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From The Director

Two Recent Situations:

1. The Medical Emergency Being prepared for the unexpected emergency situation is an essential component of a professional healthcare provider. On September 29 when a Code Blue was called, SWVMHI staff members responded promptly and carried out life support procedures according to high standards until the local EMS could transport the patient to the Emergency Room. Psychiatric Aides Karleen Davidson and Toni Huggins were the first to identify the emergency and summon help. Appreciation is extended to them for their initial response. Special acknowledgement is given to Dr. Slater, Dr. Crisp, Dr. Ladenika, and Debbie Magee, Nurse Practitioner. Registered Nurses Roxanne Evans, Lisa Taylor, Kathy Fowler, Benji Duvall and Ellen Tilson are commended for their roles. Other staff members were important in assisting other patients and their colleagues. It is the difficult and challenging times that heighten our awareness of the great teamwork and patient care provided, "no matter what," by SWVMHI staff members.

2. A "Perimeter" Challenge It is also important to note the prompt and professional response of SWVMHI staff and regional law enforcement offi-

cers in a situation that occurred "outside" our hospital boundaries. Chief of Security Dickie Harrison, Security Supervisor/Investigator Tommy Cullop, and Officers Tim Sturgill and Bryant Darnell assisted, as well as provided excellent communication and teamwork with others in the field. A number of facility staff participated with the search. In addition, the Smyth County Sheriff's Office and The Marion Police Department put forth a maximum effort in assisting. The Sheriff's Office tact team responded, as did the their K-9 tracking unit; at least eight patrol units were assigned to assist until the successful and peaceful resolution. Sheriff Bradley himself, a former SWVMHI employee, was present from the beginning to the end. The Marion Police Department diverted all available patrol units to assist. WINGS air ambulance did several "fly overs," and the US Marshall's Office was contacted for their resources. The VSP participated in the perimeter patrols. All these agencies and individuals deserve special recognition for their service, beyond the call of duty. They were instrumental in a successful outcome for the individual involved.

In addition to my thanks, Commissioner Stewart has asked that I convey his concern for and appreciation to staff who dealt with the

above-mentioned difficult patient situations that occurred during two days at the end of September.

Both situations, one on ERS and one on Admissions, have been difficult in different ways—however, knowing our team members as I do, I am confident that we will not rest on our laurels, but strive to learn all we can from the situations in order to continuously improve the quality of care at SWVMHI. We thank Commissioner Stewart for recognizing us during difficult times.

"Because of you, the world has more goodness, more kindness, more caring, more courage, more hope in it."
~Dan Zadra



~ Cynthia McClaskey, Ph.D. (with Tipi and Chief)

Safety Trivia Question

The average American home is currently storing about how much hazardous waste?

- a. 1 lb.
- b. 10 lb.
- c. 100 lb.
- d. less than 1 lb.

Please see answer on page 14

From the Director, continued

SWVMHI Employees of the Quarter, April–June, 2010

If someone listens, or stretches out a hand, or whispers a kind word of encouragement, or attempts to understand, extraordinary things begin to happen.
~Loretta Girzartis

On behalf of the Employee Recognition Committee, I am pleased to announce that on September 2, 2010, two nursing service employees, Angela Gentry and Janice Morris, were awarded Employees of the Quarter for their sustained, exemplary performance.

Angela, a Psychiatric Aide on ERS, is noted to consistently provide quality care to the residents on the unit. She listens to the patients and encourage each to participate in their recovery plan in order to promote and enhance their recovery experience at SWVMHI. She is dependable in completion of her assigned duties and she picks up in times of increased acuity and does what she can to improve the ward milieu. She is pleasant in her interactions with the individuals we serve and with her co-workers of all disciplines. Good comments are received by her supervisor from other staff about her work habits and her positive attitude.

Janice, a Psychiatric Aide on Geriatrics, exemplifies the values of Teamwork, Honoring Day-to-Day Tasks, and Self-Initiative. She has gone the extra mile to make changes to her own work schedule

In order to assure coverage on the wards. She is a team player and is willing to help, takes the initiative without being asked, and is respectful of others. She treats the individuals we serve, and staff, with respect. She is a preceptor for other staff members, is a leader, and is honest and compassionate. Janice is also noted to possess excellent customer service skills, always responding promptly and courteously to each and every request.

~ Cynthia McClaskey, Ph.D.

Congratulations & Thank You to HIM Staff — Master Patient Index completed

Back in October 2009, Health Information Management (HIM) staff set a goal of creating and completing an electronic Master Patient Index (MPI) by October 1, 2010. With a few days to spare, I am happy to report that this project is now complete due to the hard work of HIM staff members. Over 86,000 patient episodes were entered into the MPI. If department managers would like to request MPI access for their staff members, or if you have questions regarding the MPI, please contact me.

~ Kim Ratliff, RHIA
Manager, Health Information Management

Breast Cancer Awareness Month

Breast cancer is one of the most common cancers diagnosed in women. Each year, about 255,000 women in the United States develop some form of the disease, and more than 40,600 die from it.

The good news is that breast cancer deaths are in decline, attributed to early detection and improved treatments. The best way to fight breast cancer is to have a plan that helps you to detect the disease in its early stages.

Take control of your health by following the American Cancer Society's guidelines. Beginning at age 40, you should have a mammogram each year combined with

clinical breast exams. Maintaining a healthy weight, following a low-fat diet, getting regular exercise, not smoking, and reducing or avoiding alcohol con-

sumption all decrease your chances of developing breast cancer.

October is National Breast Cancer Awareness Month. Please take this opportunity to schedule your mammogram and encourage your family and friends to do the same. **Remember, the best protection is early detection!!**

~ Denise Deel, RT(R)(M)
Radiology Supervisor



Teamwork is our Strength

This month's newsletter entry wrote itself. When human resources are scarce and the same or more productivity is required, it is important to ask for assistance and/or anticipate where assistance is needed and offer it. Asking for assistance is not a sign of weakness in a culture like ours that values Teamwork; it is a sign of strength and Trust. Providing assistance is not extra work in a culture like ours that values Teamwork; it is a sign of Honoring Day-to-Day Tasks.

The reason this month's newsletter entry wrote itself is because my colleague and teammate, Mary Beth, just



explained this to me in words and actions. It seems we are all required to

do more with less these days, here at SWVMHI, at home, and elsewhere. Teamwork, covering each others' back, is a critical success factor in times like these. Cultures that value Teamwork have a much better chance of leveraging scarce human resources to maintain high levels of service and productivity.

