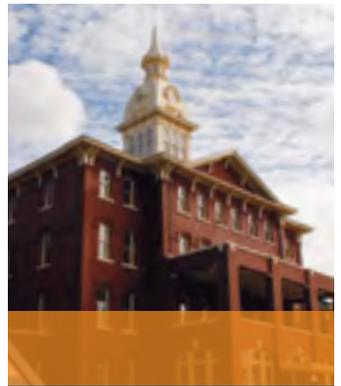


Recovery Times

2019, Volume 2

OREGON STATE HOSPITAL



Interactive theater builds problem-solving skills



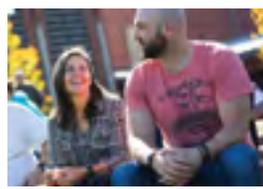
“ I think it helps people find meaning in their lives. ”

Jason Harris, Rick Snook and Ericka Maddock rehearse the play “Shiloh” in the Sjolander Empowerment Center.

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OSH Recovery Times is edited by Erin Dahl. Contact her at erin.e.dahl@state.or.us with questions, comments or suggestions.



Message from the Superintendent



Dolly Matteucci

Dear OSH team,

Since last year, the hospital has been dealing with an unprecedented demand for services to people under .370 orders. However, the hospital isn't in this alone. We have strong support from and partnership with OHA leadership, and we are expanding our collaboration with the Health Systems Division to find solutions across the state's behavioral health system.

Oregon Health Authority Director Patrick Allen and Behavioral Health Director Steve Allen understand the dynamics at hand, and that's why they're advocating for a long-term solution of collaborating with our community partners – the local judicial systems and community mental health providers – to produce real and lasting change.

Decisions made at the local and legislative level will help better address capacity across the continuum of treatment service. This includes legislation like Senate Bill 24, which passed the Legislature in June. Under this law, courts will only be permitted to commit people under ORS 161.370 who are a danger to themselves or others, have a qualified mental illness, and do not have the necessary services and supports in their community.

Senate Bill 25 also passed. It standardizes how courts transmit orders to admit defendants to the hospital for trial fitness treatment. It states that orders must be provided to the hospital within one day after a judge's signature.

These changes support the current capacity-building efforts within OHA:

By Sept. 1, 2019, Salem will increase Aid and Assist capacity by 26 beds. To accommodate this, Junction City will bring online 26 more beds to serve the civil population – 10 hospital-level beds and 16 residential-treatment-level beds in two suites. In turn, The Northwest Regional Re-entry Center will also offer 40-60 beds for competency restoration at OHA.

I want to thank everyone who has been working so hard as we transition capacity across both campuses and for doing so with a focus on patient care.

Adding capacity across the continuum of care, including OSH, is the right thing to do – both for patients already in the hospital and for those awaiting entry from jails and acute care centers. Change is often difficult, and the OSH community has demonstrated time and again that we are great at managing it.

As our patient demographics shift, let us all remember that the vision, mission and values of OSH remain the same and that we have the opportunity and responsibility to assist all patients in their journey of recovery. For all that you do, and for the passion that drives you, I extend heartfelt appreciation.

Sincerely,

A handwritten signature in black ink, appearing to read 'Dolly Matteucci'. The signature is stylized with a large loop at the beginning and a long horizontal stroke at the end.

Dolly Matteucci
Superintendent

Capacity transition

Oregon State Hospital is making some big changes to accommodate the 2019 Capacity Transition at the hospital. These include changing unit programs and assigning new leadership responsibilities to staff.

The capacity transition is in response to Oregon Health Authority Director Patrick Allen's directive to the hospital and Health Systems to manage the unprecedented number of patients under Aid and Assist orders being admitted to OSH.

Christy Jovanovic, director of Nursing Services for the Crossroads Program, will serve as a project leader to transition Salem's Flower 2 unit from serving patients who are civilly committed to patients under Aid and Assist orders. Chief Nursing Officer

Nikki Mobley will serve as project leader in Junction City for the additional civil beds that will open there, including the Rivers Run residential treatment program.

Meanwhile, Superintendent Dolly Matteucci and Salem Campus Deputy Superintendent Derek Wehr will work with community partners to develop additional community restoration beds. While they are focusing on that effort, Kerry Kelly, deputy superintendent for the Junction City campus, will assume a larger role on the Salem campus to provide additional leadership coverage for the entire hospital.

