

OSH PATIENT HANDBOOK

Under PSRB

(Psychiatric Security Review Board)



Oregon
Health
Authority



OSH Under PSRB Handbook
Revised February 2020

Welcome, vision and mission

Welcome to Oregon State Hospital. Our role is to provide you with a safe and comfortable place where you can work on your health and wellness goals.

We know everyone's circumstances are different. By working with your treatment team, we will help you create your own plan to meet your treatment goals.

This handbook will help you learn more about Oregon State Hospital and answer some questions. If you still have questions after reading this guide, feel free to ask any of your treatment team members for help.

Our vision

Oregon State Hospital is a psychiatric hospital that inspires hope, promotes safety and supports recovery for all.

Our mission

Our mission is to provide therapeutic, evidence-based, patient-centered treatment that focuses on recovery and community integration in a safe environment.

What recovery means

Oregon State Hospital recognizes recovery as a process of change through which individuals improve their health and wellness, live self-directed lives, and strive to reach their full potential. Recovery is built on self-determination and access to evidence-based clinical treatment and recovery support services for all.



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A culture of respect

Oregon State Hospital is an inclusive place. Everyone shares the responsibility for helping people here feel safe. That's why each person needs to treat others with dignity, support and respect. Please respect people's personal space and property.

Hospital staff also strive to meet the cultural and diversity needs of patients. Language interpreters are available to help patients communicate with others, and a broad variety of support groups are here to cater to patients' specific needs. A few examples include groups for veterans, people who hear voices, and people who identify as lesbian, gay, bisexual, transgender/transsexual, questioning/queer, intersex and asexual/allies (LGBTQIA).

Hospital staff value people from all cultures, faiths, races, backgrounds, sexual orientations, gender identities, ages and abilities. Everyone plays a part in making sure patients and staff feel comfortable and protected.

If, at any time, you feel discriminated against, or if someone is not living up to the culture of respect at the hospital, please

- Speak with a staff member;
- Report to the Office of Training, Investigations and Safety (OTIS) at 503-689-5076 or 800-406-4287;
- Contact the Peer Advisory Council (PAC) at 503-490-4066; or
- Call Consumer and Family Services at 503-947-8109 in Salem or 541-465-2785 in Junction City.



How long will I be here?

Patients come to the hospital for different reasons, so different rules apply to their hospital stay. The information below outlines the discharge process for your commitment type.

Why you are here

You are here because you were found Guilty Except for Insanity (GEI) of a crime. You are under the jurisdiction of the Oregon Psychiatric Security Review Board (PSRB), and the court decided you need hospital-level care to help you get better. People who plead GEI are usually under the jurisdiction of the PSRB for the maximum time they would have been sentenced if they had been convicted of their crimes.

Length of stay

The hospital's goal is to support your recovery and eventual conditional release from the hospital. This varies by person.

The PSRB decides when you may leave the hospital, based on your level of safety and recovery. As you recover, your treatment team will make every attempt to assist you with community placement.

What is a “conditional release”?

A conditional release means you are released from the hospital but are still under the jurisdiction of the PSRB. The PSRB may have different requirements for each individual related to their conditional release. For example, you may be required to participate in a specific kind of treatment or live in a certain part of the state.

The PSRB will continue to supervise you when you are no longer at the hospital. If you don't follow the conditions outlined in your release plan, the board may require you to return to the hospital. This is called a “revocation.”

Members of the PSRB include a psychiatrist, psychologist, lawyer, probation officer and a member of the public. None of the PSRB members work for Oregon State Hospital or the Oregon Health Authority.

How can I get conditionally released?

Before you can get conditionally released, your treatment team has to agree that you are ready for conditional release. Then the hospital's Risk Review group must agree you are ready for conditional release. At that point, the PSRB will be asked to approve a request for community evaluation by a community provider – such as someone who runs a group home.

The community provider will review your case for placement in their program or facility. If the provider thinks the placement is beneficial to you and the community, he or she will work with your treatment team to form a conditional release plan. The PSRB holds a hearing to decide if you should be conditionally released from the hospital.

For more information about when you can get out of the hospital, please talk to a member of your treatment team.

Your responsibilities

Staff need your input on how they can best meet your needs. Listed below are some of your responsibilities. Hospital patients provided the quoted information:

- Follow the hospital's instructions, policies and procedures, which are designed to support you and keep everyone safe. Please contact the Peer Advisory Council for more information, or if you need a copy of a policy.
 - ▶ *"If you are given conflicting information from staff, you can ask for a copy of the policy or procedure."*
- Try to communicate with others in a respectful and considerate manner.
 - ▶ *"When people get frustrated, it's easy to swear and talk louder. Please do your best to stay calm and address people peacefully."*
- Show consideration for other people's property.
 - ▶ *"If it is not yours, don't touch it."*
- Share your ideas to improve quality of care by filling out continuous improvement sheets, surveys, grievances, or by participating in Peer Advisory Council.
 - ▶ *"If you are not pleased with current treatment options, you need to share your opinion and ideas with others if things are to change."*
- Participate in treatment.
 - ▶ *"You're in control of what you get out of (treatment)."*
- Safety is a priority at OSH. Please be considerate of others.
 - ▶ *"OSH promotes the philosophy that 'people do well if they can.' There may be times some people don't feel safe, so it's your responsibility to let someone know how you feel. You can reach out to a staff member you trust for help."*



Patient rights

All patients retain their rights as provided by state and federal law. **There are rules and policies related to each of these rights to address safety and security concerns.**

Please refer to the appropriate section of your handbook for more information.

Disclaimer: The following is for informational use only and is not intended or implied to substitute for state and federal laws and regulations. For specific information, see ORS 430.210; OSH Policy 7.005 (Patient Rights); and program rules.

Patients have a right:

- To recognition, respect and dignity as an individual;
- To be treated under the least restrictive and most inclusive conditions and not be subjected to unnecessary physical restraint and seclusion;
- To be free from abuse or neglect, and to report abuse without being punished;
- To a humane living environment that affords reasonable protection from harm, and affords reasonable privacy;
- To impartial access to treatment, regardless of race, religion, gender, ethnicity, age or handicap;
- To be informed of the facility's rules and regulations regarding their conduct;
- To be visited by your friends, family, advocates and legal professionals – provided they are approved by both security and their treatment team;
- To send and receive mail;
- To be furnished with a reasonable supply of writing materials and stamps;
- To reasonable access to telephones;
- To participate in decisions concerning the limitation of visitors, telephone calls or other communication;
- To religious freedom;
- To daily access to fresh air and the outdoors;
- To wear your own clothing;
- To a private storage area and access to it;
- To be given reasonable compensation for all work performed, other than personal housekeeping duties;
- To participate in your plans for individualized treatment and discharge, explained in terms they can understand;
- To review your individualized treatment plans;
- To confidentiality of your medical and mental health records;
- To not receive services without informed consent, except in a medical emergency or as otherwise permitted by law;
- To receive medication only for your clinical needs;
- To be informed of benefits, possible side effects, and risks of medications and treatment procedures;
- To decline medication and treatment to the extent permitted by law; and to be informed of the medical consequences of your actions;

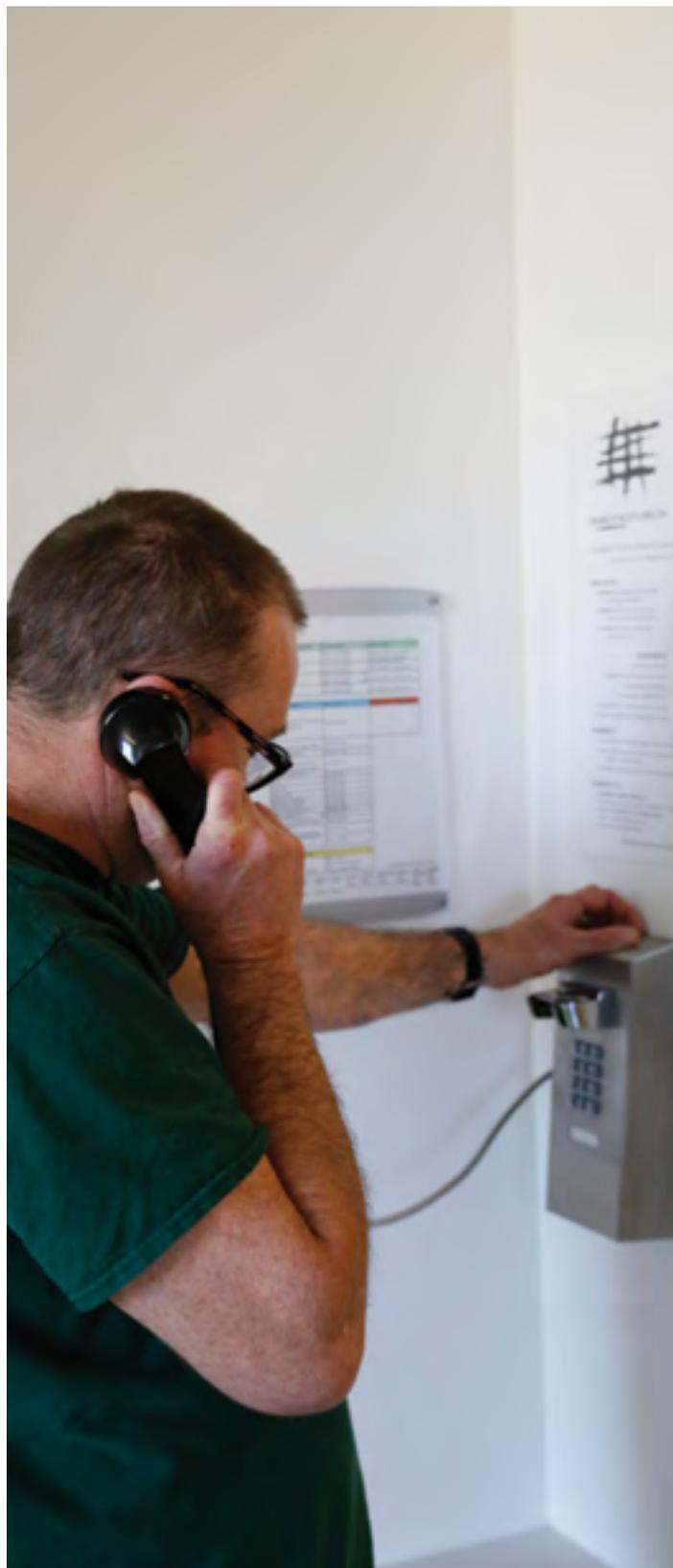
Patient rights continued

- To develop advance directives for your care in the case of future serious medical or psychiatric illness;
- To access your medical and mental health records upon approval from the treatment team;
- To not participate in experimental medical treatment or research without voluntary informed written consent;
- To submit grievances regarding the violation of patient rights and to have those grievances reviewed in a fair, timely and impartial way, and
- To exercise the rights specified in this document without any form of retaliation or punishment

If you have questions or concerns about issues related to these rights, you can:

- Talk with staff on your unit and your treatment team
- Contact OSH Consumer and Family Services
 - ▶ Salem: 503-947-8109
 - ▶ Junction City: 541-465-2785
- File a grievance
- Contact the following:
 - ▶ Centers for Medicare and Medicaid Services (CMS) at 800-447-8477;
 - ▶ The Joint Commission at 800-994-6610;
 - ▶ Disability Rights of Oregon at 800-452-1694;
 - ▶ the Office of Training, Investigations and Safety (OTIS) at 503-689-5076 or 800-406-4287; or
 - ▶ an attorney.

More information on these organizations is available in the Resources section of your handbook.



Grievances

If you have a concern or a problem, the staff on your unit and your treatment team are available to help you. Your first step is to talk with them in person, or write your concerns down on a piece of paper and give it to them. They will work with you to try to find a solution.

If you continue to have concerns, you can use the patient grievance process. To file a grievance:

- Ask staff on your unit for a grievance form. They can help you find a form, or fill one out, if needed.
- Fill out the form and turn it in to the grievance box on your unit.
- Staff will meet with you to review your grievance and work with you to help solve your problem.

*If you are not satisfied with the grievance response, or if staff don't respond to your grievance within 20 days, you can request an appeal. You must request the appeal within 14 days of receiving your response.

Please refer to the grievance instructions available on your unit for more information about the grievance process. Let staff know if you would like a copy of the Patient Grievance policy (7.006).

If you have questions or concerns about the OSH Grievance process, please contact Consumer and Family Services at 503-947-8109 in Salem and 541-465-2785 in Junction City.



Accessing your medical records

Under Oregon law, you have the right to request access to your own medical records. To make this request, ask unit staff for a copy of the “Request for Access to Records” form. Once you fill out the form, return it to someone on your treatment team.



A few things to keep in mind:

- Your doctor or nurse practitioner has five days to approve or deny your request. They can only deny your requests under limited circumstances.
- If approved, the hospital has five days to get the information to you. Depending on how much information you seek, some requests may take longer. If you don't receive it, follow up with your treatment team.
- You have the right to appeal a denial. Please see the “Request for Access to Records” form for additional information.
- If you believe information in your medical record is inaccurate, you have two options:
 1. For information that can be verified – such as your birth certificate or Social Security number – submit a “Request for Amendment of Health Record” form along with the supporting documentation (such as your birth certificate) to your treatment team.
 2. If you disagree with anything your doctor, nurse or other care giver added to your medical record, you can submit a “Patient Statement” form with your treatment team. This will become part of your medical record.