~ Jim Moon, Ph.D.
Psychologist Supervisor

October Lunar Phases



October 7

New Moon

October 14

First Quarter Moon

October 22

Full Moon

October 30

Last Quarter Moon



Central Rehab Services News

Money is tight
Don't put up a fight
Do what is right
Support the CVC

The Central Rehabilitation Services Department started September off with an evening Hawaiian Luau. Several of the individuals we serve and staff participated in lawn games including: the limbo, a hula hoop contest, Bocce, and precision ball activities. Everyone had the opportunity to try on or wear leis and grass hula skirts. The tiki bar was set up with ice cream, toppings, and punch. Music was played throughout the evening and the karaoke participants were very entertaining. Every once in a while the sound of a distant ukulele could be heard.

The next "big" activity was Family and Friends Day held September 16th in our picnic area. Individuals we serve and friends and family members enjoyed ice cream sundaes and punch. Karaoke, hula hoop, and slopes contest's were scheduled throughout the after-

noon. Family members and friends were able to interact with staff members. Due to time restraints and the possibility of rain, the Slopes contests was continued to the next afternoon in the gymnasium. More information about Family & Friends Day can be found on Page 12.

Throughout the month, several other regular evening activities were held in the gym, game, and TV rooms including weekly church services. Thank you to everyone who volunteered and/or participated in these activities. We truly hope everyone had a fun-filled September.

~ Fred Pfrimmer, M.Ed.
Recreation Therapist
Central Rehab Services

Chaplain's Corner

"Come with me by yourselves to a quiet place and get some rest" (Mark 6:31). There is an old Greek legend that a man of Athens happened to see Aesop, the famous storyteller, playing games with some little boys. The man laughed at Aesop and wanted to know why he wasted his time playing childish games with little boys. Aesop picked up a bow, loosened its string, and placed it on the ground. Aesop then asked the man who criticized him to answer the riddle of what the unstrung bow meant. The man thought for several moments but could not come up with an answer to Aesop's riddle. So Aesop said to the man, "If you keep a bow always bent it will break eventually, but if you let it go slack, it will become fit for use when you want it."

"Come with me by yourselves to a quiet place and get some rest" (Mark 6:31).

When the tired disciples of Jesus returned from a long period of ministry, Jesus knew the importance of rest for their wearied bodies. He invited them to come with him to a place of solitude for a time of rest and refreshment. We are all in need of what Jesus offered his disciples. We often find ourselves so busy that there is little time for our own well being. We push ourselves to the limit and beyond because we think this has to be done or else! We forget the necessity to care properly for our physical needs, our mental/emotional needs, and our spiritual needs.

What often happens is that we try to operate on our energy reserves. Then we do our best to crash at night in hopes of some decent sleep to try to get through the next day. Ever notice how popular "5 Hour Energy," or the high caffeine/sugar drinks have become?

We want that high feeling to not only feel good, but to also maintain the energy we need to get through the day.



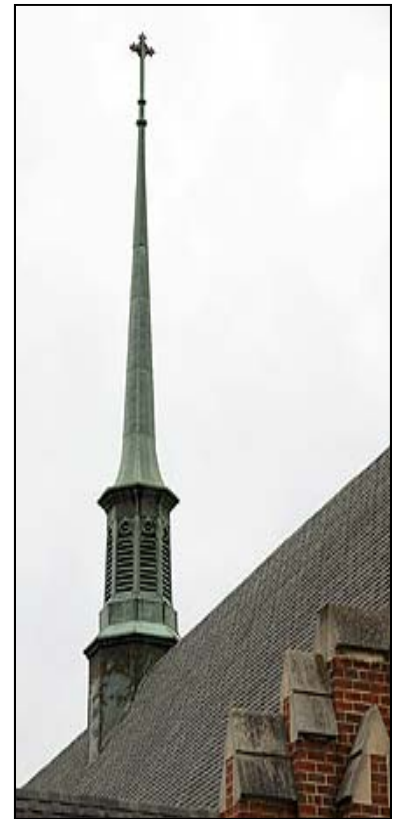
Ecclesiastes 3:1 says, "There is a time for everything and a season for every activity under heaven." Perhaps for many of us we have lost the value of time to rest and refresh ourselves so that we "become fit for use when we want it." We must learn to work when work is needed, and learn to rest, play, and relax at every opportunity that presents itself. Jesus knows the value of rest for the body, mind, and spirit. Even God shows us the value of rest — after six days of creation, on the seventh day He rested (Genesis 2:1). Most of us know what works for us to help us relax and be refreshed, but we need to learn to do it instead of just think about it. The body, mind, and spirit require moments of tender loving care so that life is loved and not just lived.

Jesus, in the verse quoted above, gives us three simple instructions to follow that we might replenish the body, mind, and spirit. He first says, "Come with me." Jesus invites us to share our lives with him and lean on his reserves of energy when we need it, and to trust in him for the rest we all so often crave. He wants us to know that rest can be found in him when it can be found no place else.

Secondly, he reminds us to find a quiet place, a place of Solitude away from all the distractions, noise and the pressures

we are faced with every day. It does not have to be far away, but it is our hiding place where we can be alone with our thoughts, the things we enjoy, and with God.

Finally, Jesus simply says, "Get some rest." We need to be told that sometimes, because we do not always listen to our own bodies, mind, or spirit when they cry out to us, "Please, give me a break!" Plan for it and make it a habit to look for the little things everyday that can help to replenish you and **find the time** to be alone with God, with yourself, and with the things you love so that you can "become fit for use when you want it."





Autumn Word Search

How many words can you find related to **October** and **Autumn**?

