

Oregon shifts to new model for psychiatric-patient care

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It's morning break time and the students begin to pour from the classroom doors, filling the hallways with chatter and laughter as they share stories and compare notes.

The flurry of activity could describe any common area where students congregate. But in this scenario, the setting is not academic. The students are patients and their campus is Oregon State Hospital.

Each weekday, dozens of OSH patients leave their wards or cottages to attend classes and participate in leisure activities in a centrally located, school-like setting called a treatment mall. This is the centralized system of care model that has become the accepted standard of practice being implemented nationally and internationally by psychiatric hospitals.

New and renovated psychiatric hospitals are employing a community design of centralized care where the patients' living areas are connected to a "neighborhood" mall that connects to a larger "downtown" mall so that patients can access all services provided in the facility and have more opportunities for healthy socialization.

For instance, a patient may attend a support group meeting in the neighborhood mall and then go to the downtown mall to access a gymnasium or fitness center, library, boutique, canteen, post office, bank, classrooms, music room and art therapy room.

Oregon, too, will provide this centralized system of care with the neighborhood and downtown malls in its new psychiatric hospital, scheduled for completion in 2011. Current OSH staffers, however, are not waiting for those doors to open to begin creating an environment conducive to recovery and a rehabilitative environment that promotes autonomy, hope, self-esteem and personal responsibility.

OSH is operating three treatment malls in Salem and Portland and will open another this fall. To date, participating patients report that they feel they have more control over their care and that the treatment malls afford opportunities to develop social and relationship skills, manage medication and avoid relapse and enjoy activities such as cooking, gardening and music therapy.

Patients need such skill- building and educational interventions to help them recover and increase their ability to live and work independently after their release from the hospital. There is growing evidence that this centralized model can provide lasting benefits, including a decrease in hospital readmission rates, increased skills in symptom management and improved quality of life.

In the past, all of a patient's meals, care and treatment have been provided on the ward. Activities were limited, and patients spent a lot of time sleeping and watching TV. In contrast, the new model encourages patients to engage in activities during treatment hours rather than allowing them to isolate in their bedrooms, TV rooms or other nontreatment rooms. And while patients live on a unit, they receive treatment, eat meals, attend classes and participate in

activities in the mall areas.

Oregon is committed to this continued shift to a centralized recovery care model that is consistent with national trends. Investing and supporting the centralized treatment model with its neighborhood and downtown mall concept will greatly improve the lives of Oregonians who have a mental illness by ensuring that their return to their families and communities is timely and their long-term recovery is successful.

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