If you have questions about this process, or if you need help with filling out the forms mentioned above, please talk to someone on your treatment team.

Medical care

Your mental AND physical well-being are equally important. The nurses on your unit are here to help you get the attention you need – whether you have a bad cold, a toothache, or require more serious medical treatment.

Your unit nurses are the first people to talk to if you have questions about your health. Together, you will review your medications, treatments, symptom management and other useful information. They make sure the right people are contacted when you have questions or request information.

While you are at the hospital, you will be assigned a primary OSH medical practitioner from the hospital's clinic. The OSH medical clinic either has the following medical professionals on site or will refer you to a medical professional in the community. Some specialists may also come to OSH, as needed:

- Medical doctors (MDs)
- Nurse practitioners (NPs)
- Registered nurses (RNs)
- Licensed practical nurses (LPNs)
- Dentists
- Physical therapists
- Pharmacists
- Lab technicians
- Clinical dietitians
- X-ray technicians
- Cardiologists (heart doctors)

- Neurologists (doctors who specialize in the nervous system)
- Optometrists (eye doctors)
- Podiatrists (foot doctors)

The hospital is able to meet most of your medical needs through its clinics. However, if you need specialty care we do not provide, we will make an appointment with a specialist outside the hospital.

When may I talk to my medical doctor?

If you have concerns about your medical treatment or medications, you may request to speak with your medical doctor by asking one of your unit's nurses.

If you have an emergency, do not wait for these specific people. Contact any staff member immediately, and let them know what the emergency is.



Medications

Your doctor or psychiatric mental health nurse practitioner (PMHNP) may prescribe medication as a part of your treatment. You may take some of the medications on a regular basis, while others may be made available for you when you need them. Feel free to talk about your medications with your doctor, nurse or a pharmacist. They can answer your questions about new or worsening symptoms or side effects of the medications. They can also adjust your treatment, if and as needed.

Please come to the medication room window to receive your medication. Usual medication times are 8 a.m., noon, 4 p.m. and 8 p.m., but this could change depending on your individual needs. Unit staff will let you know when you can get your medications.

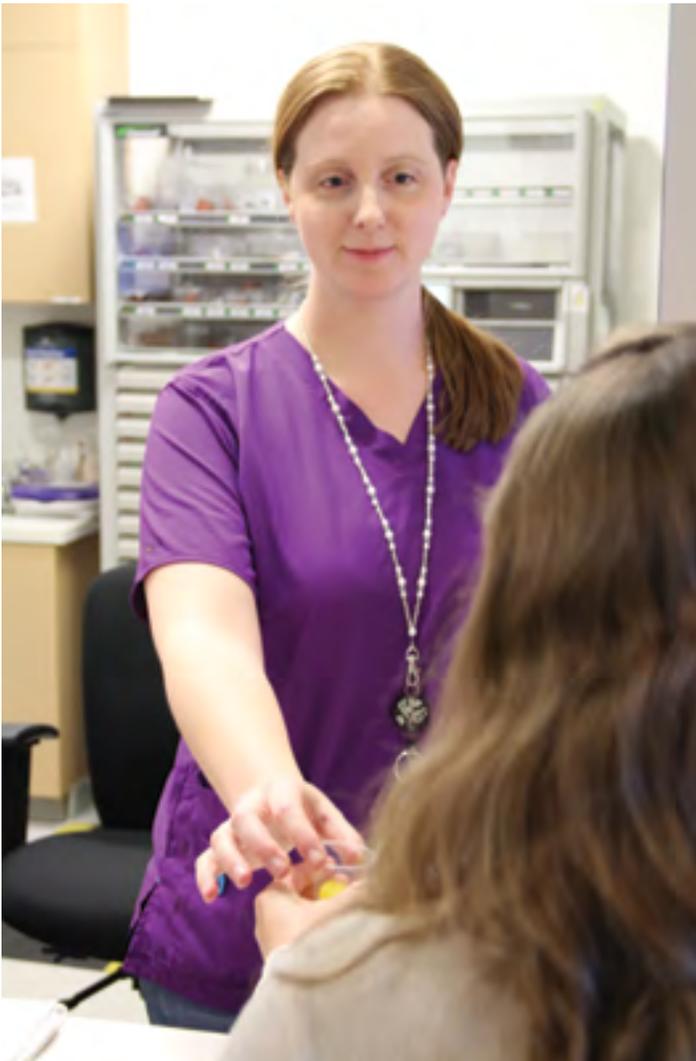
Every time you receive medications, nurses are required to ask for your name and date of birth to make sure they give the right medications to the right person at the right time. Please know there may be a wait involved to receive your medications.

If you have concerns about receiving the correct medications, you can always request to see your medication package before it's opened.

For more information, talk with unit staff, your treatment team, or request to talk to a pharmacist.

Informed consent

For many people, taking medication can be an important way to stabilize the symptoms of a mental health disorder. Your psychiatrist or nurse practitioner will meet with you to discuss the benefits, risks and alternatives to medications, as well as the option of not taking medications. Be sure to talk to your doctor or psychiatric mental health nurse practitioner if you are interested in taking medications.



Medications continued

Do I have to take medication?

The hospital can require you to take prescribed medication without your permission if there is an emergency, such as:

- A doctor or nurse practitioner must give you medication immediately to save your life or health; or
- Your behavior makes it likely that you could hurt yourself or someone else at the hospital unless you are medicated.

Can the hospital require me to take medication if there is no emergency?

If there is no emergency, the hospital can require you to take medications only if:

- Your guardian decides you need medication treatment*;
- As part of your commitment to the hospital, a judge has ordered that medication be used as part of your treatment (this rarely happens); or
- There is good cause (defined on right)

* Note: You are assigned a guardian if a court has determined you lack the capacity to make medication decisions on your own behalf on an ongoing basis. Your guardian has the legal authority to make decisions for you and can override your preferences concerning medications.

What does good cause mean?

- You can't make your own decisions about whether to take medication because you can't understand and weigh the risks and benefits of the treatment options;
- The medication is likely to help you;
- Medication is the most appropriate treatment for your illness; and
- All other treatments (other than medication) won't help you as well.

What happens if my doctor believes there is good cause to require me to take medication?

The hospital must follow specific steps before giving you medication without your permission:

- Your doctor must meet with you to talk about your medication options, which may include alternatives that could work better for you.
- A second doctor, who does not work for the hospital, must also meet with you. This doctor gives a second opinion about whether there is good cause to require you to take the medication.
- The chief medical officer or superintendent must consider both doctors' opinions and make a final decision about whether there is good cause to require you to take the medication.
- If the chief medical officer or superintendent decides there is good cause to require you to take the medication, you will receive written notice. The notice will tell you about the hospital's intentions and your right to request a hearing if you disagree with the decision.

Medications continued

I received written notice that the hospital has good cause to require me to take medication. What are my options?

You have three options:

1. Agree to take the medication.
2. Talk to your doctor about an alternative that may work better for you.
3. Refuse to take the medication and request a hearing. You can ask for hearings at any time you receive involuntary medications. This information is included in the paperwork you receive when the hospital seeks to treat you without your informed consent. Please note, if there is an “emergency order,” you may have to take the medication before your hearing – despite your objections.

How do I ask for a hearing?

A patient is given notice that they may request a hearing, and then they may verbally ask for one or ask for one by signing the notice.

The written notice from the hospital will include a "Request for Hearing" form. If you do not ask for a hearing within 48 hours of receiving the notice, the hospital can begin treatment. However, you can still ask for a hearing at any time.

For help with representation at hearings, contact Kali Yost, LLC at PO Box 68749, Portland, OR 97268; 503-501-8117; or www.kaliyost.com.

What happens after I fill out and hand in my "Request for Hearing" form?

If you ask for a hearing, an administrative law judge will decide whether the hospital can require you to take the medication. If you want a hearing, fill out the form and give it to any nursing staff member. If you need help filling out the form, nursing staff can assist you. You can tell your doctor or a nurse that you want a hearing.

After you ask for a hearing, you will receive notice telling you the date for your hearing. Your hearing will usually take place within 14 days of the date you turned in your "Request for Hearing" form. During your hearing, you can have your appointed attorney represent you for free. If you choose to have an attorney represent you, he or she will contact you before your hearing. If you choose to have a private attorney at your expense, you must contact that attorney to arrange representation. Your attorney will help you decide if there are any witnesses who have information to help the administrative law judge make the decision.

If the court orders you to receive medication, please work with your doctor and nursing staff on how you would best like the medication administered. If, based upon the evidence at the hearing, the judge determines that the hospital has proved that it has good cause to medicate you, the judge will issue an order authorizing the hospital to give you medications without your consent. You have the right to request reconsideration or appeal within 60 days of the judge's order.

(Adapted from OAR 309-114-0000 through 0025 and Disability Rights Oregon Involuntary Medication Hearing Handbook, first edition- www.droregon.org)

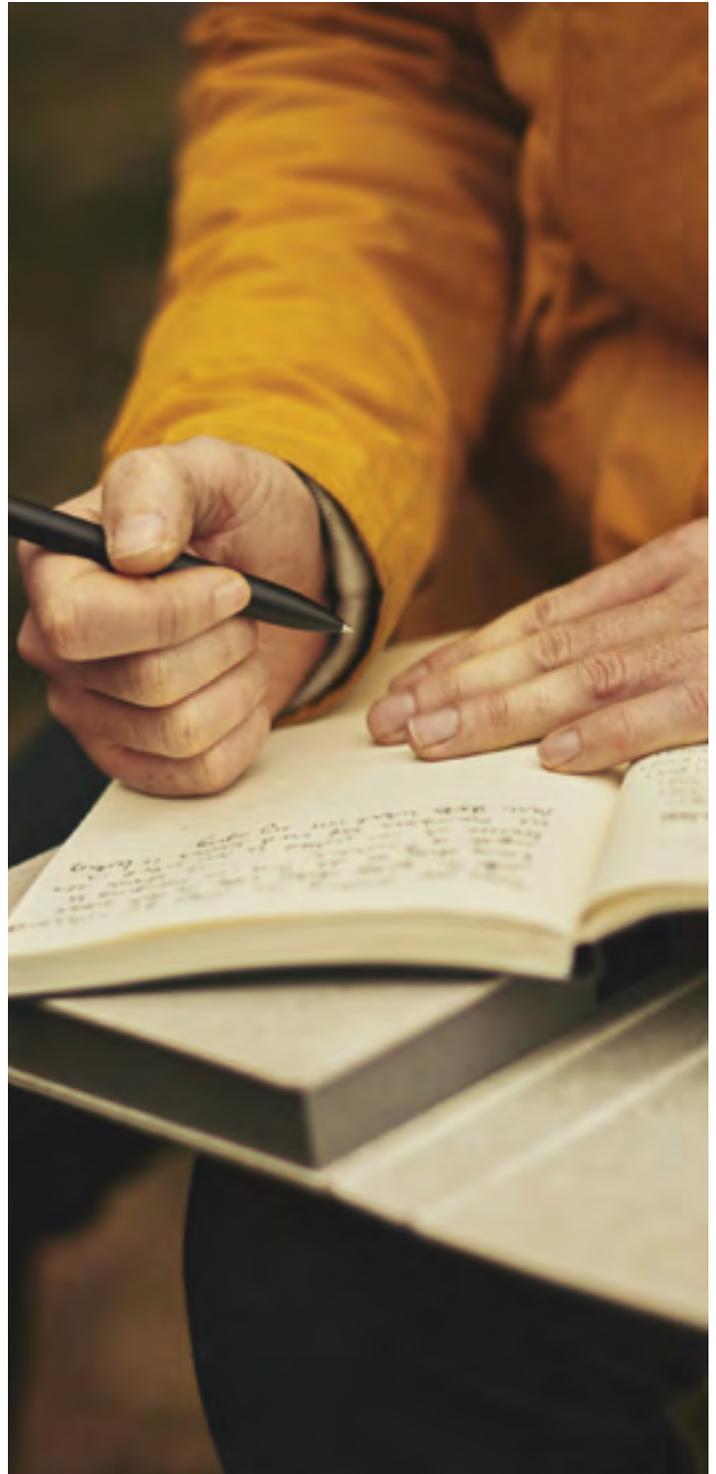
Advance Directives

As a patient at Oregon State Hospital, you have a legal right to complete an advance directive if you “have capacity.” Having capacity means that a court, your physician, or your psychiatric mental health nurse practitioner (PMHNP) has determined you can make and communicate health care decisions to medical providers.

Advance directives are written instructions – such as a living will – that outlines your wishes for health care in the event you are incapacitated. This includes end-of-life medical care and mental health care decisions. These are your expressed wishes; however, court orders, Oregon Revised Statutes and Oregon Administrative Rules may override your wishes while you are in the hospital.

- If you have capacity, the hospital may not limit your right to complete an advance directive.
- Hospital staff must provide you with an opportunity to complete an advance directive, including a declaration for mental health treatment.
- The hospital will honor your right to complete an advance directive and to review and revise your advance directive.
- If you need help completing or updating an advance directive, hospital staff will arrange for assistance.