Q	W	E	R	T	Y	U	I	O	P	A	S	D	C	F	E	G	H
J	K	L	Z	X	C	V	B	N	M	M	N	G	O	U	R	D	B
J	A	C	K	O	L	A	N	T	E	R	N	V	R	C	I	X	Z
L	K	J	H	G	E	F	D	A	U	T	U	M	N	S	P	S	A
F	P	O	I	U	A	Y	T	P	T	R	E	W	S	Q	M	Q	p
U	Q	S	W	E	V	R	H	P	T	Y	U	I	T	O	A	U	U
L	P	E	A	S	E	F	A	L	L	D	F	G	A	H	V	A	M
L	J	M	K	L	S	Z	L	E	X	C	V	B	L	N	M	S	P
M	P	U	O	I	U	Y	L	S	T	W	R	A	K	E	R	H	K
O	E	T	W	Q	L	K	O	H	G	O	F	D	S	S	A	Z	I
O	Z	S	X	C	V	B	W	N	M	R	A	S	D	F	G	H	N
N	J	O	C	T	O	B	E	R	K	C	L	Q	W	E	R	R	T
Y	U	C	I	R	O	P	E	M	N	E	S	B	V	E	C	X	Z
A	S	D	A	F	G	H	N	J	K	R	L	T	D	Q	W	E	R
P	O	N	I	U	Y	T	R	E	W	A	Q	I	S	A	S	D	F
Q	G	W	E	R	T	Y	U	I	O	C	P	N	W	O	R	B	D
E	A	W	I	T	C	H	V	B	T	S	E	V	R	A	H	G	H
M	N	B	V	C	X	Z	A	S	D	F	G	H	J	K	L	G	Y

Apples

Cornstalks

Gourd

Leaves

Rake

Autumn

Fall

Halloween

October

Scarecrow

Brown

Full Moon

Harvest

Orange

Spider

Witch

Costumes

Ghosts

Jack-o-lantern

Pumpkin

Squash

Vampire

Watch for FUN
Raising activities for
CVC!!



Top 3 Factors for Improving E-mail Communications

There aren't many of us, if any, who have not been on both sides of e-mail exchanges in which the receiver misinterpreted a sender's tone. This makes sense when we recall that 80% of human communication lies in areas other than mere words. E-mail messages are limited to words though, and any effort to convey emotional content through the arrangement of vowels and consonants is risky business. Having to go back and then straighten out the inevitable misunderstandings of feeling tone from e-mail is yet another inefficient consequence of digital life, if we are even aware that there has been such a misunderstanding.

The construction of e-mail messages that produce the least chance for miscommunication or inclusion of actual feeling tone that we will regret later is referred to as "netiquette." We'll keep our netiquette suggestions simple during these currently hectic times, so here is our "Netiquette Great Eight List":

1. **Be concise and to the point:** Only including the information that we need to get across is respectful of our recipient's time, and strips away the kind of words and phrases that can cause misunderstandings.
2. **Do not overuse the "high priority" (!) option:** When we use this designation when it is not indicated, we can also convey disrespect for the time and attention level of our recipient. Don't be the "boy who cries wolf."
3. **Do not write in all capital letters:** This is yelling. 'Nuff said on this one.
4. **Do not use fonts greater than size 14, and 12 is preferred:** Many people use small preview screens, and large font messages requires excessive scrolling. Our recipients often see this as "inflated message importance."
5. **Be careful with "emoticon" use:** Emoticons are the little punctuation combos meant to add emotional information in messages. One example is the common "colon-closed parenthesis" smiling face :). Only use this when you are entirely confident that none of your recipients for a particular message will completely misunderstand your intent. Even a seemingly harmless smiling face carries the potential of being misconstrued as sarcasm.
6. **Do not forward chain messages:** Ever. Period.
7. **Never send messages containing libelous, defamatory, offensive, racist, or obscene remarks:** Every time you break this rule you just put the health of your career directly in the hands of your recipient(s). Simple as that.
8. **Do not reply to "Spam":** If you do, you may have made it more likely that Spammers will continue to clog our bandwidth with Spam. (And yes, those of you who are Monty Python fans can read this one in an English accent – no additional smiling face required.)

Next month we will present some thoughts on "Improvement Factor Number Three," mindful steps to ensure that only the appropriate people get each message that we send.

(to be continued)

~ Communications Workgroup



Older Virginians' Mental Health Month

Mental health issues pose a serious risk to the health and well being of older adults, resulting in risks of increased disability, reduced independence, intensified caregiver stress, escalated mortality, and magnified risk of suicide. Depression, anxiety, and substance abuse should not be dismissed as a part of normal aging. As baby boomers age and add to the ranks of Elders, the number of older adults with mental health problems will increase. Often, the stigma associated with mental health issues prevents older adults from talking about their problems and from seeking help. Social barriers

that prevent older adults from seeking medical and psychiatric evaluations and from receiving treatment can be eliminated by clinical and community support workers who reach out to this age group and who are knowledgeable



about older adults and their needs.

As we celebrate "Older Virginians' Mental Health Month," it is important to recognize the many families, neighbors, caregivers, and providers for their support and assistance. The collaborative care offered by our regional private-public, and academic partners is invaluable in enabling older adults to continue to contribute in a manner consistent with the values of self-determination, recovery, and empowerment.

~ Brought to you from your local Community Services Boards



PERSONNEL CHANGES

New Employees

Melissa Testerman, Psychiatric Aide	Aug 10
Michelle Wilkinson, Psychiatric Aide	Aug 10
Sarah Smith, PI4 Registered Nurse	Aug 10
Brandon Parks, PI4 Food Service Tech	Aug 10
Steven Jeffers, PI4 MOD	Aug 19
Zachary Hammons, PI4 MOD	Aug 20

MONTHLY PATIENT CENSUS

August 2010

Admissions 84

Discharges 87

Passes 6

Average Daily

Census

144

Separations

Tony Romans, Rehab Specialist	Aug 2
Luke Armstrong, Psychiatric Aide	Aug 15
Heidi Coe, Psychiatric Aide	Aug 17
Misty Thompson, Registered Nurse	Aug 18

Promotions/Role Changes

Ken Miller from RNCA to RNCB	Aug 10
Donna White from Psych Aide to Psych Lead Aide	Aug 10
Robin Coleman from Psych Aide to Psych Lead Aide	Aug 25



ATTENTION ALL STAFF

Fire, Safety, & Security CAI is due by October 31.

Meals In Minutes— Minestrone Soup

Now that the weather is starting to cool down, warm up with this easy-to-fix soup:

Ingredients:

1 can (28 oz) whole tomatoes, undrained
 1 can (15 to 16 oz) great northern beans, undrained
 1 can (15 to 16 oz) kidney beans, undrained
 1 can (15.25 oz) whole kernel corn, undrained
 2 medium stalks celery, thinly sliced (1 cup)
 1 small zucchini, sliced (1 cup)
 1 medium onion, chopped (1/2 cup)
 1 cup shredded cabbage
 1/2 cup uncooked elbow macaroni or broken spaghetti

1 1/4 cups water
 1 teaspoon Italian seasoning
 2 vegetable bouillon cubes
 1 clove garlic, finely chopped
 Grated Parmesan cheese, if desired

1. In 4-quart Dutch oven, heat all ingredients except cheese to boiling, breaking up tomatoes; reduce heat to low.



2. Cover and simmer 15 to 20 minutes, stirring occasionally, until macaroni and vegetables are tender. Serve with cheese.