Updates on the transition process are located on the OWL OSH intranet page, [2019 Capacity Transition](#).



One of the Rivers Run suites at Oregon State Hospital's Junction City campus.

New behavioral health director set on improving access to community health services



**“ People are tired of talking.
They want to get things done. ”**

OHA Behavioral Health Director Steve Allen introduces himself to a community provider at the Portland NAMI walk in May.

Since he was hired as Oregon’s new behavioral health director in April, Steve Allen has heard one clear message.

“People are tired of talking. They want to get things done,” he said. “They’re very interested in improving behavioral health systems in Oregon. That’s why I plan to work with stakeholders to create action plans and then help to implement them.”

Through his role, Allen oversees the community mental health system and is tasked with helping to reform – and improve – the behavioral health system across the state. In other words, he oversees the community programs that impact how people get into the hospital and how they get out.

Already, Allen has learned that behavioral health care is uneven across Oregon. That’s one of the

New behavioral health director set on improving access

first things he'd like to change. "Sometimes, access to the right types of services at the right time has to do with where you live," he said. "To reduce hospitalizations, it's important to broaden critical access across the state."

"We must broaden critical access across the state. People need the right services at the right time in the right places."

This same approach applies to bolstering Oregon's skilled workforce. Once that happens, Allen said communities will be better equipped to support people with complex conditions.

"That's a longer-term challenge, but we need to start on that now," he said.

Allen said he's impressed by the quality of care Oregon State Hospital offers. He also knows that staff are under extraordinary pressures, and this affects their ability to do their best work.

"The hospital can only do so much," he said. "Hospital staff and patients rely on communities to support their health and services. My role is to help with that strengthening process."

In the criminal justice system, Allen said the number of people arrested who cannot aid and assist in their defense has skyrocketed. This has created a significant impact on the hospital.

"This is a very serious problem affecting multiple systems," Allen said. "What I haven't heard yet is why we have this problem. Who are these people we're serving? What are the profiles of their conditions that brought them here?"

With this information, Allen said he'll better know what community supports are necessary. This

may include doing more to treat conditions often associated with mental health disorders, such as drug and alcohol abuse.

"We must broaden critical access across the state," he said. "People need the right services at the right time in the right places."

Allen and OSH Superintendent Dolly Matteucci say they're committed to helping the hospital have an active voice in the state's behavioral health system. To that end, Allen is joining the OSH Cabinet so he can better understand and support the hospital's unique needs and challenges.

"Neither the hospital nor the Health Systems Division can solve these challenges alone," Allen said. "We need to work hand-in-hand to create a continuum of care that walks alongside individuals' unique recovery journeys. And with the strong leadership at the hospital and the agency, I'm confident we can make lasting progress."



Steve Allen, OHA Behavioral Health Director

Interactive theater builds problem-solving skills

(continued from page 1)

There's nothing Jordan wants more than a dog – a loveable, furry beast who will be her constant companion.

So she gets one – even though her mental health case worker advises against it. Even though her lease agreement forbids pets. Even though she chooses a dog that barks all night and pees on her carpet.

This is the plot of “Shiloh,” a new play in production at Oregon State Hospital. Written and performed by a hospital theater troupe, its purpose is to engage patients, staff and audience members in a creative – and educational – pursuit.

“The big picture is to teach people about problem solving,” said Ericka Maddock of Flower 1, who plays the role of Jordan. “People learn life skills, and that's what they really need.”

This type of theater, known as “Theatre of the Oppressed,” was introduced in Brazil in the 1960s. Its concept is to teach the language of theater to marginalized groups and use interactive performance to promote social and political change.



SEC Coordinator Rick Snook leads an improvisational acting troupe of patients and staff.

At first, the protagonist – and every other character – makes decisions that lead to chaos. But by involving the audience in the play's reenactment, the outcome improves – or at least, that's the hope. The audience is responsible for solving the problems presented in the play.

“We improvise new scenes and try to change things,” said Rick Snook, a peer recovery specialist who oversees the group. “So far, it's going really well.”

