volunteer to serve as responders for their coworkers in need. Nearly every discipline at OSH is represented on the team, which means HEART can provide you with a peer responder in your discipline or one that is closely related.

Using peer-based methods, HEART acts as a sort of “triage,” providing the tools to help you effectively cope with critical incident stress. HEART is not counseling – it’s a service that helps facilitate natural healing and recovery by giving you a chance to discuss the event and the feelings it produced. HEART is a confidential service; nothing you say is ever written, recorded or reported.

No one should ever feel their event is too insignificant or trivial to receive services. While many may associate trauma with extreme events such as death, serious injury, assault, sexual abuse, suicide or a serious suicide attempt, traumatic incidents are not limited to acts of

violence. Any incident that causes psychological distress is traumatic —it’s your perception of the crisis that matters rather than the crisis itself.

As hospital staff are becoming more aware of the benefits HEART can provide, we have seen an increase in service requests, but a large number of incidents still go unreported. There is no reason for you or your coworkers to suffer in silence, when free relief is available 24 hours a day.

Remember, both your coworkers and our clients depend on you to be at your best, and mental fatigue will lead to burnout. If you or someone you know needs help, please contact HEART Trauma Response Coordinator **Julee Engelsman** at **503-945-9470** or by Blackberry 24 hours a day at **503-932-6644**.

We are here to help.

Reconnecting with culture helps OSH patients work toward recovery

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OSH patient David Barrick takes part in a smudge ceremony with Rehabilitation Therapist Mike Patton. In Native American culture it is believed that the smoke both purifies people and carries their prayers to Creator. Smudges are held on a regular basis as part of the hospital's Native American services program.

have integrated elements of their culture into their treatment. The impetus for this change was a 1996 agreement between Oregon and the state's nine federally recognized tribes that established a government-to-government relationship between the parties.

Today, OSH offers its patients regular smudge and sweat ceremonies, as well as a popular 12-step group known as Red Road to Wellbriety, which combines Native American beliefs with recovery concepts from Alcoholics Anonymous. Patients can also participate in a wide range of groups and classes focused on Native American history and traditions. These types of activities help patients connect with their culture and develop a sense of identity.

"To know where you're going, Natives believe you must first know where we've been," Prater said. "The classes are like putting pieces of a puzzle together, and then they can start to sort out their own identity. This also opens up the door for therapeutic interactions about their feeling and emotions around some of the events that happened to their ancestors."

While the groups and ceremonies are geared toward patients with Native American heritage, they are open to anyone.

"There's just something about the Native American way and culture that speaks to a lot of the difficulties that people with mental health issues face," Prater said. "There's a spiritual piece and message that I think our residents here are really in tune with and appreciate."

That message, which is centered on the idea of letting go of their anger and embracing ideas such as acceptance and forgiveness, often helps patients – no matter what their background – quit looking back and, instead, focus on what's ahead.

"If you carry the anger around with you, eventually it's going to turn in on you and you're going to become a hateful person," said Sonny Sage, a member of the Blackfoot Tribe in the Teton Mountain Range. "Our past isn't the greatest thing to look back on sometimes, so as a Native American, I now look ahead to the future."

Staff, consumers work together to improve trip slip process

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- All trip slips will be saved electronically in a central location accessible to any staff. This will ensure transparency in the process and help prevent lost trip slips.

On Dec. 13, the team met with the Superintendent's Cabinet to discuss the progress of the new trip slip process. At this time, 93 percent of the team's assigned action items had been completed, and they presented Cabinet with a prototype of the new trip slip form.

Team members also explained their three-phase plan to roll out the new trip slip form and procedure. This

plan will begin in January 2012 and includes detailed training and pilots, with the goal of hospital-wide implementation by March 2012.

Once the implementation plan is finalized, we will share additional information, including training times and dates.

If you have any questions about the trip slip RPI, please contact team leaders **Sue Zakes** at **503-945-9870** or **Amanda Rillema** at **503-945-7792**.

January 2012 EDD events

The following is a list of classes being offered at the OSH Education and Development Department (EDD) during January. Classes are located at EDD unless otherwise noted. For more information about these classes, call 503-945-2876.

Avatar training

Held in 310 Computer lab

Jan. 10 (8 a.m. to 5 p.m.) **CMA/RN/LPN**

Jan. 11 (8 a.m. to 5 p.m.) **RN**

Jan. 24 (8 a.m. to 5 p.m.) **CMA/RN/LPN**

Jan. 25 (8 a.m. to 5 p.m.) **RN**

Pro-ACT refresher

Held in 40C room 212

Jan. 3 (8 a.m. to 5 p.m.) **Day 1**

Jan. 4 (8 a.m. to 12 p.m.) **Day 2**

Jan. 5 (8 a.m. to 5 p.m.) **Day 1**

Jan. 6 (8 a.m. to 12 p.m.) **Day 2**

Jan. 17 (8 a.m. to 5 p.m.) **Day 1**

Jan. 18 (8 a.m. to 12 p.m.) **Day 2**

Jan. 19 (8 a.m. to 5 p.m.) **Day 1**

Jan. 20 (8 a.m. to 12 p.m.) **Day 2**

General orientation

Held in 342 Leadership Classroom

Jan. 9-13 (8 a.m. to 5 p.m.) **Day 1-5**

Jan. 17-18 (8 a.m. to 5 p.m.) **Day 6-7**

Jan. 23-27 (8 a.m. to 5 p.m.) **Day 1-5**

Jan. 30-31 (8 a.m. to 5 p.m.) **Day 6-7**

ED day/CPR

Held in 344 / 346 Integrity / Health Equity

Jan. 10 (8 a.m. to 5 p.m.)

Jan. 24 (8 a.m. to 5 p.m.)

FPS nursing orientation

Held in 344 / 346 Integrity / Health Equity

Jan. 26 (8 a.m. to 5 p.m.) **Room 344**

Contractor orientation

Held in 306 Service Excellence

Jan. 13 (9 a.m. to 11 a.m.)

Motivational interviewing

Held in 344 / 346 Integrity / Health Equity

Jan. 19 (8:30 a.m. to 2:30 p.m.) **Room 344**

CMA pharmacology

Held in 306 Service Excellence

Jan. 18 (1 p.m. to 5 p.m.)

CADC DSM IV

Held in 344 / 346 Integrity / Health Equity

Jan. 11 (3 p.m. to 5 p.m.) **Room 344**

Trauma informed care

Held in 306 Service Excellence

Jan. 12 (8 a.m. to 11 a.m.)

START training

Held in 308 Partnerships

Jan. 18 (9:30 a.m. to noon)

Learning styles- co-worker dynamics

Held in 308 Partnerships

Jan. 19 (1 p.m. to 4:30 p.m.)

FPS nursing orientation

Held in 344 / 346 Integrity / Health Equity

Jan. 26 (8 a.m. to 5 p.m.) **Room 344**

Volunteer orientation

Held in 308 Partnerships

Jan. 27 (8 a.m. to noon)