Health Twist: For a delicious vegetarian meal, sprinkle the hot soup with chopped fresh parsley instead of the cheese.

Serve with: All this meal needs is multigrain bread slices spread with garlic butter and a spinach salad tossed with poppy seed dressing.

~ From www.bettycrocker.com

Halloween Safety

In preparing to write the Halloween Safety article, I was reviewing safety tips such as: costumes shouldn't be too long, too loose, and should be flame retardant; that vision shouldn't be impaired by masks; teach children about the consequences of vandalism; that hurting animals is never acceptable; not to carry sharp items; beware of traffic; etc. That is all stuff we already know. Then there was mention of several tips that were new to me like; check the sexual offender website for your zip code; make sure if you are not with your children that they have a cell phone and know to check in with you every hour; if you are out with your children following in a vehicle do something to make your vehicle unique (they do look a lot alike these days) so the kids get in the correct vehicle. Then I saw this. "if you are going to have a yard haunt make sure you get extra home owners insurance for the nights you allow people to view your haunt."

We didn't have "haunts" when I was young, but we did try to scare trick-or-treaters. So one year my dad, my cousin and I set out to scare everybody. Dad

bought an ugly old man mask with limited vision and dug out a flashlight. My cousin donned a sheet and climbed up in our oak tree prepared to be our ghost, and I just watched. Just after dark with the porch lights off, the bell rang and dad with his mask on and flashlight in place under his chin slowly opened the door and in an eerie voice said, "Ye-es-s-s." Two very young goblins jerked their hand from their



mother and ran screaming toward a very busy street. As they passed the oak tree my cousin jumped out scaring them even more and they ran faster toward the street. Their mother caught them just as

they reached the pavement. Little did we know it was their first year to trick-or-treat and they started with our house. Their mother literally dragged them back to our door so she could let us know how we had ruined their night and probably trick-or-treating forever. No amount of apologies could salve her anger and no amount of candy made the situation better for the kids. That ended our scare everybody plan. By the way, my cousin twisted his ankle when he jumped from the tree and limped around for days. So what I carry with me about Halloween to this day is make it fun, try to plan for all possibilities, and make it as safe as you can so that years later memories will be pleasant and not of an accident or other painful experience.

To get more safety tips for kids, adults, parties, costumes, driving, pets, etc. to help plan and build good memories check out www.halloween-safety.com.

~ Karen Chavers, MSRN, Director
 Staff Development & Training
 On behalf of the Safety Committee

Fall Prevention — “Get Up and Go Test”

As baby boomers and their parents age, the risk for falls increases. The American Geriatric Society recommends that all older persons who report even a single fall should be assessed using the “Get Up and Go Test.” This test requires no special equipment, and is the most frequently recommended screening test for mobility. This test is used to identify intrinsic risk factors, such as lower extremity weakness, gait disorders, and poor vision. It can be performed by ambulatory persons. In brief, the seated individual is asked to get up from a chair, walk 10 feet, turn, return to the chair, and sit down. Any unsafe or ineffective movement suggests balance or gait impairment and increased risk of falling.

In more detail, here is the procedure:

1. Seat the older person in a straight-backed chair and observe how he or she is seated. Look for slumping posture or leaning towards one side.

2. Ask the older person to stand. Is the motion smooth, does it take more than one try, does the person need to use his or her hands to push up off the seat? This maneuver assesses leg muscle strength.



3. Ask the person to remain standing with his or her eyes open and as still as possible. Then instruct the individual to stand with his or her eyes closed. Is the person able to stand without swaying?

4. Instruct the person to open his or her eyes and walk 10 feet, then turn and walk back to the chair. Observe the person’s gait speed and balance. If the person is impaired, you’ll observe a broad-based gait, small steps while turning, staggering, or limping.
5. Upon return to the chair, instruct the person to turn and sit. Is the person’s motion smooth or does the person fall into the chair?

If an older person reports no more than one non-injurious fall and has no difficulty with walking or balance, no further assessment is needed. Exercise is a key feature in reducing the risks for falls and exercise programs seem to be more effective when embedded in a multifactorial, fall prevention strategy.

~ From the American Geriatrics Society

National Boss’ Day is a secular holiday celebrated on October 16 in the United States. It has traditionally been a day for employees to thank their boss for being kind and fair throughout the year. Patricia Bays Haroski registered "National Boss' Day" with the U.S. Chamber of Commerce in 1958. She was working as a secretary for State Farm Insurance Company in Deerfield, Illinois at the time and chose October 16 because she forgot that the birthday of her boss, who was her father, was actually on the 16th. Four years later in 1962, Illinois Governor Otto Kerner backed Haroski’s registration and officially proclaimed the day.

National Boss' Day has become an international celebration in recent years and now is observed in countries such as Australia, India, and South Africa and very recently Ireland and the UK. According to Emily Post, you should not give a gift to your boss unless it is from a group of employees. This will avoid the appearance of currying favor from your boss.

~ www.wikipedia.org

October Days to Celebrate

“Off the cuff” October holidays to celebrate:

October 2

Snoopy’s Birthday

October 6

World Smile Day

October 7

International Frugal Fun Day

October 9

Leif Erikson Day



October 10

World Egg Day

October 11

Eleanor Roosevelt’s Birthday

October 15

National Mammography Day

October 23

Make a Difference Day

October 30

Candy Corn Day



Alcohol & Drug Abuse Prevention Month

This summer I was fortunate to attend the Summer Institute on Addictions held in Williamsburg, Virginia. One of the keynote speakers was Alexandre B. Laudet, Ph.D., Director, Recovery Research Center, Institute for Research, Education, and Training in Addictions (IRETA). As we observe Alcohol and Drug Abuse Prevention Month in October, and with our vision always turned toward concepts of recovery, I wanted to share some of Dr. Laudet's research-based observations.

Persons with co-occurring mental health and substance use disorders have special recovery needs, but they can attain and sustain recovery with the needed services and supports. Regardless of diagnosis one of the cardinal requirements of recovery is that the individual be able to establish a strong, sober support network in the community.

Recovery-Oriented Systems of Care (ROSC) is an emerging model of service delivery that represents two paradigmatic

shifts in the substance use field relative to the prevalent care model: First, ROSC adopt a chronic or continuum of care model that is better suited to the chronic (relapse-prone) nature of substance use disorders, especially in their most severe form, than the current model focused mostly on providing a short episode of intensive care to a person in crisis. Second, rather than focusing mostly on symptoms (substance use), ROSC is person-centered and wellness-focused, and builds on the strengths and resources of the individual, his/her family, and community to promote overall improvements in functioning. Recognizing that substance use disorders affect multiple areas of life, ROSC is an integrated multi-system model of care centered on the whole individual rather than his/her symptoms.