The troupe has been active since late winter and consists primarily of patients from the Crossroads and Pathways programs. Rehearsals take place Tuesday evenings in the Sjolander Empowerment Center on the Salem campus, and community members and staff are welcome to participate.

“I wasn't interested in acting at all, at first,” Maddock said about the experience. “But now I love it. There's no pressure. What you do is up to you.”

During rehearsals, everyone plays improvisational games, nibbles on snacks, and recites their lines. Even Jason Harris of Bridge 2, who plays the role of “Shredder,” enjoys being a misunderstood dog.

For him, the rehearsals are as much about socializing with his peers as they are about honing his acting skills.

“Down here, there is no such thing as a bad idea,” Harris said. “No one judges you, and you can make some friends. This gets me off the unit, and it's fun.”

Snook, the primary writer of the 15-minute play, hopes the troupe will be ready to perform before a live audience later this year. If that goes well, he'd like to take the show on the road – with performances at Project ABLE, the Recovery Outreach Community Center (ROCC) and other local peer-recovery agencies.

“I enjoy seeing people excited about creating something,” said Snook about his motivation.

“I think it helps people find meaning in their lives.”

Sjolander Empowerment Center (SEC) public programs

The following programs are open to patients, hospital staff and community members:

Theatre of the Oppressed

- 3:30 to 4:30 p.m., every Tuesday
(in the garage behind the center)

Created by Brazilian visionary Augusto Boal, Theatre of the Oppressed is a form of popular community-based education that uses theater to promote social and political change. In Theatre of the Oppressed, the audience actively participates in performances.

Contacts: SEC Coordinator Rick Snook,
Rick.A.SNOOK@dhsosha.state.or.us.

Salem Drum Circle

- 6 to 7 p.m., fourth Wednesday of every month during winter months

Through this group, people are invited to join in a circle and play hand-held drums and other percussion instruments. No experience is needed, and some instruments are provided. The group's purpose is to celebrate life and grow community connections through rhythm and music.

Contact: Peer Recovery Specialist Melissa Palmer,
MELISSA.L.PALMER@dhsosha.state.or.us.

Dual Diagnosis Anonymous

- 3:15 to 4 p.m., every Thursday

This peer support group is based on a version of the 12 steps of Alcoholics Anonymous. It includes five additional steps that focus on mental illness and substance abuse. The group's purpose is to give people hope for achieving the promise of recovery.

Contacts: Peer Recovery Services Director Michael Kemp, MICHAEL.KEMP@dhsosha.state.or.us; or Peer Recovery Specialist Jerry Weller, Jerry.R.WELLER@dhsosha.state.or.us.

Peer Masters

- 6 to 7 p.m., every Thursday

Sponsored by Toastmasters International, group members practice their public-speaking skills to grow as leaders and influencers. Activities included timed and impromptu speeches.

Contacts: SEC Coordinator Rick Snook, Rick.A.SNOOK@dhsosha.state.or.us, or Peer Recovery Specialist Margaret Condic, MARGARET.R.CONDIC@dhsosha.state.or.us.

Refuge Recovery

- 6 to 7 p.m., every Thursday (second floor)

This substance-abuse recovery program focuses on Buddhist principles and practices. According to the non-profit group's website, Refuge Recovery "cultivates a path of awakening, of recovering from the addictions and delusions that have created so much suffering in our lives and in this world."

Contact: Peer Recovery Specialist Lindsey Widmer, LINDSEY.G.WIDMER@dhsosha.state.or.us.



Sjolander Empowerment Center on the grounds of Oregon State Hospital in Salem

Former patient credits OSH with giving him a second chance at life



"Eclipse" by Adam Larson

Adam Larson can still remember the day he picked up a paintbrush for the first time.

He had recently arrived at Oregon State Hospital's Junction City campus, and Art Therapist Jerilyn Klingenberg had invited him into her classroom. She guided him to an easel with a blank canvas and encouraged him to paint what inspired him.

Larson copied a pastoral scene from a National Geographic magazine, and he was proud of his work. For the first time in a long time, Larson said he felt good about himself.

"I took off running like Forrest Gump across the country," said Larson, who is now living in a group

Adam Larson found support and comfort at Oregon State Hospital's Junction City campus.

home in Springfield, Ore. “Jerilyn treated me not as a patient, but as a human being with feelings. She was what kept me real.”