Oregon State Hospital will make every effort to respect your wishes concerning advance directives. For more information, please ask staff for a copy of Policy 6.025 on advance directives.



Confidentiality

Protecting your health information is a priority for all OSH staff. In addition, the Health Insurance Portability and Accountability Act of 1996 (HIPAA) guarantees certain levels of privacy rights related to your health information.

If you have questions or concerns about how your information is shared or used, please talk to your treatment team or contact Consumer and Family Services at 503-947-8109 (Salem) or 541-465-2785 (Junction City).

While in the hospital, you have the right to:

- Request a copy of your medical record (see the “Accessing Your Medical Record” section of your handbook);
- Request that staff talk to you about your private health information in a private place;
- Add comments to your medical record (see the “Accessing Your Medical Record” section of your handbook);
- Limit the information the hospital shares about your care;
- Find out with whom the hospital has shared information about you;

- File a complaint if you believe your privacy rights have been violated
 - ▶ By using the patient grievance process;
 - ▶ By calling the Department of Human Services/ Oregon Health Authority Privacy Office. For security concerns, call 503-945-6812 or email dhsinfo.security@state.or.us, and for privacy help, call 503-945-5780 or email dhs.privacyhelp@state.or.us, and
 - ▶ By calling the U.S. Department of Health and Human Services Office for Civil Rights at 1-877-696-6775 or by filling out an online privacy complaint form at https://ocrportal.hhs.gov/ocr/cp/wizard_cp.jsf.

How is my information shared by OSH?

Within the hospital, information about your treatment and your stay can be shared between staff, across departments, for the purpose of providing services directly to you.

Outside of the hospital, information may be shared for legal and other reasons.

This includes, but is not limited to:

- Billing for your services;
- Helping with public health and safety issues. For example, OSH is required to report cases of tuberculosis to the Public Health Department, and
- Complying with the law. For example, sharing information with the state’s Psychiatric Security Review Board (PSRB) or as part of a lawsuit.

Confidentiality continued

The decision and process of sharing information outside of the hospital is made on a case-by-case basis. The hospital will never share more information than is absolutely necessary.

How is my information shared with my family and friends?

Friends and family members of OSH patients often call the hospital to find out if their loved one is here, how they can communicate with you, and to find out how you are doing. You might want to share this information with them or involve them in your treatment team meetings.

You decide whether OSH shares information about your hospital stay and your treatment with your family and friends. The hospital must get your permission before staff can:

- Confirm or deny you are a patient at OSH
- Tell your family and friends about your condition or your treatment

To get your permission, we will ask you to fill out a “Disclosure of Hospitalization” form and a “Release of Information (ROI)” form.

A “Disclosure of Hospitalization” form allows the hospital, if you so choose, to confirm you are a patient at OSH. You are required to fill it out, even to note that you don’t want to release your information to anybody. If you don’t fill it out, staff will note your choice in your medical record.

A “Release of Information (ROI)” form allows a specific person to receive information about your treatment and to talk to people on your treatment team. Filling out this form is optional.

Depending on how much information you want shared, you will need to fill out one or both of these forms for each family member or friend you want to receive information. Please talk to staff on your unit or your treatment team for more information. You can choose to withdraw this permission at any time, for any reason.

For more information about how your health information is shared, you can request a copy of OSH’s Notice of Privacy Practices (OHA 2090) from unit staff.

Please know...

Privacy begins with you, for your protection and to protect the rights of others. Please respect other people’s privacy. Example: Give people space at the medication windows, and don’t read other people’s documents.



Who OSH serves

You were found Guilty Except for Insanity (GEI) for criminal behavior related to your mental illness and are under the jurisdiction of the Psychiatric Security Review Board (PSRB). The PSRB placed you in Oregon State Hospital to receive 24-hour care and supervision. See your program guide for more information on the PSRB.

The hospital also serves patients who were committed to the hospital for other reasons:

- **Civil** — People who have been found by the court to be a danger to themselves or others, or unable to provide for their own basic needs – such as health and safety – because of a mental illness
 - ▶ **Voluntary by Guardian** — Working through the court system, legal guardians may admit their wards who meet civil commitment criteria as stated above.
- **Aid and Assist** — People who have been ordered to Oregon State Hospital by the courts under Oregon law (ORS 161.370) for treatment that will help them understand the criminal charges against them and to assist in their own defense



Treatment care plan

A treatment care plan is your roadmap to recovery. Please work closely with your treatment team to create your treatment plan and learn how to participate in your care. To be successful, it's important that you are engaged with your plan and make it your own.

Your treatment care plan includes the following:

What do I need to do to get out of here?

These are the smaller steps you need to take – like participate in treatment and therapeutic activities– to achieve your long-term goals.

What change would I like to see?

You and your treatment team should work together to identify goals you are working to achieve as you prepare to discharge from the hospital.

What am I working on right now?

Here, you can describe the barriers that prevent you from leaving the hospital. They may include things like managing your emotions in a safe way or addressing addictions. You could also include issues that affect your physical health, such as an injury.

How will my team help?

Staff can help you meet your goals. For example, if one of your goals is to earn your GED, staff will refer you to Supported Education to work on this goal.

What are my strengths?

These are the unique individual skills you have – including your abilities, interests and experiences – that you and your team can use to help you achieve your treatment goals.

You and your treatment team will review these areas at each of your treatment team meetings.

Your treatment care plan:

- After your admission, you will have regular meetings with your treatment team to work on your plan and update it during your hospital stay.
- If you would like, you may invite your family members and other people who support you to your treatment team meetings. Staff also may invite someone who is legally responsible for your care, such as a guardian.

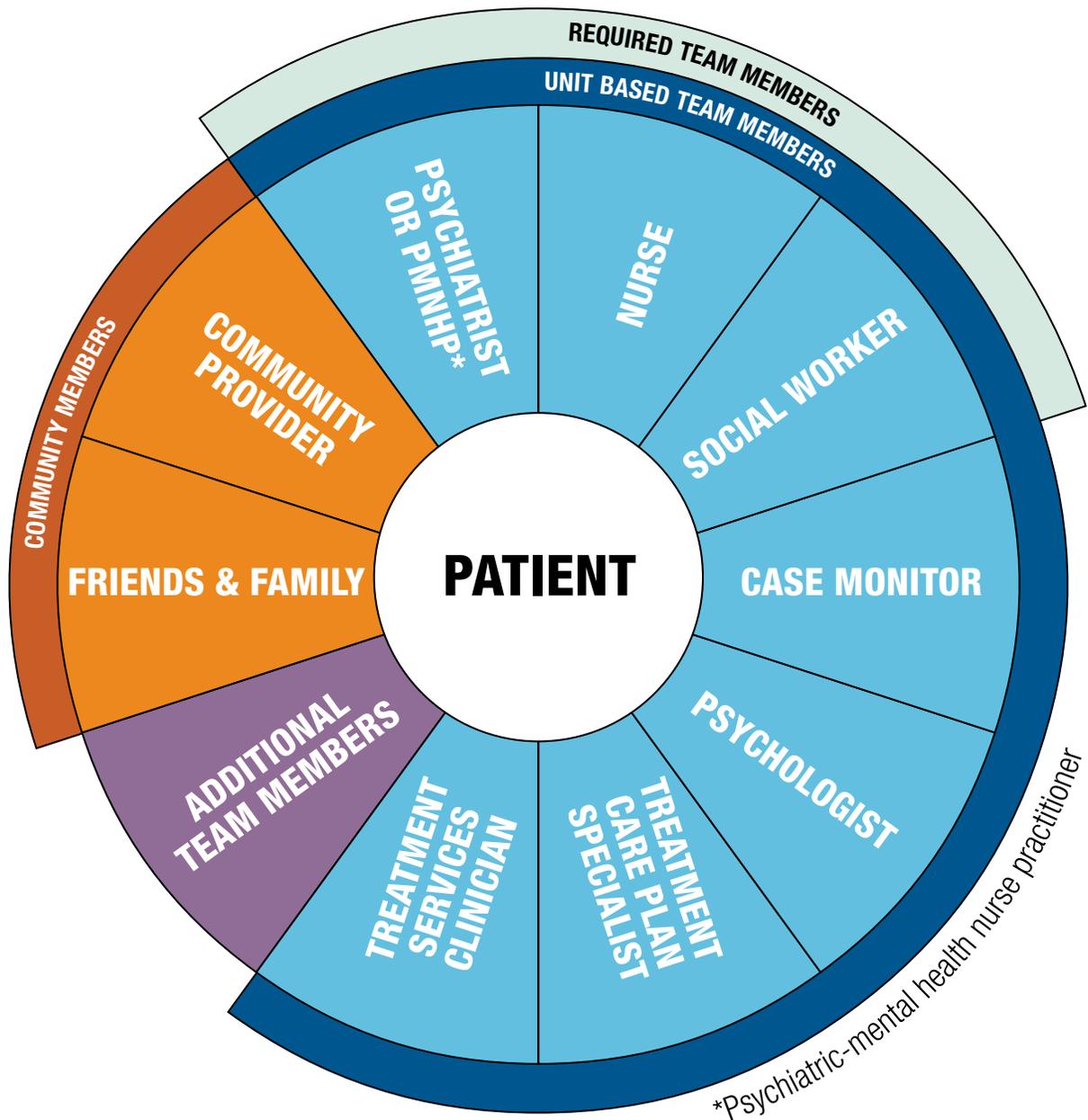
Although staff are clinical experts of treatment, **you are the expert of you**. Successful treatment requires you take a lead role in your treatment. To be successful, you must help your team build a plan that works for you.

A member of your treatment team will let you know when your treatment team meetings are scheduled. If you or a key person in your group has a conflict, please discuss this with your treatment team before your next scheduled meeting.

Your treatment team

Your treatment team is a group of people who will work with you on your plan of care. This group includes you, OSH staff, your family members (if you so choose), and other people who support you. See the list below for more information about the members' roles.

You will meet with your team members regularly. Together, you will create and update your treatment care plan. Unit members work with you on a regular basis, and others will work with you as needed.



Treatment team continued

You

As the primary member of your team, you are encouraged to do the following. (The quoted examples are from patients):

- Share information to help your recovery.
“Share what gives you comfort or helps you to feel calm, such as books, drawing, being barefoot in the grass, etc.”
- Participate in treatment care planning. This is your opportunity to share what services and supports most benefit you.
“Share what’s important to you and what you expect, such as wanting to visit with your kids.”
- Speak up if you don’t understand something or have a concern about a care decision.
“Please speak up and ask for more information if your team informs you of a decision made without you, and you don’t understand why.”
- Ask questions so you can make decisions about your treatment and care options.
“If your treatment team offers only one treatment option, such as a specific medication or class, please ask what alternatives are available. What are the expected benefits, and what are possible side effects or drawbacks?”
- Ask staff to share information with you in a way you understand. Things to consider may include your learning style, culture, disabilities, reading/comprehension level, or language preference.
“If you learn better by hearing rather than reading, you can ask staff to read information to you.”
- Invite people you want to be on your team.
“Choose people you trust, such as family members and friends.”

Unit members

Psychiatrist or psychiatric mental health nurse practitioner (PMHNP) – (required team member)

This person diagnoses your condition, prescribes medications, and signs your treatment care plan. You will meet with this person regularly. If you want to meet more often, please talk to your psychiatrist/PMHNP about how to schedule additional appointments.

Mental health registered nurse (MHRN or RN) – (required team member)

There is at least one nurse available at all times on each unit, and one of them will be assigned to your treatment team. Another nurse may attend if your assigned nurse is not available. You can go to any nurse for any medical concern you have.

Clinical social worker – (required team member)

Your social worker conducts assessments and may provide individual or group treatment. This person also works with various community stakeholders to help you successfully move back to the community after you discharge from the hospital.

Your social worker will help you:

- Connect and advocate on your behalf with community partners, including county mental health and medical practitioners; and
- Act as the primary point person for family, community members and others about your progress while at the hospital.

Treatment team continued

Case Monitor

A licensed practical nurse (LPN) or a mental health therapist technician (MHTT) will work with you as your assigned case monitor. This is your primary “go-to” person who may help you:

- Make money withdrawals.
- Add or remove property from short- and long-term storage.
- Talk about your concerns.
- Retrieve mailed packages for you.

Please touch base with your case monitor regularly.

Note: There are no case monitors on the Junction City campus. Unit staff can help with these tasks.

Treatment care plan specialist (TCPS)

This person organizes, schedules and oversees your treatment care plan meetings and updates and maintains your treatment care plan, with your input. This person may also help coordinate treatment mall scheduling.

Psychologist

Psychologists perform mental health assessments and evaluations. They also provide therapy, which may be offered individually or in groups. If you want one-on-one time with your psychologist, please request it.

Treatment services clinician

Each treatment team has at least one of the following:

- Treatment services nurses share information with you about medication management, nutrition, and how your body functions. They help you develop skills to respond to stress and conflict, and they help you connect your goals to treatment groups. They also provide referrals for some specialty services.

- Occupational therapists help you participate in activities that are meaningful to you and that help you gain skills for community living. OTs can help you identify supports and coping strategies for transition, discharge planning and everyday life.