While 12-step fellowships such as Alcoholics Anonymous (AA) are helpful to millions of people worldwide, there are other addiction recovery supports available that are not based on the 12-step program such as Smart Recovery. Many can be found at:

www.facesandvoicesofrecovery.org/resources/support_home.php.

Another option worth exploring is the growing number of web-based online recovery support 'chat rooms' as well as the many groups that are now easily found on such social media websites as Facebook that has a thriving and ever expanding community of people in recovery worldwide. There is even an iPhone application you can purchase for a small fee that is designed to provide recovery supports.

It is so encouraging to see the pool of resources growing for persons in recovery. At SWVMHI, we continue to expand our resources to better serve our patients.

~ Rhonda Ford, LCSW
Clinical Social Work Supervisor

NOTICE

The Lifetime Wellness Center will no longer offer a discount to state employees on its initiation fee/monthly dues effective October 1, 2010.



Seasonal Influenza

Influenza (the flu) is a contagious respiratory illness caused by influenza viruses. It can cause mild to severe illness, and at times can lead to death. Some individuals, such as older people, young children, and people with certain health conditions, are at high risk for serious flu complications. The best way to prevent the flu is by getting **vaccinated** each year.

In 2009-2010, a new and very different flu virus (called 2009 H1N1) spread worldwide causing the first flu pandemic in more than 40 years. During the 2010-2011 flu season, Centers for Disease Control (CDC) expects the 2009 H1N1 virus, along with other influenza viruses, to cause illness again. The 2010-2011 flu vaccine will protect against 2009 H1N1 and two other flu viruses.

For additional information about the upcoming flu season, please visit the CDC website at <http://www.cdc.gov/flu/about/disease/index.htm>. Please be on the lookout for information regarding vaccines for SWVMHI staff in the near future and plan to protect yourself and your family this flu season!



News from the Recognition Committee

Service and Recognition Awards were distributed during all three shifts on September 2, 2010, for the period of April to June, 2010. Congratulations to all employees receiving service and retirement awards and thank you for your many years of dedicated service.

Also recognized during the ceremony were those employees who received a Making a Difference Award, Cash/Leave Award, or a Team Award between January and June, 2010. A total of 150 Making a Difference awards, 25 Cash/Leave/Other awards, and 7 team awards were given out. Also recognized were Janice Morris and Angela Gentry, the new Employees of the Quarter!

Winners of \$50.00 gift cards (drawing from among those who received a Making a Difference Award during the previous two quarters) were:

- Mary Dotson, RNCA — EF Day
- Charlotte Ball, PA — Day
- Sandra Hamm, PA — Day

- Cheryl Smith, RNCB — EF Second
- Tanya Bise, PA — CD Third



Many contest prizes were also awarded and fun was had by all as follows:

Hula Hoop Winners

- 1st: Toni Huggins, PA — AB
- 2nd: Galina Izmaylova, PA — EF
- 3rd: Amy Meadows, Patient Registrar

Limbo Winners

- 1st: Merle Obregon — Training Coordinator
- 2nd: Brandi Boardwine — PA — Nursing
- 3rd: Amy Meadows, Patient Registrar

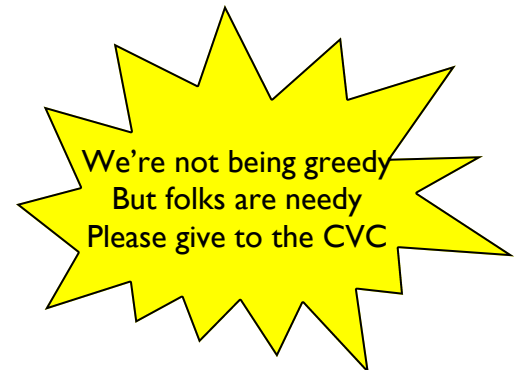
Volleyball Team Winners

- Mike Anderson
- Fred Pfrimmer
- James Caudill
- Derrick Davis
- Allen Hubbard
- Robin Phelps

If you won a prize but have not claimed it, please call Cheryl Veselik at Ext 201.

Thank you to all those who attended and helped make our event a success!

~ The Employee Recognition Committee



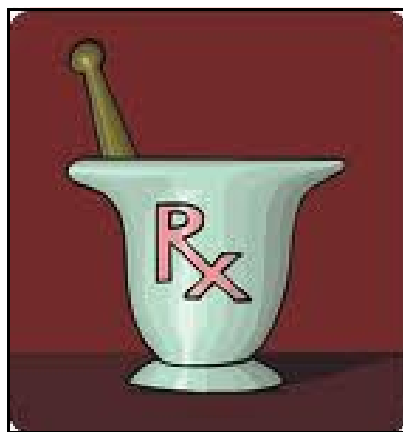
National Pharmacy Month

In October, we celebrate National Pharmacy and American Pharmacists month, a time to recognize the important work of pharmacists nationwide. With the growing trend toward pharmacy-focused access to healthcare, pharmacists are gaining an increasingly important role as members of the healthcare team.

The objectives of this celebration are:

- To recognize the vital contributions made by pharmacists to health care in the United States;
- To enhance the image of pharmacists as the medication experts and an integral part of the health care team, not just dispensers of medication;
- To educate the public, policy makers, pharmacists, and other health care professionals about the key role played by pharmacists in reducing overall health care costs by improved medication use and advanced patient care; and

- To stress the importance of knowing your medicine and knowing your pharmacist to ensure drug therapy is as safe and effective as possible.



During this month, we also celebrate National Pharmacy Technician Day, October 26, 2010. We will celebrate the Pharmacy

technicians' contributions to safe and effective medication use. This year's day will highlight the important role pharmacy technician's play in providing safe and effective medications for patients.

The department provides coverage for SWVMHI and Southwest Virginia Training Center (SWVTC) pharmacy departments, and employs four full time pharmacists, including, Jim Suhrbier, Director, Jonathan Johnson, Gale Leonard, and Paulette Sinnette (SWVTC); four full time certified technicians, and a P-14 certified technician, including, Marshal Lawson, Diane Price (P14), Michelle Roberts, Heather Stanley, (SWVTC), and Tammy Williams (SWVTC).

Feel free to stop by the pharmacy and celebrate with them.

~ Jonathan Johnson, R.Ph. Pharmacist

Family and Friends Day— You’ve Got Talent, Be a Star!