For Klingenberg, working with Larson was a joy. Not only was he open and willing to learn, he had an impressionistic style that immediately captivated her.

“He was so positive, and he had such a drive to heal and recover,” she said. “It didn’t take long to help show him the beauty he had inside of himself. By the time he left, you could feel his strength.”

Larson was a patient at Oregon State Hospital (OSH) for a year and a half, spending most of that time on the Junction City campus. Since his discharge in 2017, he’s focused on staying sober, being a good role model for his two sons, and pursuing his long-term goal of becoming a peer recovery specialist.

None of this would have been possible if he hadn’t received treatment for his mental illness and substance abuse at OSH, he said. “When I was at the hospital, I was reborn,” he said. “I was given a second chance. Now, I believe in myself, and I know ways to cope with addiction.”

Finding his way

Looking back on his life, Larson knows he didn’t always use his best judgment. He started experimenting with drugs and alcohol at a young age. He didn’t listen to doctors when they diagnosed him with schizophrenia in his early 20s, or later, when they diagnosed him with bipolar disorder.

His addictions only grew worse when he experienced delusions about people hurting his family. Eventually, he pleaded guilty except for insanity for a crime and was placed at Oregon State Hospital for treatment.

“At the hospital, I started going to classes and meeting people,” Larson said. “I felt that things were going to be OK.”

Larson learned more about himself and why he was compelled to drink and use drugs. He developed ways to cope with his addictions, and he began

taking prescribed medications to help treat symptoms of his mental health disorder.

He began working through the vocational rehabilitation program – first as a dishwasher and later as a cashier. He also earned privileges to go on community outings. Larson continued to improve as time went on, so much so that he was discharged from the hospital into a group home.

By that point, Larson was ready to reclaim his life.

“When I was in the hospital, I was like a model of disassembled parts. Now, I’m put together,” Larson said. “I’m functional.”

Following a new path

Since getting out of the hospital, Larson completed a 12-week forklift training program for Food for Lane County, which he hopes will lead to full-time work. He’s also spending more time with his sons, Alex, 12, and Nic, 7. On weekends the three of them play games, draw pictures and build forts together.

“I can’t drink if I want to be active in my kids’ lives,” Larson said. “To be a good role model, I’ve got to keep my head on straight.”

Larson has maintained his sobriety for three years, and he’s proud of the man he’s become. He knows overcoming his addictions is an ongoing challenge, but he’s determined to persevere.

“It gets easier in time,” he said, adding that he hopes his story inspires others. “You have to believe in yourself. Anyone can do it.”

Larson is also determined to become a peer recovery specialist in a couple of years. That way, he can use his own life experiences to help others who are battling mental health and addiction issues.

“I love interesting people, and in the mental health field, these folks are the most interesting you will find,” Larson said. “If I could change one person’s life, it would all be worth it.”

Team Recognition Awards

Supporting Recovery: Flower 1



Improving Quality: Safe Together



Promoting Safety: Lighthouse 3



Innovating: Bird 3 and Facilities



Supporting Recovery: Mountain 3



Team Recognition Awards

The Employee Recognition Committee would like to congratulate the latest recipients of the Team Recognition Award.

Improving Quality: Safe Together

Nominating Manager: Chris Raikes, deputy chief nursing officer

Chris Raikes nominated Safe Together for the Improving Quality award. In his letter, he states that the team has worked incredibly hard to execute Code Green drills and to create new training materials to help reduce staff and patient injuries.

“They are a small but mighty team,” he said. “They are able to execute large projects, and they continue to look for ways to improve and support our hospital’s goals – while being flexible and open to change and feedback. The Safe Together team is doing a phenomenal job.”

Promoting Safety: Lighthouse 3

Nominating Manager: Erin Wong, registered nurse on Lighthouse 3

According to Erin Wong’s nomination, the Lighthouse 3 team worked with several different specialties in the hospital to develop a safety plan for a complex patient.

This patient had unique medical needs and experienced severe psychotic symptoms and agitation – which made it difficult for her to participate in her own medical care. Her medical needs meant the typical Safe Containment procedures were less safe for staff to use with her, which is why the team arranged for Code Green instructors to come to the unit several times to train staff on safe, alternate procedures.