Note: If you are having significant challenges with a core member of your treatment team, please express your concerns fully so that your team may consider some options.

Additional treatment team members

You or your team members may ask other OSH staff who know you to join your treatment team. For example, if you are facing physical health care issues, these people may include members of the medical clinic on campus. They may become a permanent part of your team, or they may provide short-term assistance to help you focus on a particular area.

Behavioral health specialist

This person provides therapeutic engagement and group and individual therapy. This person may also assist in developing a plan to support you in building positive skills to replace behaviors that are less effective.

Spiritual care

Spiritual care providers support you with your spiritual or religious needs. Chaplains and Native providers are here for you in times of loss, grief, rebuilding relationships, and when you need to regain your spiritual well-being.

Peer recovery specialist

Peer recovery specialists have lived experience with trauma, mental health, and addiction challenges. They share their stories of hope to help you gain strength and empowerment on your journey toward wellness.

Treatment team continued

Vocational and educational services

These staff help you attend school or have a job while at OSH. They offer opportunities to help you further your education and gain job skills that will help you prepare for life outside the hospital.

Medical provider

Medical providers are doctors and nurses who work for the hospital and take care of your physical health needs. If you have a chronic medical condition or other concerns about your physical well-being, you may want to request your medical provider be a part of your team.

Physical therapist

Physical therapists help you improve your physical skills related to movement and pain management. They give recommendations and provide training for you and your caregiver.

Dietitian

Healthy eating can reduce the risk of diseases and is an important part of your overall well-being. Dietitians may work with you if you have cultural, spiritual or medically necessary dietary needs.

Your treatment team can coordinate requests to talk with a dietitian. Dietitians first schedule meetings with people who have the highest medical need.

Creative arts therapist

Art and music therapists use art and music materials and experiences to help with personal growth and emotional expression. You don't have to be an artist or a musician to participate.

Certified therapeutic recreation specialist (CTRS)

A CTRS will work with your skills, including your recreation and leisure interests, to help you achieve your treatment goals.

Community members

Friends, family and community members

You are welcome to ask friends, family and community members to participate in your treatment planning. Please work with your treatment team members to determine the extent of involvement for your friends, family and community support people.

To have these individuals attend your treatment team meetings in person, please add their names to your approved visitor list. You don't need to add their names to the list if they attend the meetings by teleconference.

These people can receive information about you and serve as peer advocates between meetings if you fill out an authorization and release information form. You decide who receives updates and what kind of information you want to share. Unless you have a legal guardian, you can revoke permission at any time.

Community provider

Community providers may include, but are not limited to, a community mental health provider, residential health provider, therapist, a member of your home-faith group, a sponsor, or a community-based peer support specialist.

Treatment mall

The treatment mall is where you go for classes and activities. By going to the treatment mall, you will participate in treatment to strengthen your skills and manage your life. You can use these skills while you are at the hospital and after you are discharged.

How to choose between groups?

Based on your interests and treatment goals, you and your treatment team will work together to decide which classes are the right fit for you. Examples vary by program and could include things like medication management, art therapy, substance use treatment and support, legal understanding, animal-assisted therapy, fitness and healthy cooking.

Most treatment malls are open for at least four hours a day, and treatment is provided by a variety of clinical experts.

If you are not yet ready to participate in treatment mall groups, but want to get oriented at the hospital, you are welcome to talk to a member of your treatment team about visiting your treatment mall. Some malls have an engagement center, which is a safe and welcoming place where you can go and staff will answer your questions.

Treatment malls are customized to offer all different levels of care to meet your specific needs.

Talk to members of your treatment mall staff for more information about the treatment mall's hours, classes and activities.

Other Activities

In addition to the treatment groups on the treatment malls, you will have the opportunity to participate in leisure activities of your choice. You may also meet and socialize with patients who live in other parts of the hospital.

Activities that take place on the mall during evenings and weekends are posted daily. For example, you may be able to visit the library, watch movies, listen to music, and play board games, ping pong or video games.

Talk to activity coordinators or unit staff for more information on after-hours or weekend programming.



Trauma-informed approaches to care

Oregon State Hospital promotes trauma-informed treatment and care.

Staff recognize that bad things happen to good people, and people can overcome the challenges they face.

What is trauma?

Trauma results from an **event** that is **observed or lived** by an individual as physically or emotionally harmful or life threatening. The event has lasting, adverse **effects** on a person's functioning and well-being.

Trauma is an injury that wounds the soul.

What can cause trauma?

- Childhood neglect or abandonment
- Chronic stress
- Wartime combat
- Discrimination
- Poverty
- Homelessness
- Hospitalization
- Physical, emotional or sexual abuse/assault

What does trauma look like?

- Feeling disconnected from others
- Not feeling at home in one's body
- Being unable to know what's safe and what's unsafe
- Being unable to imagine a better tomorrow
- Feeling bad, broken or unlovable
- Fear of loss
- Not being able to trust

What does untreated trauma lead to?

Untreated trauma leads to a lack of self worth, living in fear, depression, health issues and relational issues.

What can be done?

There is hope! People can and do heal from trauma with resilience and support.

You are enough! But, you don't have to go it alone.

What can I do if I need support?

Talk to someone. There are staff trained to provide trauma-specific support. You can start with a member of your treatment team. If there isn't someone on your team you feel comfortable sharing with, reach out to another staff.

It's important to know you are not alone.

You are valuable. There are people who care.

If you want to learn more about how past trauma may be affecting your life today, or learn strategies to cope with trauma, call or contact:

- Your treatment team
- Peer Recovery Services
 - ▶ 503-947-1098 in Salem
 - ▶ 541-870-3504 in Junction City

Collaborative Problem Solving

Oregon State Hospital uses Collaborative Problem Solving (CPS) as a treatment model. CPS is a treatment approach and system of care that's based on the belief that "people do well if they can."

If someone is not doing well, CPS states it's because they lack the skills necessary to respond effectively to specific challenging situations.

Everyone experiences situations that are challenging, and we all have different skills. Through CPS, we strive to identify those situations and skills, and we work together to create a more positive outcome.

Staff will work with you to solve problems you might be experiencing. During the process, they also want to help you develop skills to better face the same type of problem in the future.

They do this by:

- Involving you in your treatment.
- Helping you to pursue your goals and learn new skills.
- Listening to you and trying to understand your concerns.
- Asking for and using your solutions to address the problems you face.

Whenever possible, staff will work with you to come up with a solution that works for everyone involved.

For more information about CPS, talk to a CPS coach or other staff on your unit. At this time, not all units have CPS coaches.



Educational opportunities

Oregon State Hospital wants to help you achieve your educational goals, whether that's earning your GED, graduating from high school, taking college courses, or pursuing life-long learning.

Through the hospital's Supported Education Department, staff will help you identify the education program that matches your needs and interests. The type of school you attend depends on your age and commitment type.

By taking some of the offered classes, you will learn new skills that will help you find a job, meet your life goals, and start an education that you can continue when you leave the hospital.

Some of the classes offered include:

- Pre-GED and GED
- Reading/literacy
- Writing
- Science
- Social Studies
- Math
- English
- Foreign languages
- Computer skills
- College course work
- Goal setting, planning, time management

For more information, please talk to your Supported Education instructors.

Quest Adult School

Quest Adult School offers opportunities for 18- to 21-year-olds to continue their education while at the hospital.

Students can take placement testing, earn their high school diploma, or complete pre-college coursework. Coursework is tailored to fit individual needs in such areas as basic reading, math, vocational and job skills training, social skills, and developing new leisure interests.

The school is open five days a week, 224 days a year. For more information, contact a Quest Adult School teacher at 503-945-9981.



Employment opportunities

While at the hospital, you may request the opportunity to work. By having a job, you will learn skills to help you find a job after you leave the hospital and you will earn a paycheck. For example, vocational instructors can help you learn how to write a resume and answer questions during a job interview.

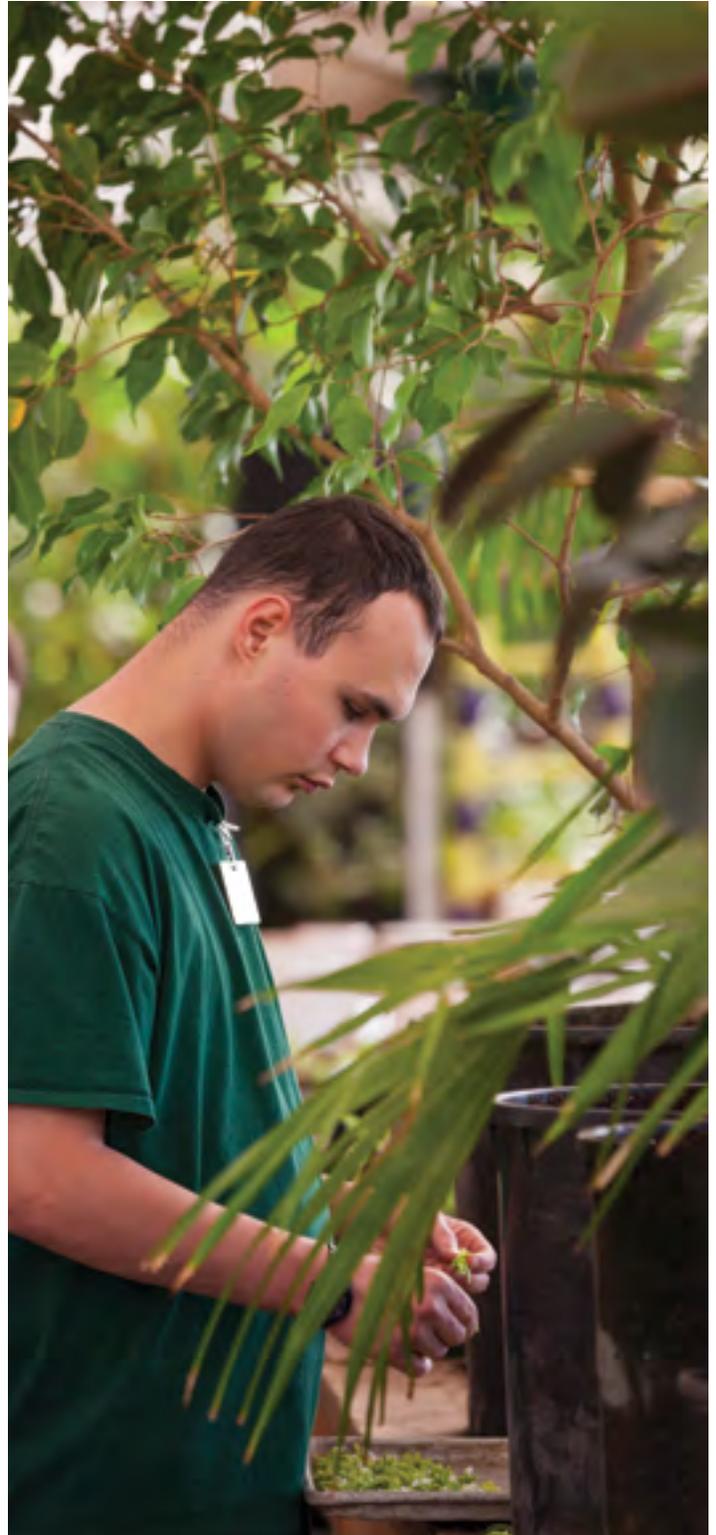
Most patients are able to apply for jobs. The Vocational Services Department regularly updates and posts a list of available positions in the units and other centralized areas. Patients are paid an hourly rate for most positions, including the following:

- Furniture maker in the wood shop
- Greenhouse attendant
- Janitor
- Kitchen worker
- Barista in the coffee shop
- Peer Recovery Services representative
- Sales associate in the market

To apply for any patient-pay job, you must first complete a vocational services application form – which your treatment team needs to review and approve. Vocational Services will contact you if you are selected for an interview, and they will let you know if you are chosen for the job.

In Salem, Vocational Services also offers bench-work opportunities, where patients are paid based on the number of items they make.

Please talk to your treatment team for more information.



REACH

REACH is short for Recovery Environments Actively Creating Hope.

Through REACH, you can earn points for taking part in your treatment. This could mean going to – and participating in – treatment mall groups, therapy sessions, treatment team meetings and other activities unique to you and your treatment plan.

Each program, **except for Bridges**, has a designated REACH store on its treatment mall, and each unit has a designated time to go there each week. **The schedule is posted on your unit, and REACH staff can share this information with you, as well.**

To visit your REACH store, a REACH behavioral health specialist will check for safety concerns over the past several days. If there are no issues – and no new issues on your scheduled REACH store time – you are eligible to go.

If there are safety concerns, and you are restricted to your unit, the REACH behavioral health specialist will work with your treatment team to create a modified plan. For example, you may be able to make a special appointment to go there with a staff member, or a staff member can visit on your behalf.

At the REACH store, you can spend points on things like:

- Clothing
- Snacks
- Books
- Games
- Stationery
- Hygiene products

Store items vary by treatment program and follow each program's prohibited items list. See your program guide for a list of items prohibited on your unit.

You can also make special orders at the REACH store with your treatment team's approval. To grant the special requests, REACH staff must receive emailed authorization from a member of your treatment team.