SWVMHI’s Annual Family and Friends Day Event was held on September 16, 2010. This year’s theme showcased the many talents of the individuals we serve and friends from the community.

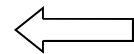
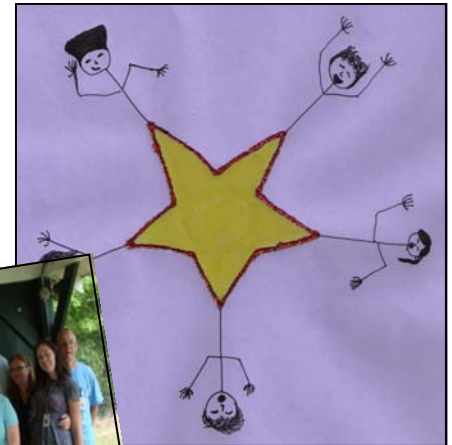
Not even gusty winds and periodic rain showers could keep our stars from performing. Our featured speakers were Jannie Roush, Sue Eller, and Sandy Herbert, with the Regional Consumer Empowerment Recovery Council. In a wonderfully entertaining fashion, they focused on the importance of humor while in recovery. Not only did they speak on the topic, but using volunteers from the audience, had us all laughing with the skits and activities they led. In addition, we had musical entertainment by the Middle Fork Gospel Singers.

The weather woes caused us to cancel our Minute-to-Win-It games and we had to postpone our slopes competition until Friday afternoon. But, we still completed our Karaoke contest because — the show must go on!

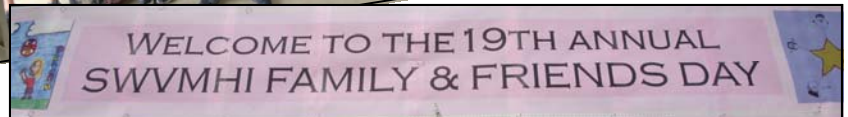
A big “Thank You” goes out to all of the individuals we serve who made all of the wonderful decorations. Sadly enough, the high wind gusts caused us to have to pack them back up, but we will find a way to showcase the work they put into these decorations.

Thanks also go to the Family Day Planning committee and all staff who assisted in making the event a success in spite of Mother Nature.

~ Robyn Anderson and Jan Barrom
Family & Friends Day
Co- Coordinators



Family Day Staff
Volunteers



Quilting Classes Offered



There will be an organizational meeting of an after-work Quilting Class on October 5, 2010, at 3:15 p.m. in the Administrative Conference Room. For additional information, please contact Dreama Wilkinson at Ext. 419 or Linda Havens at Ext. 552.

National Healthcare Food Service Week

October 4—10, 2010 marks National Healthcare Food Service Week. In October 1989, President George Bush announced the first annual “National Health Care Food Service Week,” to observe the contributions of professionals in the health care food service industry. The week-long observation reaches out to professionals such as chefs, dietitians, and food service workers who not only keep waistlines in check, but provide delicious and health conscious meals for healthcare facility patients and staff.

From the preparation to the delivery of foods in hospitals and other healthcare facilities, these professionals often work behind the scenes, but play an integral role in the nourishment of staff and patients. For those that go above and beyond to make

sure that everyone’s dietary needs are met. National Healthcare Food Service Week recognizes the extent of their culinary contributions to patient care.

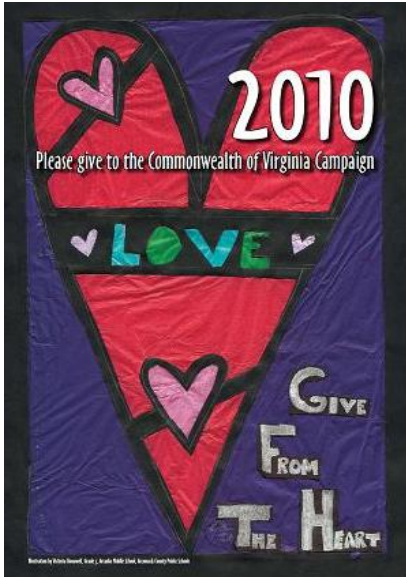


SWVMHI thanks its Food Services Dept. staff for their dedication and work ethic: John O’Keefe, Food Services Director; Coleen Walls and Sharon Winebarger, Nutritionists; Donald Mutter and Betty Gilley, Office Support Staff; V.J. Powers, Connie Harris, and Jennifer Armstrong, Food Services Managers; Roxanna Boothe,

Stephanie Butler, Mary Cregger, Rebecca Crewey, Sharon Darnell, Gale Greer, Robin Greer, Mary Gross, Rachel Hayes, Frankie Heath, Kim Kirschenman, Anna Lyles, Lisa McGhee, Michael Parks, David Price, Tiffany Steele, Ginny Hess, Marcus Tuggle, Letcher Wagner, James Wingler, Jonathan Wymer, and Sarah Wymer, Food Service Technicians; Teresa Dempsey, Sherri Henderson, Kim Hunt, Vickie Phipps, Will Totten, Darlene Turman, Gary Vaught, Dennis Bush, Cooks; Karen Weddle, Keystone Lead; Lynn Hayes, Cafe / Catering Cook; Ginny Hess, Matt Testerman, Jenna Russell, Café Staff; and Adam Butler, Storekeeper.



CVC Campaign 2010



Please consider giving to the CVC. You can contribute through a payroll deduction (go to <https://edirect.virginia.gov>), by cash, credit card, or check. If you don't want to pledge on-line, a pledge card will be sent to your e-mail or call Amanda Currin for a pledge card. When you pledge, be sure to designate the charity to receive your money; the list of available charities can be reviewed at www.cvc.vipnet.org/donors/directorylist.htm.

~ Amanda Currin and Denise Deel,
Campaign Coordinators



Krispy Kreme Doughnuts

On sale, Tuesday
October 5, 2010
Bagley Building lobby
6:00 a.m. until sold out

\$5 per dozen

All proceeds benefit CVC.

**If you need someone to talk to, consider using the services of the Value Options – Employee Assistance Program
1-866-725-0602**

Healthcare Facilities & Engineering Week

DEDICATION TO MAINTAINING A SAFE AND COMFORTABLE PATIENT CARE ENVIRONMENT

The week of October 24—30, 2010, has been designated as a time to recognize the important role facility maintenance and power plant personnel play in maintaining buildings, equipment, and grounds to ensure a safe and comfortable environment of care is provided.