“Everyone on the team worked daily to build a rapport with this patient and come up with possible solutions so they could help her get the medical care she needed,” Wong said. “They also worked together to reduce the risk of aggression and avoid restraint, if possible.”

Because of their efforts, the patient was able to participate in her medical care and maintain behaviors that allowed her to be social in the milieu. Injury was avoided, and her incidents of seclusion were very limited.

Innovating: Patient Financial Services

Nominating Manager: Misty Easter, former revenue cycle manager

Misty Easter nominated Patient Financial Services for making changes that brought in \$5.1 million in revenue for the hospital in August and September 2018.

These changes include creating an electronic version of the Insurance Verification Form for admitting patients, learning and understanding the best Medicare billing practices for the hospital, and helping compile research for Senate Bill 1549, which allows people to continue receiving medical assistance for a specified period after they’re admitted to the state hospital.

“The team is trail blazing, trendsetting, innovating and cutting edge,” Easter said. “They are willing to change current processes to streamline and save time. They truly pull together to achieve greater things.”

Team Recognition Awards

Supporting Recovery: Flower 1

Nominating Managers: Nurse Manager Nikki Mobley, Crossroads Deputy Nursing Supervisor Christy Jovanovic; and Tyler St. Clair, associate director of social work for the Crossroads Program

Nikki Mobley, Christy Jovanovic and Tyler St. Clair nominated the Flower 1 team for its extensive transition planning for a patient coming to the hospital. This planning included assisting the patient in obtaining a public guardian, providing her culturally appropriate services, assigning her an interpreter, and working with her on medication management and boundary setting.

“The Flower 1 team went above and beyond to meet the complex needs of an individual to better ensure her success in the community,” they said. “The transition planning and coordination was extensive, especially the collaboration with community partners.”

Innovating: Bird 3 and Facilities

Nominating Manager: Nancy Frantz-Geddes, Bridges and Pathways program director

Nancy Frantz-Geddes nominated Bird 3 staff – which included carpentry and Facilities staff – for creating an angled wall mirror for a patient bathroom. The mirror allowed observation of a patient from the hallway, while still allowing for privacy for bathroom needs. The new mirror was constructed and installed in less than three days.

“This collaborative, responsive team effort to see a challenge, consider alternatives, and implement a viable solution in mere hours was possibly one of the most amazing feats I’ve seen here in my career,” she said.

Supporting Recovery: Mountain 3

Nominating Manager: Nurse Manager Raia Fink, Mountain 2

Raia Fink nominated Mountain 3 for its work helping a patient who transferred to Junction City from the Salem campus, where he had spent several years on enhanced supervision.

“Instead of imposing restrictions for negative behaviors, they consistently engaged him to identify his strengths and interests and develop new skills,” Fink said about the Mountain 3 team. “They offered him meaningful choices and encouraged him to direct his own goals in treatment and discharge planning.”

Within two months of transferring to Mountain 3, the patient no longer required enhanced supervision. He transitioned to a community placement less than a year later.

Congratulations to all the team winners!



Get involved

The Employee Recognition Committee is an employee group that helps year-round with various fund raisers, drives and employee recognition celebrations.

To learn more about team recognition awards and the Employee Recognition Committee; contact them at OSH.ERC@dhsosha.state.or.us.

Resources created to help staff who experience workplace trauma



Michelle McGraw-Hunter, director of the Staff Engagement and Support Department

At Oregon State Hospital, we channel our dedication and passion to serve some of the state's most vulnerable people. During this very important work, we could experience workplace trauma. Trauma may result from a myriad of experiences, such as the death of a patient or staff member, a serious medical emergency, or an assaultive event with a patient. It could also come from providing emergency medical assistance to a co-worker. Everyone is unique, and what is traumatic for one person may not be for another.

Because of these experiences, staff may feel secondary traumatic stress, compassion fatigue and burnout – all of which could significantly affect their health, well-being and ability to serve our patients.

Staff may feel secondary traumatic stress, compassion fatigue and burnout

To better help staff affected by traumatic events in the workplace, Oregon State Hospital launched a Workplace Trauma Work Team Initiative (WTI) in 2017. As a result of the WTI, the hospital began offering new support services to Harbors staff in January, Crossroads staff in May, and Archways staff in July. We'll continue to expand the support services to the entire hospital during the next year.