For more information, talk to members of your treatment team and consult your program guide.

Note: Treatment teams can request exceptions on a case-by-case basis.

Spiritual care and Native services

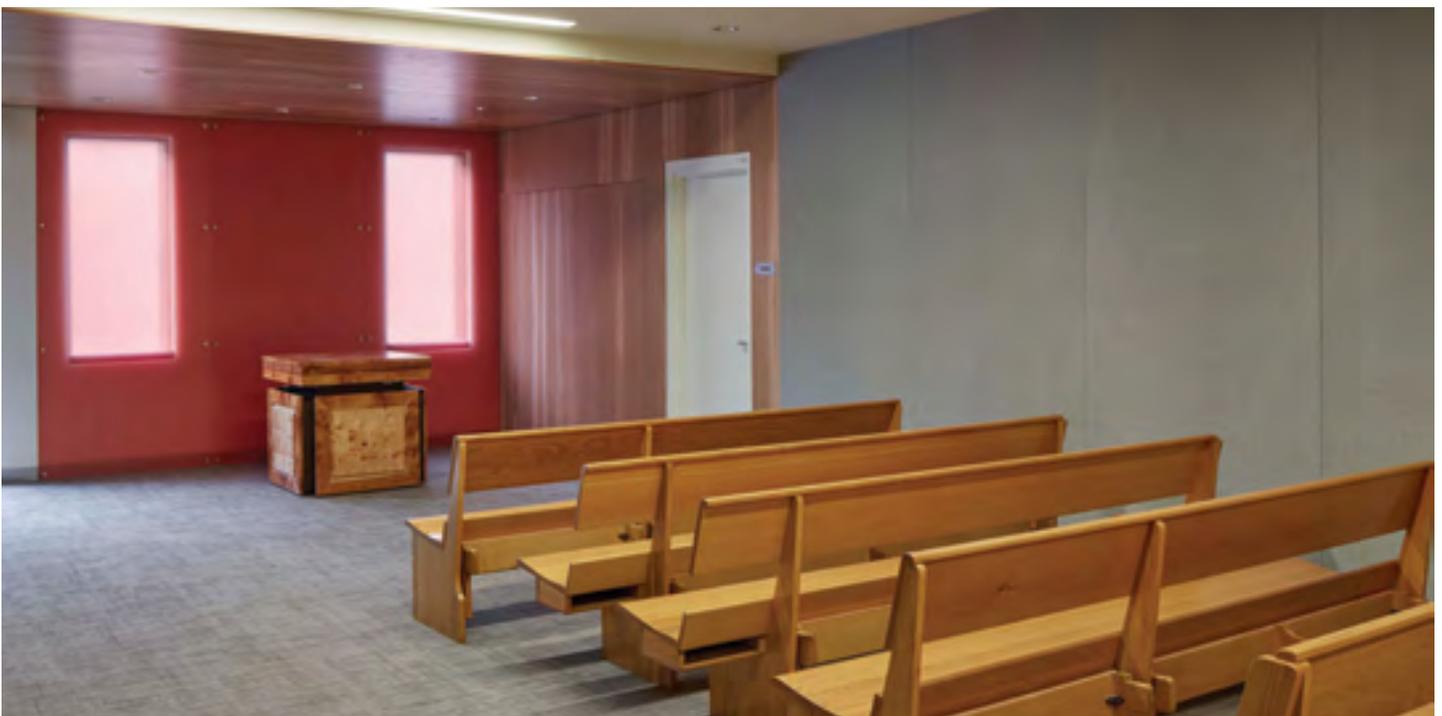
Spirituality is an important aspect of many patients' recovery. OSH supports all faith traditions through the Spiritual Care and Native Services Department. Chaplains and Native providers are here to support you, helping you draw upon your spirituality to find strength and hope.

When you are admitted to the hospital, a nurse will ask you whether you'd like a chaplain or Native services provider to visit you to discuss your spiritual needs. You may request a visit from a member of the department at any time by calling the department yourself at 503-945-2962 or by asking your unit staff to call for you.

The Spiritual Care and Native Services Department meets residents' religious and spiritual needs in many ways. Staff provide one-on-one visits for personal guidance, and they offer numerous spiritual groups – such as sweat lodges and smudges, Bible studies, mass, interfaith worship services, and other religious and spiritual practices and ceremonies. They lead spiritually based groups in the treatment mall, and they provide sacred texts for your faith tradition.

Spiritual Care can connect you with local faith leaders, if you want this assistance. You may also add visitors from your own faith community to your approved visitors list.

A list of scheduled ceremonies and worship services is posted in your unit. Feel free to request a chaplain or Native service visit at any time.



Recreation, leisure and fitness

Treatment Services staff offer a wide range of activities in which you can participate. Through these activities, we hope you'll make friends, develop new interests, and learn how to relieve stress. You can find daily activity lists posted on your unit. Activities often include:

- Arts and crafts
- Music
- Basketball
- Off-campus outings (depending on commitment type, privileges granted, and approval from your treatment team)
- Fitness classes
- Movies
- Board and card games
- Peer Advisory Council
- Support groups

Staff also organize special events for patients. For example, you could watch a musical production, sing in a holiday pageant, or share your poetry or comedy routine during a monthly open mic performance.

If you have ideas for any new unit activities, or if you want information on upcoming events, please connect with any staff member on your unit. If you have ideas for bigger activities that would involve multiple units or programs, contact your mall manager.



Risk review

Risk Review is a group of OSH staff responsible for:

- Approving or denying privileges requested by patients' treatment teams (see the Privileges and Outings section below)
- Making recommendations, such as for jurisdictional discharges and appropriate community residential placements

How does this process work?

- Based upon the progress you make during treatment, you and your treatment team will work together to decide when to request a Risk Review meeting.
- Your team will submit a Risk Review request to schedule a meeting.
- During the meeting, Risk Review will discuss your treatment and other relevant factors with you and your treatment team.
- Risk Review will decide whether to approve the privilege requests. It will consider your history of risk behavior, the crime for which you pleaded guilty except for insanity, how well you participate in your treatment, and your plans for keeping yourself and others safe.

If you show unsafe behavior, stop participating in treatment mall classes, or if your treatment team has concerns about you using your privileges safely, your treatment team can suspend your privileges.

Privileges/Ratios

Privileges refer to whether you may participate in activities on hospital property (on grounds) or take part in activities off hospital property (off grounds). Some privileges also refer to the number of staff who must be with you and other patients. When you have more privileges, you will have fewer staff escorts.

Below are ratios that show privilege levels based on the number of staff needed for each patient during an outing. For example, 1:1 means there must be one staff member for every one patient; 2:8 means two staff members for every eight patients, etc.

- | | |
|-------------------|--------------------|
| • 2:1, on grounds | • 2:1, off grounds |
| • 1:1, on grounds | • 1:1, off grounds |
| • 2:4, on grounds | • 2:4, off grounds |
| • 2:8, on grounds | • 2:8, off grounds |

Here are some terms about privileges you might hear and what they mean:

- Solo for work – You may get to walk to and from your work site on your own.
- Authorized person(s), on and off grounds – A family member, friend or other important person in your life will supervise you. No OSH staff will be present.
- Conditional Release Ready status – When you reach this privilege level, your social worker will send your information to prospective conditional-residential programs, like group homes.

Risk review continued

- Community mental health provider, off grounds – OSH staff may take you to meet with community providers, who will supervise you during your visit. You'll usually be approved for this privilege if you are also approved for Conditional Release Ready status.

Some people start with small privileges – such as going on walks outside the secure perimeter – while others may receive privileges at a faster rate. Risk Review determines which privileges are right for you based on your specific treatment needs.

For more information about Risk Review and privileges, please talk with members of your treatment team.

UNDER PSRB: TREATMENT

Outings

By staying safe and participating in treatment mall activities, you may earn the privilege to go outside the hospital on “outings.”

Outings may include such things as a trip to the grocery store, park or movie theater.

Outings help you practice the skills you will need when you are released from the hospital, such as how to budget for something you want to buy.

Here are some key things to know about outings:

- Even if you are scheduled for an outing, staff will always check to make sure you are safe to participate on the day of the outing. Before you leave, a nurse will assess you and decide on final approval for you to participate.
- If there aren't enough staff on the day of the outing, the outing may be rescheduled for another time.

- During your outing, you must follow staff directions and stay within sight and hearing distance of staff.
- If you want someone from outside the hospital to join you, please work with your treatment team ahead of time to make arrangements. Once you do, the team will help you plan for the outing.

Please note: Depending on your program, unit staff may search your belongings when you return from an outing. This is to ensure you don't return with items that could be used to hurt you or someone else. You may also be asked to take a drug test.

For more information about outings, please talk with members of your treatment team.

Getting out of the hospital

Your treatment team helps to determine when you are ready to leave the hospital. However, the Psychiatric Security Review Board (PSRB) ultimately approves the conditional release at a hearing. The board looks at many factors, including your participation in treatment, your ability to stay safe, community safety and victim impact statements.

You will remain under the jurisdiction of the PSRB until the end of your jurisdiction or until the board finds you no longer meet criteria for jurisdiction.

While under its jurisdiction, PSRB decides when you get out of the hospital. This is called “conditional release.” The PSRB also defines the terms of your release through a conditional release plan. This plan could include such requirements as staying sober or attending support group meetings. If you break the terms of your conditional release, you may have to return to the hospital. This is called a “revocation.”

Listed below are steps for you to take to leave the hospital, as well as information about how staff can help you.

Treatment team participation

Your first step in your recovery is to participate in individual and group counseling. These treatments are designed to help you communicate well with others, manage your emotions, solve problems and meet your personal goals.

You will work with your treatment team to find the treatments that are right for you. By engaging in this process, you may:

- Better understand your mental illness;
- Learn ways to cope with symptoms of your illness;
- Understand how medications may help your mental and emotional wellness;
- Develop healthy relationships with other people who can help you;
- Learn how your behaviors affect others; and
- Develop increased understanding and awareness about how your past actions may have harmed others.

Risk assessments

You may work with a psychologist to do a violence risk assessment (VRA). This assessment will help you and your treatment team learn about your personal risk factors and ways to support you during your recovery. You may also complete risk assessments in specific areas, such as fire setting, sexual concerns or stalking behaviors – if they apply to you. Please know that not all patients get a violence risk assessment.

Getting out of the hospital continued

Risk Review

When you and your treatment team feel you no longer need hospital level of care and are ready to live in the community, you will meet with Risk Review to request approval to start planning for your conditional release from the hospital.

Risk Review will look at many factors, from your participation in treatment to your ability to stay safe while on community outings. You need Risk Review's approval to go before the PSRB to ask for a conditional release.

From the hospital, most patients move to a group home in Oregon, where they continue to receive treatment for their mental illnesses.

Please see the earlier section on Risk Review in your handbook for more information.

Conditional release planning

To plan for conditional release, your social worker will refer you to a community placement that best fits with your treatment and personal needs. This is usually a secure residential treatment facility or a group home.

You'll have the opportunity to meet and interview with facility staff and county evaluators, who make evaluation decisions. Your treatment team and your social worker will support you throughout this process.

When you are accepted to a placement, your treatment team will request a PSRB hearing for conditional release. PSRB may approve or deny your conditional release to your placement.

PSRB hearing

If PSRB approves your conditional release, you may be able to move to the facility immediately after the hearing – if there is an immediate opening. Sometimes, you may have to wait for the facility to have a vacancy.

Before you are released from the hospital, benefit coordinators will work with you to ensure your Social Security and disability health care benefits are in place.

For more information about getting out of the hospital, please talk to members of your treatment team.



Visitation

How can my family and friends visit me?

Family and friends can play an important role in your recovery, and staff want you to have every opportunity to visit with them.

For your loved ones to visit, they will need to fill out a visitor application – which does include a background check. Staff make every effort to process applications as quickly as possible, but it can often take several days to finish the process. OSH will only approve visitors after first receiving approval from you and someone on your treatment team.

Copies of the visitor application are available:

1. In person, at Reception
2. By calling Reception and asking for staff to mail a copy to them
3. Salem: 503-945-2800 or 800-544-7078
4. Junction City: 541-465-2554 or 877-851-7330
5. By visiting oshfriends.com

Please note that there are separate visitation forms for adults and children.

If you or your friends and family have questions about visitation, please talk to the staff on your unit or call Consumer and Family Services at 503-947-8109 (Salem) or 541-465-2785 (Junction City).

Food during visits:

If you want to enjoy food during your time together, the hospital has guidelines everyone must follow. Your program may have additional guidelines to the ones listed below:

1. When they meet with you, visitors may bring food and drinks in factory-sealed containers that don't contain alcohol or cannabis.
2. Containers may not be glass, metal or aluminum.
3. Food and drinks may not be homemade or from a restaurant.
4. Food must be from a store and in its original, sealed packaging.

See your program guide for additional rules.



Visitation continued

Special family visits:

Special occasions call for a special meal with family. The family dining rooms on the Salem and Junction City campuses provide a more private setting to celebrate a birthday, anniversary, holiday or other memorable occasion with loved ones while enjoying a memorable meal, prepared (for a fee) by the hospital.