The SWVMHI team presently includes two grounds workers, three electricians, two plumbers, one HVAC Tech, four carpenters, one P-14 painter, five full-time and one P-14 power plant operators, one secretary, and one director. Each of these individuals are not only skilled in their trade, but are also required to interact well with the individuals we serve, staff, vendors, and visitors, in an ever-changing and demanding work environment. During the past year, these individuals successfully accomplished the requirements of 6,049 preventive maintenance work orders, 206 corrective maintenance work orders, responded to approximately 1880 telephone requests to accomplish daily emergent work requirements, and returned to the facility after normal working hours 63 times in response to emergent work and inclement weather. Staff also ensured that work requirements/findings were well documented in accordance with regulatory standards including The Joint Commission, OSHA, etc.



The SWVMHI team takes great pride in our work and appreciates the opportunity to assist in achieving the SWVMHI facility Mission. During Healthcare Facilities and Engineering Week, please take a moment to greet a member of the Maintenance or Power Plant Team and thank them for their contributions: Don Chisler, Director; Juanita Rutherford, Secretary; Walt Pennington and Mickey Whitt, Grounds Workers; Freddie Williams, Steve Perry, and Chad Funk, Electricians; Shaun May and Willie Rich, Plumbers; Ron Adkins, HVAC Tech; Mike Martin, Stan Frye, Stan Malolskey, and Mike Debord, Carpenters; Dewey McThenia, Painter; Steve Tilson, Billy Barker, Mike Hash, Marcus Melton, William Whitt, and Herb Firestone, Power Plant Operators.

~ Steve Perry,
Electrician

From the Library

October is **National Medical Librarians Month** and since I am a medical librarian, I want to take a minute to draw attention to the services that our SWVMHI library offers. The Medical Library Association set up National Medical Librarians Month to raise awareness for a very useful resource that is often overlooked.

Medical librarianship is still a growing field, but it began when the first medical libraries were started in the early 1800s. They were usually attached to universities, and they were little more than a small collection of books that were purchased to benefit practicing doctors who also taught classes. Over time, these small collections developed into larger collections and hospitals all over the world were setting up medical libraries for their staff. These libraries have been greatly broadened by the fast-growing number of medical journals and books and by technological advances including the development of many electronic medical databases. With all of this new information, health care professionals needed a place to go where it would all be kept and where someone would be trained in how to use it all. To meet this demand, we have medical librarians, a group of people who have master's degrees in library science and have knowledge about how to search databases and acquire information from all of the different kinds of resources in both print and electronic formats.

Like public libraries, medical libraries have books, computers, and librarians to help visitors, but medical libraries also offer other services that are of particular usefulness to medical professionals. These services include a wide array of medical journals and databases, medical reference books that are often too large and expensive for individuals to keep in their personal collections, interlibrary loans from other medical libraries, medical VHS tapes and DVDs, and an array of literature about the newest drugs and treatments.

Our library is a unique medical library because not only is it a go-to research center for our health care professionals, it is also a library for our patients, offering books, videos, music, computer access, magazines, newspapers, and much more. Like a public

library, our library has both fiction and non-fiction to both entertain and educate the individuals we serve. Through newspapers, magazines, and writing letters, they can keep in touch with the outside world and with cassettes, CDs, and movies they can soothe their anxieties about being in an unfamiliar place. Our library is truly special and I invite everyone to stop by and check it out during October, National Medical Librarians Month.

Thank you

The Library would like to thank the following people for donating items: Jim Moon, Deresa Hall, Amanda Currin, Lori and Ashley King, Kathy Moore, Robert Farmer, Stephanie Warren, Karen Chavers, Sharon Neitch, Russ McGrady, Sue Saltz, and Merle Obregon.

The Library is also very thankful for the many anonymous cards, magazines, and books as well as donations from anyone I may have accidentally left off the list.

New Materials at the Library in October



This month the library is extremely happy to announce that we received a grant for materials about dual disorders, and we have added many new books, DVDs, training packages, and manuals about treating dual disorders. I want to give a special thanks to C. J. Copenhagen for helping the library get this grant and it can all be used in the library and/or checked out by any staff member, so come down and see what we have! Here is a list of some of these new titles:

Treating Co-Occurring Disorders: A Handbook for Mental Health and Substance Abuse Professionals

Co-Occurring Substance Abuse and Mental Disorders: A Practitioner's Guide

Dual Disorders Recovery Book

Homelessness Prevention in Treatment of Substance Abuse and Mental Illness: Logic Models and Implementation of Eight American Projects

Treatment of Mental Illness and Substance Abuse: A Compendium of Articles from Psychiatric Services

Behavioral Treatment for Substance Abuse in People with Serious and Persistent Mental Illness

Dual Disorders: Counseling Clients with Chemical Dependency and Mental Illness

The Co-Occurring Disorders Treatment Planner

Dual Diagnosis: An Integrated Approach to Treatment

The Twelve Steps and Dual Disorders: A Framework of Recovery for Those of Us with Addiction and an Emotional or Psychiatric Illness

The Dual Diagnosis Recovery Sourcebook: A Physical, Mental, and Spiritual Approach to Addiction with an Emotional Disorder

12 Steps & Dual Disorders

Out of the Tunnel and into the Light: Stories of Recovery from Dual Disorders

Double Trouble in Recovery Collection

Adults and Co-Occurring Disorders

~ **Christina Quillen**
Librarian

**Answer to Safety
Trivia Question**

C. 100 lbs.

History From The Hill

Taken from the Fifteenth Annual Report of the Southwestern State Hospital of Marion, Virginia, for the Fiscal year ending September 30, 1902.

WORK AND IMPROVEMENTS

During the fiscal year previous to the last, many repairs and improvements long needed were made, as new floors in the old wards, renewing and renovating steam and water pipes, laying down cement floors in basement.....

During the present fiscal year, with an appropriation of \$10,000 for repairs in "laundry building, electric lighting and steam-heating plant," many and larger repairs and improvements have been and are being made. Under the direction of your Executive Committee, with Prof. L.S. Randolph of Virginia Polytechnic Institute, as supervising engineer, the old boiler plant is being remodeled — the old tubular boilers to be replaced gradually by new improved water tube boilers, and other changes in the steam piping and appliances that will utilize the exhaust steam, and greatly economize the consumption of coal. This work is greatly retarded by the difficulty of getting supplies, but we hope to see it completed before the winter is on us.

Two new Westinghouse electric generators have been purchased and placed in position in the electric room, the old ones, after fifteen years of service, being about expended. Also a new marble switch-board, with all improved fixtures, and other changes in wiring, etc. These repairs put the electric lighting plant in first-class condition.