So far, we have:

- Reinvigorated HEART and trained 120 volunteers.
- Developed trauma-informed protocols for how the hospital responds after a traumatic event.
- Provided comfort totes to units for the Harbors Program (this work is being done in phases, beginning with Harbors and security staff).
- Offered trainings to help address issues of workplace wellness.
- Created trainings to help managers use trauma-informed methods to communicate with staff.

"I'm not alone in this situation."

As the Staff Engagement and Support Department director, I am excited to help OSH become an organization that exemplifies a trauma-informed approach in working with both patients and staff.

In this new role, I am tasked with creating and implementing organizational interventions for staff that address various issues of trauma, burnout and resilience. I am also responsible for the development, implementation and ongoing management of employee engagement initiatives and projects across the hospital.

Continued on page 17

OSH greenhouse program launches community partnership

When Michael Taylor came aboard as Oregon State Hospital's new greenhouse trainer last fall, he had two goals: Honor the past and nurture the future.

Six months later, he's achieved his first milestone by establishing a partnership with 13th Street Nursery in Salem.

"I don't see my greenhouse workers as patients. I see them as people," Taylor said. "I want other people to see them the same way."



An OSH patient works in the greenhouse in a 2017 photo.

Through the community partnership, Taylor's workers grow flowers and veggie starts in the greenhouse on the hospital grounds for the nursery to sell. The nursery gains a supplier, the patients learn small-business practices, and, most importantly, community members learn more about the talents and capabilities of OSH patients.

"It's so vitally important that more people get involved," said Scott King, who owns the nursery with his wife, Dianna Brainard-King. "It gives them (patients) meaning, it gives them purpose, and we get the reputation of selling beautiful plants. Everybody benefits."

This past spring, OSH began selling about eight flats of plants to the nursery per month. The plan

is to continue supplying the nursery with inventory throughout the year.

Taylor is also focused on increasing the knowledge of his 12-member workforce. In addition to growing and tending to plants – which OSH patients have done for the past 10-plus years – Taylor is teaching his workers how small-scale agriculture is changing. That's why his curriculum includes lessons on organic pest management, composting, and how to use fans, lighting and ventilation systems.

"The patients don't have to take tests. That's not the point. It's exposure," Taylor said. "I want everyone to be stewards of the land."

Dillon V. of Bird 2 is excited by the program's changes. For him, the job is therapeutic because it helps connect him with nature.

"We're learning how to take care of plants and we're learning how to take care of ourselves," he said. "When we focus on the plants and watch them grow, it gives us a boost of confidence."

Going forward, Taylor said he's excited for the unplanned, teachable moments with his crew – whether that's picking up a pot to look at a plant's root system or practicing how to water flowers properly.

"Taking care of something can be juxtaposed with taking care of yourself," Taylor said. "It's all connected."

All proceeds from Oregon State Hospital's plant sales to 13th Street Nursery are put back into the hospital's general fund.

The nursery is located at 1296 13th St. SE in Salem. It's open 9 a.m. to 6 p.m. Monday through Saturday and 10 a.m. to 4 p.m. Sunday.

Introducing new CPS Director Carlos Rodriguez



Carlos Rodriguez, CPS Director

Carlos Rodriguez says he's received many second opportunities in his life.

When he was an infant, he migrated with his parents to the United States from Mexico. He didn't complete high school, but later went on to earn a master's degree. And now, he feels fortunate to serve as Oregon State Hospital's new director of Collaborative Problem Solving.

Through this role, Carlos oversees a team of 19 people and provides leadership to advance the technical, interpersonal and institutional effectiveness of the CPS Department.

"A lot of people, to one degree or another, are being provided another opportunity here," said Rodriguez, who was hired this spring. "That's why I was drawn to the hospital."

Q. Why did you apply to become the hospital's new CPS director?

A. I applied for this job because it's unique in the state of Oregon. We are the only state agency that has a collaborative problem-solving program aimed at adult patients to help deliver trauma-informed care. I saw a good opportunity to lean into my educational skill sets and my work experience. I also wanted to challenge myself by breaking out of one industry and entering another.