For more information, or to reserve the family dining room in either Salem or Junction City, contact Consumer and Family Services at 503-947-8109 (Salem) or 541-465-2785 (Junction City).

Note: For safety reasons, patients in the Harbors Program do not have access to the family dining room.

Gifts and other items during visits

Friends and loved ones may bring items for you when they visit. They need to give these items to Reception staff when they check in so Security can scan the items to ensure they are allowed. Hospital staff will then deliver the approved items to you on your unit and add them to your property list, if needed.

Note: Some items, like food, are not added to your property list.

Visitors can leave money to be deposited into your patient trust account with reception. Please see the Patient Funds section for more information.

Note: For Junction City-specific information, see the Junction City Program Guide.

Visitation schedule:

Regular visiting hours vary by program and building. Please refer to your program guide for information specific to your program.



Meals

Oregon State Hospital provides all patients with three meals and an evening snack each day.

Each unit has assigned times for meals served in the dining rooms. Everyone is encouraged to go to the dining room for meals. On your unit, snacks are usually served around 8 p.m. – although there is some flexibility with the schedule.

Food Services plans meals that are healthy and nutritious. You will have several choices at each mealtime. If you choose not to go to the dining room for meals, Food Services will provide you with a to-go meal.

Food Services can make accommodations for medical needs, food allergies, food sensitivities and cultural and spiritual needs. If you have any nutritional concerns, dietary preferences, or needs that you did not tell the nurse during your admission, please let your treatment team know. You may need to follow up with your requests.

Your treatment team can coordinate all requests to talk with a dietitian. Dietitians first schedule meetings with people who have the highest medical need.



Market, café and coffee shop

Your ability to visit the market, café and coffee shop depends upon your program, staffing levels and the privileges and restrictions set by your treatment team. For more information, see your program guide or talk to a member of your treatment team.

Market

The market is where you can buy your own snacks and supplies, like headphones, shampoo, deodorant, soap and makeup. It's open during the late afternoons and evenings. The hospital gives you food, clothing and personal hygiene products, and the market carries more kinds of items from which you can choose.

Each program has different limits on the amount of money you can spend on each visit. See your program guide to learn about these limits and the amount of cash you can carry with you at any given time.

Café

You may have access to the café during visiting hours and per your unit's schedule, but the times may be limited. If available, the café can be the perfect spot to share a meal while you chat with visiting friends and family. The cafeteria-style restaurant is generally open for breakfast, lunch and dinner. Food available for purchase includes burgers and fries, sandwiches, soups, salads, desserts and more.

Coffee Shop

The Valley/Kirkbride coffee shops offer a wide variety of hot and cold beverages, pastries and other snacks.



Your room

Your room may be a single or a double, which means you might have a roommate. You can decorate your own space in your own way, within safety guidelines.

To keep your living space calm and safe, the following rules are in place:

- You may place pictures and other items on the bulletin board in your room.
- To prevent the spread of infections, you can neither store items on the floor nor stack them on top of each other. Exceptions include personal laundry baskets and waste paper baskets.

For health and safety reasons, you are responsible for storing personal items neatly in your room and for keeping your room tidy. Housekeeping staff will sweep, empty the trash, and mop your room three to five times per week. Staff will also check your room weekly for clutter, fire-safety issues, and to make sure you do not have property that could be unsafe or harmful.

Each program has unique guidelines around what you may or may not have in your room. For more information, see the section about personal property in your program guide or talk to any staff member on your unit.



Personal property

You can help keep your property safe and secure by listing all your personal items on a property form. Staff go through your belongings with you, inventory each item, and note them on your property sheet.

Please include detailed descriptions (color, brand, size, value, etc.) of your property, and make sure to review your sheet every time you change units. This will help you get reimbursed in case your property is lost or damaged. If this happens, talk to staff.

Your small property – such as keys, credit cards, checks, driver's licenses and other forms of identification – are kept off the unit in a safe location. Staff can retrieve these items for you, as needed.

If your items don't fit in your unit's property room, we will put them in long-term storage, assist you with shipping, or help you make arrangements with someone you trust to pick up and store your property for you. Access to items in long-term storage is limited.

For more information, talk to your case monitor or other staff. Additional information is also in your program guide.

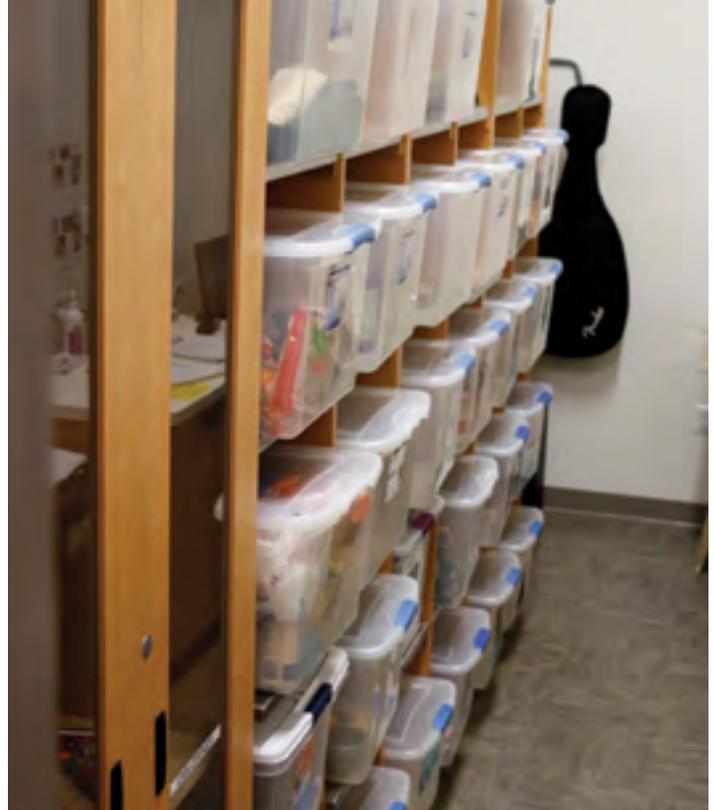
New property

When you want to get new things, you will need to fill out a package request form. This form identifies what you expect to receive, including items you get as gifts, order online, or purchase in the community while on outings. Staff will assist you when you receive something new to add it to your property form.

It's a good idea to talk with staff to make sure the items are allowed on your program unit. Depending on your legal status and program, the list of prohibited items will differ. Staff can give you a list of these items. If you are not sure about an item, please ask your treatment team.

There are also many items that are prohibited – unless you have approval from your treatment team and a safety plan is in place. If there is something you want – especially if it's therapeutic in nature – bring the issue up with your treatment team to discuss further.

Note: Patients on the Junction City campus don't use package request forms.



Clothing

For safety reasons, there are certain guidelines about clothing. These guidelines are based upon where you are staying in the hospital. Please see the contraband and prohibited items policy for more information. Clothing that does not follow our guidelines can be stored for you or sent to a friend or family member.

Family and friends may send you clothing, and, depending upon your program, you may buy your own clothes. The hospital will give you clothing if you need it.

Clothing must fit in designated storage areas – such as closets, cupboards and storage bins.

See your program guide for more information.



Clothing store

If you are in need of clothing, the hospital will provide you with items from its clothing store. Both the Junction City and Salem campuses have clothing stores.

Every patient is allowed to have the following:

- Seven pairs of socks
- Seven sets of underwear
- Three bras
- One pair of shoes
- Five shirts
- Five pairs of pants
- Two sweaters or sweatshirts
- Two coats

These items are **free** to patients. Staff can order clothing items for you from the store, and, depending on your program and privilege level, you may visit the clothing store with unit staff during open hours.

The clothing store offers a wide variety of clothing. Some items are used, and some items are new. The shop receives donated items from outside the hospital to help support patients in their recovery. The donated items can be anything from name-brand jeans to basic T-shirts and shoes.

Both campuses have seamsters who work in the clothing store. They can hem pants, repair zippers and mend favorite shirts or jeans. They have a lot of work, so repairs and alterations can take a few weeks.

Returning clothes

If clothing you receive from the store doesn't fit, you may give it to unit staff to return for you.

Donating clothes

If you no longer want items you purchased or brought with you to the hospital, the hospital will donate them to a community organization. Depending on your program, staff can submit a work order to have the warehouse donate the items, or you can take items to an off-campus donation center.



Laundry

During your stay, the hospital will provide you with clean bed linens, blankets and towels. Each unit has a supply time, when you will bring back your dirty linens and towels and get clean ones.

You are responsible for washing and drying your own clothes. Please put your dirty clothes in the hamper we provide for you. If you do not feel well, staff will assist you with your laundry.

The laundry area has washers, dryers, dryer sheets and detergent you can use. Staff will be with you and can help if you have questions. The laundry room might not be open during treatment mall hours.



Interpersonal relationships

The human need for contact, warmth, affection and support is universal. However, Oregon State Hospital is responsible for ensuring that touching between you and your peers – which includes all physical contact – is respectful, has clear, mutual consent and is not sexual.

Expressing support through physical touch

Non-sexual physical contact between people can provide support and express friendship; it can also cause distress, make people uncomfortable, or activate a trauma response. A trauma response means people have a strong reaction to a situation that reminds them of painful experiences.

- Before you touch someone, you must ask the other person. That person must clearly give consent.
- Consent can be withdrawn at any time – what was OK an hour ago may not be OK now.
- Your staff and your peers may direct you to stop any touching that is not wanted by the other person or that is inappropriate for the situation or the person's treatment needs.
- For your success in the hospital and the community, it's very important for you to learn about consent and acceptable types of non-sexual physical touching. This can change, depending on where you are and the people you are with. Please be open to having these conversations.
- Ask for consent. Confirm consent. Respect what people tell you.

Sexual contact and expression

Sexual expression and sexual intimacy are universal needs, too. However, sexual contact and behaviors may be unwanted. The hospital is responsible for protecting you and your peers from harm or hardship, both emotional and physical, that can be caused by sexual contact or behavior, including:

- Disease transmission (which can be life threatening).
- Physical, emotional and psychological trauma.
- Pregnancy and the resulting emotional and physical risks.

To support and protect you and your peers, we ask that you don't participate in any sexual or intimate behaviors, including:

- Intimate touching, sexual contact and sexual activity.
- Kissing.
- Extended hand holding (rather than brief emotional support).
- Lingering (longer than usual or expected for the situation), full-body hugs or from-behind hugs.
- Sexual conversations and statements (This does not include discussions as part of treatment/education about healthy sexual development or relationships).
- Going off alone with another patient to be more intimate.
- Other behaviors you would normally associate with sexual interactions or relationships.

If you have concerns about managing your sexual health needs while at OSH, please talk to a trusted staff member.

Taking care of yourself

Oregon State Hospital staff are here to help you take care of yourself. Below are some things that can help your overall wellness.

Health and wellness

To keep you, staff and visitors healthy, we ask that you talk to your unit nurse if you are feeling unwell or suspect you may have a contagious illness. Staff will make sure you see a medical provider, if needed.

To prevent the spread of seasonal flu, you are encouraged to get an annual flu shot here at the hospital. Staff will offer you this opportunity during flu season.

Occasionally, there may be times when several patients on a unit have a contagious illness. When this happens, the hospital may have to “close” a unit to prevent the illness from spreading. This means all patients on the unit will have to stay there until the sick patients are no longer contagious. Even well patients can spread a contagious illness by being around others who are sick.

The best way to prevent getting sick is by washing your hands frequently. Coughing into a tissue or your elbow also prevents germs from spreading to others.

Sleep

Regular sleep is important for your well-being and recovery. Please reach out to staff if you are having trouble sleeping.

Staff members will check on you with a flashlight at least once per hour for safety reasons. When you are sleeping, staff will try to be as quiet as possible. Although this may be disruptive, it is important for staff to see you when they stop by your room.

If you have special needs to help you sleep and feel safe – such as listening to music on headphones or using a night light – talk with your treatment team. They will try to help.

Personal hygiene

Washing your hands, brushing your teeth, and keeping your hair and body clean and neat helps you, and everyone else at the hospital, stay healthy. Staff ask that you bathe on a regular basis. If needed, staff will work with you to find different ways to help you stay clean.

Staff will supply basic hygiene products such as soap and shampoo. If permitted by your program, you can purchase different brands, and other items – like conditioner – through the REACH store and the market.

Shaving

The rules on using safety razors, and the supervision required, vary by program. If you want to shave, talk to staff on your unit. More information is available in your program guide.

For more ideas about ways to take care of yourself, talk to members of your treatment team.

Taking care of yourself continued

Haircuts

You may be able to get a haircut in our hair salon. In some cases, hair stylists can dye or perm your hair. You will have to purchase the materials with your own money or through the REACH store. Please talk with your unit nursing staff to learn how to make an appointment to get a haircut.

Sexual health

You can discuss how to manage your sexual health needs at the hospital with your treatment team. OSH permits certain items you may need for personal use, such as sex toys. If you wish to use any devices, lubricants, condoms, etc. to better meet your needs, please talk to a member of your treatment team.

UNDER PSRB: GENERAL INFO

Identification

It's important for you to wear your identification (ID) badge when you are off your unit and on hospital grounds. Everyone on campus is required to wear a badge. There are different colors of badges for staff, patients, visitors and contractors.