A new watchman's clock is being installed, and rewiring for same, to meet requirements of insurance companies.

A railroad switch, connecting with the Marion and Rye Valley Railroad, has been surveyed and planned for delivering coal, and all car-loads of products, to the coal house and Hospital building. This we hoped to have ready to deliver the winter coal supply (or wood supply, if the strike deprives us of coal, as now seems highly probable), but frequent delays and pressure of other work has postponed this much-needed improvement, we fear, for another year. {Editor's Note: The "Anthracite Coal Strike of 1902" lasted 163 days and ended only after intervention from President Theodore Roosevelt.}

Most of the worn-out hose has been replaced with new and improved fire hose on all the wards, which gives greater safety against fire.

A permanent floor of grouting and cement, on steel I beams and corrugated iron arches, has been placed in the general kitchen, just over the electric and engineer's rooms, replacing the decayed and leaky wooden floor, which was becoming dangerous. This, with the cement floor put down in the electric room, gives perfect security from leakage and dampness about the electric generators and appliances, which was before a source of great danger. In addition to this cement floor in general kitchen, the steam kettles and roasting ovens have been refitted with steam pipe, etc., and a new cooking steel range has been put up in place of the old one, worn out from fifteen years' use. These repairs and improvements have been greatly delayed and put back, owing to the remarkable difficulty and delay in getting material during the summer and fall.

In the last few months a neat operating room has been fitted up in rear of the amusement hall, with painted walls and ceiling and cement floor, and all aseptic surroundings, and well furnished with the latest improved surgical

appliances. This will prove of great service in gynecological and general surgery, if it does not detract too much, as is too often the case, from the care and attention of serious medical cases, which are less attractive, but of equal, if not greater, importance in saving the life and restoration of health.

A neat and attractive bowling alley, 82x14, with metal siding and tin roof, has been fitted up on the road south of the new east wing, and near to the ice house. This has been built at a cost of about \$400 out of the patients' amusement fund, and will prove, we hope, another source of pleasure and amusement to the patients when they cannot have out-door exercise.

The report of the carpenter shows many other smaller repairs and much work done during the year. A general repainting of the window sills and frames of the entire Hospital building, as also the woodwork, roofs, gutters, and spouting of most of the out-buildings.

The report of the farm and garden shows increased production and highly satisfactory returns from this department, which has greatly added to the comfort and full maintenance of the patients.

The large returns to the Hospital from the hennery, the work in the sewing-room, in the shoe, broom and mattress shop, gives some idea of the industrial life and work of the patients, as male and female patients, with their attendants as in former years, assist greatly in all these departments, with great benefit to the themselves and profit to the institution. All the leather-covered furniture in the Executive building was repaired and upholstered by Mr. L, a male patient. *To be continued*

October Factoid

October is the tenth month of the year in the Gregorian Calendar and one of seven Gregorian months with a length of 31 days. The eighth month in the old Roman calendar, October retained its name (from the Latin "octo" meaning "eight") after July and August, after Julius and Augustus Caesar

respectively, when the calendar was originally created by the Romans.

October is commonly associated with the season of autumn in the Northern hemisphere and spring in the Southern hemisphere, where it is the seasonal equivalent to

April in the Northern hemisphere and vice versa.

In common years, January starts on the same day of the week as October, but no other month starts on the same day of the week as October in leap years.

Employees to receive Bonus in December

State employees are slated to receive a bonus in December, 2010. Following are some frequently asked questions regarding the bonus:

1. **Who is eligible for the bonus?** All salaried employees in the Executive branch and other **salaried** employees of the Commonwealth, who were **continuously** employed on June 30, 2010, and who remain employed on December 1, 2010, are eligible.
2. **How much is the bonus?** The bonus is three (3) percent of an employee's annual base pay rate that is in effect on December 1, 2010. *(If you are unsure of what your base pay is, you should contact someone in the Human Resources Office or the Payroll Office.)*
3. **May agencies elect to pay the bonus to hourly (P14) employees?** Agencies are not authorized to provide the December 1, 2010, bonus to wage (P14) employees.
4. **Will employee performance ratings affect eligibility for the bonus?** No. There is no performance requirement for eligibility for the bonus payment.
5. **Are employees whose salaries are at the top of their pay bands eligible for the bonus?** Yes.
6. **How will the bonus be paid? Will there be a separate paycheck for the bonus?** The bonus will be included in the December 1, 2010, paycheck. There will be no separate check.
7. **Can all or part of the bonus be deposited into Deferred Compensation?** Yes.

For additional information on how the bonus may affect you, you should contact the Human Resources Office at Extension 204. You may also read more about the December bonus on the Department of Human Resource Management (DHRM)'s website at <http://www.dhrm.virginia.gov/compensation.html>.

~ Beverly Webb
Regional Human Resources Director



Dr. Chaudry receives service award



Dr. Ramesh Chaudry, who works part-time at SWVMHI, recently received his ten-year service award from the Virginia Center for Behavioral Rehabilitation (VCBR). The Service Awards Ceremony and Luncheon was held jointly with Piedmont Geriatric Hospital on September 22, 2010.

Congratulations to Dr. Chaudry and thank you for your many years of dedicated service to the Commonwealth, and especially to SWVMHI.

~ from the October issue of
PGH News
Piedmont Geriatric Hospital Newsletter

Sue Etta Roberts Colgate

Sue Etta Roberts Colgate died at her home in Rich Valley on Monday, September 27, 2010. She was employed as a Psychiatric Aide on the Geriatric Unit, and has been with the facility since July 10, 1998. She was preceded in death by her parents, Fred and Maggie Roberts. Survivors include her husband, James Colgate; aunt and uncles, Janet and Gordon Harris, Roy and Margaret Roberts, Bobby and Marie Roberts, and Eugene Roberts; father and mother-in-law, Ohmar and Tessie Colgate; several cousins; and special friends, June and Kathy Buchanan. Graveside services were conducted on Wednesday, September 29, in Riverside Cemetery with the Rev. Ernest Yeatts officiating.

She will be sadly missed by her family, friends, and co-workers.





Southwestern Virginia Mental Health Institute

Address: 340 Bagley Circle
Marion, Virginia 24354

Phone: 276-783-1200

Fax: 276-783-9712

Comments, Suggestions or Ideas?

SHARE THEM!

Please send any comments, suggestions, or ideas you have regarding the newsletter to the Office of the Director.



This Month in History Word Search Answer Key

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Please submit articles for the next newsletter to Cheryl Veselik by October 20, 2010.

The next newsletter will be published November 1, 2010.