Q. How would you describe your leadership and management style?

A. From a leadership perspective, I like to work with others to help them rise above their own self-interests so we can better serve the people of Oregon. I think it's inherently in alignment with CPS. This means giving people a voice to communicate what they believe works best here at the hospital. In terms of management, I'm very big on stewardship. Properly and adequately managing financial resources for the people of Oregon is a big priority for me.

Q. Where did you work before coming here?

A. I spent three years working as the organizational development manager for the Oregon Department of Forestry. Before that, I worked for the Office of Institutional Equity and Compliance at Missouri State University, where I earned my master's degree in industrial organizational psychology.

CPS really tries to not only help all people be successful but to treat them with dignity and respect in the process.

CPS Director Carlos Rodriguez

Trauma-informed approach resources

Continued from page 14

Q. You're new to CPS. What do you think of it so far?

A. I really like CPS. The philosophy and the practices resonate with me because it reminds me of a Maya Angelou quote that goes something like, "At the end of your life, people will not remember what you said or did. They will remember how you made them feel." CPS really tries to not only help all people be successful but to treat them with dignity and respect in the process.

Q. What can people expect from you during your first year here?

A. People can expect a forthcoming vision, mission and values statement from CPS to help consistently guide our path forward. With that, they can also expect to see an increase in coach-to-staff coaching and mentoring. We'll have a high degree of personal interactions with all the ranks of OSH employees – and patients – to help ensure we are meeting their needs and demands. For example, I plan to go to Super PAC meetings so I can hear how CPS can better contribute to the mission of the hospital.

Q. On a lighter note, how do you spend your time when you're not at work?

A. During my free time, I go to the gym frequently. I fish. I enjoy riding horses. I love the coast, and I love to barbecue. When the work hat isn't on, I really like to relax, take a breath and take life as it comes.

Contact the CPS Coaches

Contact OSHCPSCOACHES@dhsosha.state.or.us or 503-947-2963 to find out more about CPS.

These changes will help staff better provide self-care in ways that work for them, and they will ensure we have more trained staff to provide peer support. We are currently exploring ideas for how to provide on-site mental health counseling for employees. We are also scheduling leadership trainings to help OSH become a trauma-informed organization.

I want to give a special thank you to the interdisciplinary team from both campuses who helped make these changes possible. Already, close to 300 staff have attended a "Foundations of Workplace Wellness" class, and we have learned a lot about how staff are affected by workplace trauma and about the resiliency skills they have and want to further develop.

As one participant said, "I realize I'm not alone in this situation." Many have expressed an interest in further training on burnout, compassion fatigue and mindfulness, and we are actively exploring ways to provide further training and support to staff around these important issues. By working together, I'm confident we'll continue to improve the services and support our staff need and deserve.

- Michelle McGraw-Hunter

Get involved

If you are interested in helping with these efforts, such as by volunteering with the Hospital Employees' Assistance Response Team (HEART), please contact HEART Coordinator Andrew Mills at Andrew.M.Mills@dhsosha.state.or.us.

If you are interested in taking a training, please contact Michelle McGraw-Hunter, director of the Staff Engagement and Support Department, at Michelle.MCGRAW-HUNTER@dhsosha.state.or.us.

Creating a welcoming, respectful OSH for all



Nina Perard, diversity liaison for the Office of Equity and Inclusion

This spring the Oregon Health Authority shared its OHA 2019-2021 Affirmative Action Plan (AAP).

The AAP guides each division of OHA toward a more equitable and inclusive environment, one that reflects the diversity, cultures and values of both the people we serve and the workforce at OSH.

The AAP affects us at Oregon State Hospital in a variety of ways. Providing cultural competency and unconscious bias training are two examples of key initiatives outlined in the plan. By offering more opportunities for professional development in these

Patients who receive culturally and linguistically appropriate care that is trauma-informed and person-centered are more likely to engage.

topic areas, staff will be able to reflect on the impact of unconscious bias in the workplace, become more aware of the diverse backgrounds of patients, and understand how to meet their cultural needs through appropriate treatment planning and interventions.

Developing our cultural competency and knowledge of unconscious bias has a direct impact on our work with patients. Patients who receive culturally and linguistically appropriate care that is trauma-informed and person-centered are more likely to engage in treatment services, retain benefits of treatment, and continue treatment after transitioning to lower levels of care.