Please wear your badge above your waist so staff can see it. If you lose or damage your badge, please tell unit staff so they can get you a temporary ID badge. If there is a big change in how you look – such as if you grew a beard – staff may ask you to have a new photo taken for your ID.



Even therapy dogs wear identification badges at OSH

Phone calls, stamps and mail

You have the right to stay in touch with loved ones outside the hospital through phone calls and mail.

You can buy envelopes and stamps at the REACH store with REACH points and at the market, which accepts cash.

You can also make calls anywhere in the United States and Puerto Rico for free.

Phone calls

Phones are available on each unit for you to use, which will allow you to make free, national calls. Please be considerate when using the phones by:

- Respecting other people's privacy by not listening to their conversations.
- Limiting the length of your calls to give everyone a chance to use the phone.
- Taking messages for one another.
- More information on phone rules for your unit are listed in your program guide.

To make an international call, you can buy an international calling card. Talk to staff for more information.

Mail

You have the right to send and receive sealed letters, and you can buy stamps if you have money. Except for legal mail, staff will ask you to open your mail in front of them.

If you cannot afford stamps, envelopes and stationery, the hospital will provide you with enough to send up to three letters per week.

Staff will provide you with additional supplies to communicate with your attorney. Once you complete the full address on a letter, you may give it to a staff member to send for you. Be sure to also include your name on the envelope in case the mail is returned.

Receiving packages

- You are able to receive packages, which security staff will screen for safety.

Sending packages

- Meet with your unit staff to prepare your package.
- Remove the items from your inventory and update your itemized, personal property list.
- Seal your package for delivery.
- Staff will bring your package to Reception to determine the postage needed.
- Complete a money-withdrawal request form to pay for the postage. Requests must be signed and approved by staff.
- Once you complete these steps, staff will mail your package for you.
- Be sure to include your name and unit on the packages, in case they're returned.

For more information on the items you can have with you on your unit, see the Contraband and Prohibited Items section in your program guide or talk to staff on your unit.

Law library

You have a legal right to access legal materials a minimum of four hours per month. The law library is where you can find legal information and resources, including printed reference materials and an online legal database. On the Salem campus, the library is next to the patient library between Trails and Harbors. In Junction City, it's in the patient library on the first floor of the treatment mall.

Law clerks and paralegals from a local law firm hold regular onsite hours at the law library to offer additional assistance to patients. **You can find the schedule for their hours posted in the law library and on your unit.**

Each unit has a scheduled time for patients to visit the law library. If you would like to use the law library, please talk to the staff on your unit to sign up. In most cases, you may use the law library on a “first-come, first-served” basis during your unit’s scheduled time. Patients with a pending court deadline are given priority.

If you choose not to attend during your unit’s scheduled time, you may need to wait until your unit’s next scheduled time. Please note that the day or time your unit is scheduled to use the law library may change due to staffing availability. Staff will reschedule missed times.

If you are denied law library access for any reason, staff must document the denial in your medical record and on the unit sign-up sheet. They must list a reason and sign the sheet.

If you need help signing up to use the law library, or if you have other questions, please check with staff or the nurse manager on your unit.

If you feel you aren’t getting enough access to the library, please call Consumer and Family Services:

- **Salem:** 503-947-8109 or
- **Junction City:** 541-465-2785



Unit community meetings

Most units hold community meetings at least once a week. At the meetings, patients and staff discuss upcoming events and activities.

Community meetings also give patients and staff time to share their issues and concerns and their

ideas for addressing them. You are welcome to attend and participate. Ask your unit staff to find out when your unit's community meeting takes place.

Patient funds

Rules about money vary in each program. If your program allows you to have cash, you may have **up to \$30** with you at any time.

If you receive money from disability, Social Security, pensions, etc., you can keep it in a hospital trust account, a bank, or with a trusted family member or friend. You, your guardian, your payee, or any other person who makes financial decisions for you must decide what to do with that money.

Below are some common questions and answers about patient trust accounts. Please see your program guide for more information.

Am I required to have a trust account?

If you choose to keep your money with the hospital, you need to fill out a trust account application. A trust account acts like a bank account within the hospital. It helps keep your money safe and will allow you to keep track of deposits and withdrawals. Please see the trust account application for additional information about this process. Your unit staff can get an application for you.

If you have a patient-pay position on campus, you are required to have a trust account. If you don't complete the necessary paperwork, you will have access to your funds when you sign the application or when you discharge from the hospital – whichever comes first.

When can I withdraw money from my trust account?

There are set days for each unit to submit trust account withdrawal requests. You can talk to unit staff to find out the schedule for your unit. Depending on your program, it may take up to five days before you have access to your funds. Please talk to staff on your unit for more information on how and when you'll receive your money.

How often can I withdraw funds from my account?

The number of times you can withdraw from your account varies by program. With the exception of the Harbors Program, you can have up to \$30 in cash with you at one time. If you have the privilege

Patient funds continued

to go on an outing, and if a nurse manager – and/or program director – approves your request, you can have more than \$30 to make a purchase while on your outing. Withdrawal forms are available on the units and can be turned in to any staff member.

Can my friends and family give me money?

Visitors may not give cash directly to a patient. Visitors can leave cash, checks or money orders to be deposited into your trust account with Reception staff. Reception will give visitors a receipt to verify the exchange. To ensure you have quick access to your funds, please let unit staff know ahead of time if you'll have money to deposit into your account. If you do not have a trust account, staff can help you open one. Your funds, other than your \$30 cash limit, will be on hold until you sign the trust account application, you discharge, or you make arrangements to have your money deposited somewhere other than an OSH trust account – such as a bank, guardian, conservator or family member.

Can I transfer money from my trust account into another patient's trust account?

Yes, as long as the transfer is first approved by your treatment team and then by your program director. To make the transfer, please fill out the "Consent to Withdraw Funds" form, which staff members on your unit can provide.

Can I buy something from another patient?

No, with the exception of Bridges, Pathways and Junction City (pending approval from both patients' treatment teams). Cash exchanges between patients are prohibited.

Do nurse managers or program directors have to approve my withdrawal requests?

Depending upon the dollar amount, different rules apply. Please see your program guide for more information.

- Anything \$30 or less does not require approval (unless you make a check request).
- For \$30.01 or more, additional approval may be needed.
- All check requests require some sort of approval. The dollar amounts listed above apply for checks as well.

Financial Services will process a withdrawal request the first weekday after receiving it.

How can I get a money order?

The Accounting and Banking office does not issue money orders. Withdrawals from patient accounts are either in the form of cash or check. If you need a money order, you would have to request a cash withdrawal from your trust banking account and then request a staff member purchase a money order for you.

Where can I get more information?

More information about patient funds is found in OSH policy 4.010, "Handling of Patients' Funds." You can request to review a copy of the policy by talking to nursing staff. If you have any questions about the policy, please contact unit staff or see your program guide.

For questions about patient trust accounts, you may also call 503-947-1075.

Paying for your care

Oregon law requires the hospital to bill you for the services you receive here.

OSH will bill you for your daily room and board, medications, individual and group therapies, and the one-on-one care you receive from the medical clinic, psychiatrists, social workers, nurses and others. You will be charged for what you can afford to pay.

The hospital will determine how much you owe based on what you can afford.

Patient Financial Services has a team of patient account coordinators who gather information about your income and expenses. They use this information to determine how much of your bill you are able to pay.

Most patients qualify for a sliding-fee scale, which is based on current Federal Poverty Level guidelines. This means that patients with more assets and income pay more and patients with less income pay less.

The hospital bills medical insurance first – whether that's Medicare, Medicaid or a commercial insurance carrier like Blue Cross Blue Shield or MODA. You may only have a co-pay or deductible to pay. If you have enough financial resources, you may be responsible for your entire bill or everything your medical insurance does not cover.

In the event you need money for other special needs – such as dental work, clothes or eyeglasses – the hospital will determine if you are eligible for additional financial assistance.

Please know that if you are unable to pay for your cost of care, the hospital will not send your balance to a collection agency or reports to a credit bureau.

Patient account coordinators will instead work with you to discuss your options. They may be able to issue a hardship waiver or reassess your ability to pay if your financial situation changes.

Patient account coordinators are available Monday-Friday, 7 a.m. to 4 p.m. to answer your billing questions. You can call 503-945-0244.

The voice mail box is checked daily, and all calls are returned within 24 hours or by the next available business day.



UNDER PSRB: GENERAL INFO

Personal searches

To ensure the safety of yourself and others, staff may ask you to submit to personal searches to make sure you don't have any items that could be used to hurt yourself or others.

Staff might use a "wand" metal detector or conduct a security check. Security checks may include having you turn out your pockets and remove your shoes. Staff are trained to use a trauma-informed approach when conducting searches.

If you have concerns or questions about personal searches, please talk with a member of your treatment team.



UNDER PSRB: GENERAL INFO

Personal property and room searches

Property and room searches may occur at any time if staff have safety concerns. You have the right to be present during property searches, which staff should perform in a respectful and thoughtful manner.

With each type of search, staff will remove items that pose a danger to yourself or someone else. This includes items that are on the "contraband and prohibited items" list for your program.



Patient forms

Unit staff members can help you get any form you need and help you complete it. Some forms are also available in folders on your unit. The folders are in the open area near the nursing office. Staff can provide general information about each form, although the submission process may vary across the units.

Below is some information about the most commonly requested patient forms:

Authorization and Consent for Use of Information/Photographs/Audio and Visual

This form is often called an A/V form or photo release form. By signing it, you give consent to a person or organization to take your photo, interview you, or take video of you. For example, OSH staff may ask your permission, and have you fill out this form, to take your photo during a hospital event or activity in which you are involved. This form is not required when staff take your hospital ID photo; it is required if you want to allow a visitor or staff member to take your picture. You can give the completed form to any unit staff member.

Consent to Withdrawal of Funds from Patient Trust Accounts

This form, commonly called a money-draw form, is used to withdraw money from your OSH trust account, if you have one. You can turn in the completed form to any unit staff member. See the “Patient funds” section of this handbook for more information.

Grievance Form (used for levels 1 through 3)

This form is used when you have a problem or concern about your treatment that you have not been able to resolve by talking to staff. Place your completed form in the “Grievance Box” located on your unit. See the “Grievances” section of this handbook for more information.

Package Request

In some programs, you must complete this form before you can request or receive a package. This form is not required in the Crossroads and Springs programs; it may be optional within other programs. Unit staff will let you know when you are required to complete this form, which you can submit to any staff member.

Pass and Outing Requests

A pass is when you temporarily leave the hospital under the supervision of a non-staff member, such as a family member or friend who passed the hospital’s criminal background check.

An outing is when you temporarily leave the hospital with a hospital staff member.

Different programs use these forms for different reasons. For example, you can use the form to go on an outing you feel would benefit your recovery but is unrelated to your Treatment Mall classes. Or you could use the form to go on a pass with an approved friend.

Some patients, because of their commitment status, are not allowed to go on passes or outings.

Patient forms continued

And some programs, like the Springs Program, choose not to require either of these forms.

Unit staff can let you know if you can go on outings and passes. They can also tell you when and if you must complete one of these forms. You may submit the completed forms to any staff member.

Request for Access to Records

Use this form when you want to view your medical record. You can return completed forms to unit staff or to a member of your treatment team. See the “Accessing your medical records” section of this handbook for more information.



UNDER PSRB: GENERAL INFO

Emergency codes

During your stay in the hospital, you may hear codes called over the intercom.

The most common codes include:

- Code Red for fire
- Code Blue for medical distress
- Code Green for a behavioral emergency

When codes are called, staff want to make sure you are accounted for and safe. Please help by following staff instructions during the code. Staff know that hearing a code can be distressing. They are there to offer any help or support you may need.

For additional questions or concerns, talk to your unit staff.

Seclusion and restraint

OSH staff care about keeping you, other patients and themselves safe. If staff believe you are in immediate danger of hurting yourself or someone else, they may use temporary seclusion or restraints. Staff will use seclusion or restraints only as a last resort when they have already tried everything else.

If you are in seclusion or restraints, a staff member will be with you the entire time to ensure your needs – such as eating meals or going to the bathroom – are met. The seclusion or restraints will end as soon as everyone is safe.

If you are placed in restraints, you will be secured to a bed to restrict your movements until you can be safe on your own and around others. If you are placed in seclusion, you will be restricted to a secure room until you can be safe around others.

After you are no longer in seclusion or restraints, staff will check in with you to talk about what happened and what you and they can do better in the future.

Notifications

You have the right to have the hospital notify your friends or family if you are ever placed in seclusion or restraints. If you want them notified, please fill out the Disclosure of Hospitalization form and the Release of Information form you received when you were admitted. If needed, staff can give you copies of these forms.

More information on the disclosure and release of information forms are found in the confidentiality section of your handbook.

Additional information

If another patient ever becomes upset or loses control, staff may ask you to leave the area. For your safety, you can go to your room or a common area, or ask staff for direction.

For more information on seclusion and restraints, or to review a copy of the policy, please contact any staff member.



Resources

Resources within the hospital

If you have questions about the services and care you receive at the hospital, staff are available to help.

- **Consumer and Family Services**

This team will work closely with you and your family to answer questions about the hospital, provide education and support, and give assistance with issues or concerns.

- ▶ Salem: 503-947-8109
- ▶ Junction City: 541-465-2785

- **Peer Recovery Services**

This is a team of people who have lived experiences with the mental health and addiction system and are trained to offer you peer support. They promote and support person-directed treatment and recovery through advocacy and community relationship building.

- ▶ Director: 503-947-1098

- **Peer Advisory Council (PAC)**

The PAC's role is to improve the hospital's culture, policies and processes. You are welcome to attend regular meetings and bring hospital-wide patient issues to the attention of hospital administrators. For more information, and to inquire about joining the PAC, contact:

- ▶ PAC Coordinator: 503-490-4066

- **Benefit Coordinators Unit**

Benefit coordinators can help you apply for federal, state and public or private benefits. They can also help you learn which benefits you are eligible to receive. For questions about benefits, call:

- ▶ Salem: 503-947-2522
- ▶ Junction City: 541-465-2729

- **Patient Financial Services**

This department will help you reduce your cost of care at the hospital, so you can focus on your recovery. Staff will help you understand our governing laws, advocate on your behalf to insurance companies, bill insurance companies for covered services, and determine how much you can afford to pay by considering your unique financial situation.

- ▶ Salem and Junction City: 503-947-0244

- **Patient Trust Department**

OSH will provide a trust account for your use if you have an income, or friends or family who wish to deposit money for your personal use. See the section on Patient Funds for more information. For questions about patient trust accounts, call:

- ▶ Salem and Junction City: 503-947-1075



Resources continued

- **Spiritual Care and Native Services**

The hospital honors all people's spiritual beliefs. Contact Spiritual Care and Native Services for a schedule of treatment mall classes, spiritual gatherings, a meeting with a chaplain, or to be connected with a leader of your faith.

- ▶ Salem Spiritual Care Office: 503-945-2962
- ▶ Junction City Spiritual Care Office: 541-465-3040

The on-call chaplain can be reached 24/7 by calling Reception at:

- ▶ Salem: 503-945-2800
- ▶ Junction City: 541-465-2554

- **Vocational and Educational Services**

To help you prepare for life outside the hospital, these staff members offer opportunities to help you further your education and gain job skills.

- ▶ Salem: 503-945-2884
- ▶ Junction City: 541-465-2827

Resources outside the hospital

- **Office of Training, Investigations and Safety (OTIS)**

All allegations of abuse and mistreatment at OSH are sent to OTIS for screening and possible investigation. You, staff or the public can call:

- ▶ 503-689-5076 or 800-406-4287

- **Disability Rights Oregon (DRO)**

DRO's mission is "to promote and defend the rights of individuals with disabilities." Depending on the nature of your concern and DRO's staff capacity, DRO staff may be able to talk with you on the phone.

- ▶ 503-243-2081 or 800-452-1694

- **Health Care Regulation and Quality Improvement (HCRQI)**

The HCRQI program regulates health care facilities, providers and suppliers in acute care and community-based programs. The HCRQI program is part of the Center for Health Protection in the Public Health Division of the Oregon Health Authority. Complaints concerning your rights related to 42 CFR 482.13 may be filed by contacting:

- ▶ Health Care Regulation and Quality Improvement
800 NW Oregon Street Suite 305
Portland, OR 97232
- ▶ 971-673-0540

- **Salem Human Rights Commission—**

The Salem Human Rights Commission advises the Salem City Council on human rights and relations issues. The board assists residents by hearing and resolving discrimination complaints and promoting harmony. Note: There is no human rights commission in Junction City.

- ▶ 503-540-2371

- **The Joint Commission (TJC)**

TJC makes sure the hospital meets national standards on health care.

- ▶ 800-994-6610

- **Centers for Medicare & Medicaid Services (CMS)**

CMS, a part of the U.S. Department of Health and Human Services, oversees the funding for many federal health care programs and reimburses health care organizations for the services they deliver.

- ▶ 800-447-8477

List of acronyms and abbreviations

This list of acronyms and abbreviations is designed to help patients navigate through their experience at Oregon State Hospital. Community providers also use many of these terms.

370	ORS 161.370 Determination	CI	Continuous Improvement (form to submit improvement ideas)
426	ORS 426 Persons with mental illness; dangerous persons	CM	Case Monitor/Manager (Salem only)
AA	Alcoholics Anonymous	CMS	Center for Medicaid and Medicare Services
ACT	Assertive Community Treatment or Acceptance and Commitment Therapy	CNA	Certified Nursing Assistant
ADA	Americans with Disabilities Act	CPS	Collaborative Problem Solving
ADL	Activities of Daily Living	CR	Conditional Release
ACE	Adverse Childhood Experience	DASH (Diet)	Dietary Approaches to Stop Hypertension
AFH	Adult Foster Home (no more than five residents)	DBT	Dialectical Behavior Therapy
APD	Aging and People with Disabilities	DDA	Dual Diagnosis Anonymous
BHS	Behavioral Health Specialist	DHS	Department of Human Services
BMI	Body Mass Index	DNR	Do not resuscitate
BSP	Behavior Support Plan	DNS	Director of Nursing Services
Bx	Behavior	DOH	Disclosure of Hospitalization
CAT	Clinical Advisory Team	DOJ	Department of Justice (federal)
CBT	Cognitive Behavioral Therapy	DRO	Disability Rights Oregon
CC	Civil Commitment (classification for admission)	DSM-5	Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition
CCO	Coordinated Care Organization	Dx	Diagnosis
CFS	Consumer and Family Services	EBP	Evidence-Based Practice

List of acronyms and abbreviations continued

ECT	Electroconvulsive Therapy	NM	Nurse Manager
EVS	Environmental Services	OARs	Oregon Administrative Rules (state regulations)
FES	Forensic Evaluation Services	OCA	Office of Consumer Activities
FNS	Food and Nutrition Services	OCAC	Oregon Consumer Advisory Council
GEI	Guilty Except for Insanity (classification for admission)	OCR	Office of Civil Rights (federal)
HIPAA	Health Information Portability and Accountability Act	ODOJ	Oregon Department of Justice
Hx	History	OHP	Oregon Health Plan
IDT	Interdisciplinary Treatment Team	OHSU	Oregon Health and Science University
JC	OSH Junction City Campus	OHA	Oregon Health Authority
JD	Jurisdictional Discharge	ORS	Oregon Revised Statutes (Oregon laws)
LAT	Leadership Action Team (Junction City Campus only)	OSH	Oregon State Hospital
LPN	License Practical Nurse	OSHA	Occupational Safety Health Administration
MHST	Mental Health Security Technician	OSP	Oregon State Police or Oregon State Penitentiary
MHT2	Mental Health Therapist 2	OT	Occupational Therapy or Overtime
MHT	Mental Health Therapist	OTIS	Office of Training Investigation and Safety (Formerly OAAPI)
MHTC	Mental Health Therapy Coordinator	PAC	Peer Advisory Council
MHTT	Mental Health Therapy Tech	PACF	PAC Facilitator
MT	Music Therapist	PCP	Primary Care Provider
MTA	Music Therapist Assistant	PD	Personality Disorder
NA	Narcotics Anonymous	PDS	Peer-Delivered Services
NAMI	National Alliance on Mental Illness	PET	Program Executive Team
NOC	Night (Nocturnal) Shift	PLURAL	Peace Love Unity Respect Autonomy Liberty (LGBTQI+)

List of acronyms and abbreviations continued

PMHNP	Psychiatric Mental Health Nurse Practitioner (psychiatric medication and treatment provider)	SRTF	Secure Residential Treatment Facility (usually community based; also includes placements within OSH)
PO	Medication taken orally (by mouth)	SSDI	Social Security Disability Income
PRN	As Needed (often medication)	SSI	Social Security Income
PNM	Program Nurse Manager	START	Short Term Assessment of Risk and Treatability
PRS	Peer Recovery Services (department); Peer Recovery Specialist (staff)	STR	Secure Transport Restraint
PSRB	Psychiatric Security Review Board	SW	Social Worker
PSS	Peer Support Specialist	TB	Tuberculosis
PT	Physical Therapy	TCP	Treatment Care Plan
PWS	Peer Wellness Specialist	TCPS	Treatment Care Plan Specialist
QMHA	Qualified Mental Health Associate	TIA	Trauma-Informed Approach
QMHP	Qualified Mental Health Professional	TIC	Trauma-Informed Care
REACH	Recovery Environments Actively Creating Hope (program-specific incentive system)	TIO	Trauma-Informed Oregon (organization)
RI	Recovery International	TJC	The Joint Commission
ROI	Release of Information	TOTO	Theatre of the Oppressed
RPI	Rapid Process Improvement	TSI	Thinking Skills Inventory
RR	Risk Review	Tx	Treatment
RSD	Rehabilitation Services Department	VOC	Vocational Support (inside and outside OSH)
RTC	Residential Treatment Center	VRA	Violence Risk Assessment
RTF	Residential Treatment Facility (six to 16 residents)		
RTH	Residential Treatment Home (no more than five residents)		

Phone numbers

Program director and nursing station numbers:

Crossroads		Pathways	
Program director	503-945-2800*	Program director	503-945-2800*
Leaf 3	503-947-2724	Bird 1	503-947-3734
Flower 1	503-947-2714	Bird 2	503-947-8118
Flower 2	503-947-2744	Bird 3	503-947-3754
Harbors		Bridges	
Program director	503-945-2800*	Program director	503-945-2800*
Anchor 1	503-947-4264	Bridge 1	503-947-3764
Anchor 2	503-947-4266	Bridge 2	503-947-3774
Anchor 3	503-947-4267	Bridge 3	503-947-3784
Lighthouse 1	503-947-4268	Springs	
Lighthouse 2	503-947-4281	Program director	503-945-2800*
Lighthouse 3	503-947-4288	Butterfly 1	503-947-3704
Archways		Butterfly 2	503-947-3714
Program director	503-945-2800*	Butterfly 3	503-947-3724
Flower 3	503-947-2754	Junction City	
Leaf 1	503-947-2704	Program director	541-465-2554*
Leaf 2	503-947-2734	Mountain 1	541-465-2704
Tree 1	503-947-2764	Mountain 2	541-465-2714
Tree 2	503-947-2774	Mountain 3	541-465-2472
Tree 3	503-947-2784	Forest 2	541-465-2744
		Rivers Run	
		Program manager	541-465-2554*
		Rivers Run 1	541-465-2925
		Rivers Run 2	541-465-2858

* To contact a program director, call Reception at 503-945-2800 (Salem) or 541-465-2554 (Junction City).

Unit phone numbers

Crossroads				
Leaf 3	503-947-2485	503-947-2484		
Flower 1	503-947-2487	503-947-2486		
Flower 2	503-947-2489	503-947-2488		
Harbors				
Anchor 1	503-945-8848	503-945-9741	503-945-9473	503-945-9743
Anchor 2	503-945-9782	503-945-9790	503-945-9796	
Anchor 3	503-945-9804	503-945-9807	503-945-9836	
Lighthouse 1	503-945-9846	503-945-9867	503-945-9861	
Lighthouse 2	503-945-9876	503-945-9898	503-945-9889	
Lighthouse 3	503-945-9904	503-945-9925	503-945-9916	
Archways				
Flower 3	503-947-2491	503-947-2490		
Leaf 1	503-947-2481	503-947-2480		
Leaf 2	503-947-2483	503-947-2482		
Tree 1	503-947-2493	503-947-2492		
Tree 2	503-947-2495	503-947-2494		
Tree 3	503-947-2497	503-947-2496		
Pathways				
Bird 1	503-947-2552	503-947-2551		
Bird 2	503-947-8100	503-947-8101		
Bird 3	503-947-2553	503-947-3658	503-947-2554	
Bridges				
Bridge 1	503-947-3650	503-947-3651		
Bridge 2	503-947-3652	503-947-3653		
Bridge 3	503-947-3654	503-947-3655		
Springs				
Butterfly 1	503-947-3659			
Butterfly 2	503-947-3660			
Butterfly 3	503-947-3661			
Junction City				
Mountain 1	541-465-2688	541-465-2689		
Mountain 2	541-465-2690	541-465-2691		
Mountain 3	541-465-2692	541-465-2693	Rivers Run 1	541-465-2682
Forest 2	541-465-2696	541-465-2697	Rivers Run 2	541-465-3006

Note: These phones are answered by patients. Please ask for the person you want to talk to and the person who answers the phone will get them for you. Patient phones are turned off at certain times of the day, including treatment mall hours and late night hours. These times vary by unit.

Oregon State Hospital – Salem

2600 Center St. NE

Salem, OR 97301

Reception: 503-945-2800

Toll free: 800-544-7078

Oregon State Hospital – Junction City

29398 Recovery Way

Junction City, OR 97448

Reception: 541-465-2554

Toll free: 877-851-7330

This document can be provided upon request in an alternative format for individuals with disabilities or in a language other than English. To request this publication in another format or language, please send an e-mail to osh.interpreterservices@dhaoha.state.or.us or call 503-756-7889 (voice) or 711 (TTY) to arrange for the alternative format.

Disclaimer: This document is updated each winter. Please talk to staff for information on recent policy changes that affect the contents of this guide.