Another important AAP initiative involves incorporating equity and inclusion principles into our recruitment and promotion processes. Increasing the recruitment, retention and promotion of a qualified diverse workforce contributes to our ability to provide services that are equitable and inclusive. Specifically, incorporating diverse perspectives and experiences to the process of developing and revising policy and procedures is especially important to the quality and appropriateness of our client services. Our clients, like our staff, are diverse.

I encourage all staff to take some time to read the AAP, focusing on OHA's outlined strategies for 2019-2021 (pages 91-101). Make a point to find ways to integrate the strategies into the work you do with patients and each other. We should each take responsibility to create a welcoming and respectful organization for all who come to OSH.

I welcome your ideas, concerns and comments. Please contact me at nina.perard@state.or.us or by phone at 503-945-7135.

Diversity, acceptance honored at OSH through PRIDE event

To honor diversity, practice acceptance, and express self-pride for members of the LGBTQ+ community, Oregon State Hospital hosted a PRIDE celebration for its patients and staff in June.

The event featured arts and crafts, face painting, a photo booth, games and music by Kit Abrahamson from Willamette Valley's LGBT Chorus Confluence. Community partners, including Basic Rights Oregon, the Center for Hope and Safety, and the Oregon Department of Veteran's Affairs, shared information.

This year was special in that the date of the celebration coincided with Juneteenth, which commemorates the day slavery ended in Galveston, Texas.



A short video about the OSH Salem Pride event is available online at osh.oregon.gov.



More than 60 patients and staff visited the photo booth.

June 19 is known as the last day of slavery, where slaves in the south were freed two years after the Emancipation Proclamation was signed into official order.

LGBTQ+ pride and African-American freedom is celebrated through recognition of achievement, practicing respect for all cultures and continuous self-development and improvement.

For more information about the celebration, listen to part of the welcome speech by Nina Perard, diversity liaison for the hospital. Find a link to the video at OSH.Oregon.gov.

Also contact Nina for more information about equity, diversity and inclusion. She is available at 503-945-7135 and nina.perard@state.or.us.



Dozens of custom crowns were put together at the craft tables.

Friends and Family Day a success

Junction City welcomed nearly 50 friends and family of patients on Saturday, June 22, for a barbecue and resource fair. The event featured music, an art show, a photo booth and a meet-and-greet with families and OSH leadership.

Participants enjoyed activities and information tables hosted by a variety of hospital departments and community partner organizations, which included White Bird Clinic, St. Vincent de Paul, and WorkSource Lane. Community partners had the opportunity to tour the hospital before they set up their displays.

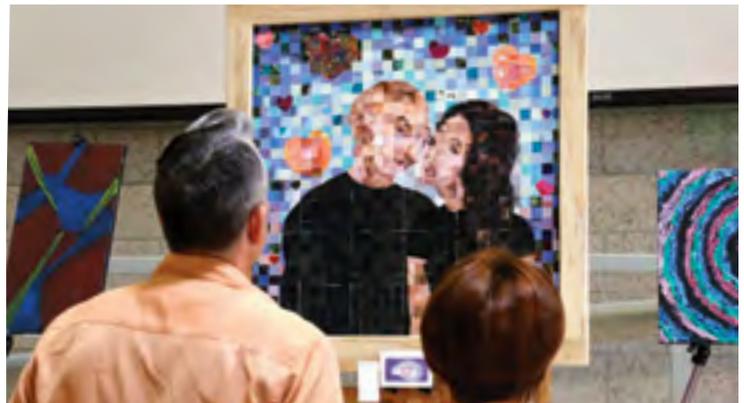
While the gymnasium was filled with interesting conversations and decorative art, guests and staff gathered outside in the quad to enjoy a barbecue in the sunny, 75-degree weather.

Families were greeted by blooming flowers in the quads and green house as they toured the hospital. Some patients accompanied their families on the tours, describing what they did in each space and pointing out where certain treatments were provided.

OSH Deputy Director Kerry Kelly said the event offered “a chance for clients to share their hospital experience with their families, while providing family members a personal look into the support and treatment their loved ones are receiving.”



Patients, staff and visitors posed at the beach-themed photo booth.



Patients created more than 150 paintings, photos and collages to display during Friends and Family Day.



Culinary services served more than 200 meals to patients, staff and visitors.

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