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## From The Director

### A Welcoming Place

Recently a friend went to a new place, a place he had never been before. It was a place of grace, where he had hoped to be healed and comforted, to make new friends, and to continue to grow as a person. As he came in through the door of this place, he met face-to-face with an old acquaintance. She said to him, straightaway, with a frown on her face, "What are you doing here?" Not surprisingly, and, sadly, he did not feel welcomed. He tried to understand why. Was she in pain for a reason unknown to him? Was she upset at something he had done, unknowingly, years ago? I think he will never know, because he probably won't return to an unwelcoming place, at least if he have any choice.

This experience reminded me about the importance of the welcome we give from the first moment to individuals who are admitted to SWVMHI and how we live up to our Mission, Vision and Values. We can sum up those documents with three questions. Are we a Welcoming Place, a place of hope and understanding, during each day-to-day interaction beginning with the walk through the door? Are we a Healing Place, a place of high quality treatment, partnerships, and a recovery-oriented environment? And are we a Learning Place, where we continuously strive to improve, and where we don't "rest on our laurels"?

I think that if we have ever experienced an unwelcoming place, we can begin to appreciate the importance of a safe, inviting, and warm atmos-

phere for all. The individuals we serve, their families and friends, and our partners in mental health recovery should feel more of a warm, tropical wind than an arctic breeze.

An article in Behavioral Healthcare, August, 2007, notes that "A recovery environment is welcoming and built on positive relationships. If we aim to promote recovery in our behavioral health services, then we need to ensure recovery and wellness practices are a part of our workplace climate. Are we treating the people we serve with hospitality, and how are we treating each other?"

This sounds very much like our SWVMHI Values (reprinted on page 14). It takes intention and hard work to live up to our values every day in every interaction. We encourage the living of our values through Recovery Road Trip and Motivational Interviewing Training, through expectations in our Employee Work Profiles, and through various means of communication such as found regularly in our newsletter. As individuals, we can focus on the positive, holding the hope for those who may be without it, all the while providing each other with opportunities for improvement.

The committed, caring efforts of both our experienced, knowledgeable staff members and our enthusiastic, refreshing, newer staff members are important to enhancing our recovery environment. The seemingly small day-to-day interactions can have great meaning, as do therapy sessions, recovery-oriented

groups, and opportunities for peer support.

In addition, the physical environment can be more or less like a recovery environment. Through a clean and tidy environment, through posters and paintings on the walls, through ward-based activities and supplies, we demonstrate an atmosphere of welcome and recovery.

So, even though maybe a welcoming word shouldn't make the difference in how we feel, it is often very important.

Thanks for your welcome!

"The future belongs to those who believe in the beauty of their dreams."

~ Eleanor Roosevelt



~ Cynthia McClaskey, Ph.D.  
With Tipi & Chief

My life can be measured in hours, I serve by being devoured. Thin, I am quick Fat, I am slow Wind is my foe. What am I? Answer: Page 13

## Patient Recognition Week -- February 1 - 7, 2011

Founded in 1995, celebrated the first week (seven days) in February, and officially recognized on February 3, National Patient Recognition Week recalls the mindset to put care-ism before capitalism, lest we forget our reason for being -- promoting mental health in Southwestern Virginia by assisting people in their recovery.



Though every day is patient recognition day-or should be-the first seven days in February is a special time for all health-care providers, physicians, nurses, administrators, executives, technologists, technicians, environmental services, volunteers, and ancillary support personnel to stop and seriously reflect on their stewardship of patient care and their dedication to patient satisfaction.

No person is insignificant or so distant from patient care that they should go unnoticed. All direct and indirect providers of patient care and those supporting the people who administer care are part of the care team.

National Patient Recognition Week was founded by John O'Malley in 1995. The Week promotes observance of health

care patients, and it is rather unique since most health care awareness dates focus on health care personnel or specific health issues. This week revolves around patient satisfaction, and upon observing patient satisfaction, health care providers can use the time to consider ways in which they can enhance it. Personnel in the healthcare industry commit to patient care everyday, but with the arrival of the first week in February (from February 1st to the 7th), they can make sure to go the extra mile and let the individuals we serve know how important their well-being is.

~ [www.nprw.com/](http://www.nprw.com/)

### Some ways to be a Welcoming, Recovery-Oriented Place:

1. Attend first to the person who has symptoms, rather than to the illness.
2. Respect the individual's input.
3. Explain what is being done, the routines, special procedures.
4. Invite others to talk about what matters to them.
5. Take time to listen.
6. Ask for input.
7. "Please ask me how I am today."

Why is this so important?

"Once a person comes to believe that he or she is an illness, there is no one left inside to take a stand toward the illness. Once you and the illness become one, then there is no one left inside of you to take on the work of recovering, of healing, of rebuilding the life you want to live." Patricia Deegan

## The Big Read

What is The Big Read? "The Big Read is an initiative of the National Endowment for the Arts in partnership with the Institute of Museum and Library Services designed to revitalize the role of literature in American culture and bring the transformative power of literature into the lives of its citizens. The purpose of The Big Read, as with literature itself, is pleasure – not necessarily an easy pleasure, but a deliciously rich and complex one." From The Big Read brochure.

**This year, Washington County has chosen to feature Edgar Allen Poe: "The Stories and Poems of Edgar Allan Poe."**

Continued on page 13



**NEW MILEAGE RATE**

Effective January 1, 2011, The IRS mileage rate has increased to \$0.51 per mile. \*This is only in effect if a state or rental car is not available\*



**Farewell, Beverly**

January 19 is my last day at SWVMHI. It is hard to believe that I have been here on a part-time basis for more than two years! I am going to Lynchburg to be the Regional Human Resource Director for Central Virginia Training Center, Catawba, and Southern Virginia Mental Health Institute.

I have enjoyed meeting the employees of SWVMHI and working with you. I want to wish each and every one of you the best!

*Beverly Webb*  
Regional Human Resource Director



*Many thanks to all staff for your prayers, friendship, visits, phone calls, and the beautiful Christmas gifts. I was overcome with thankfulness for being blessed with great friends and co-workers.*

*May God bless you all, and I wish you a very Happy and Healthy 2011.*

*~ Juanita Rutherford*

**National Eating Disorders Awareness Week**

February 20 - 26, 2011



National Eating Disorders Awareness Week is a collective effort of primarily volunteers, including eating disorder professionals, health care providers, students, educators, social workers, and individuals committed to raising awareness of the dangers surrounding eating disorders and the need for early intervention and treatment.

The goal is to ultimately prevent eating disorders and body image issues while reducing the stigma surrounding eating disorders and improving access to treatment. Eating disorders are serious, life-threatening illnesses — not choices — and it's important to recognize the pressures, attitudes, and behaviors that shape the disorder.

Eating disorders are complex conditions that arise from a combination of long-standing behavioral, emotional, psychological, interpersonal, biological, and social factors. In the United States, as many as 10 million females and 1 million males are fighting a life and death battle with an eating disorder such as anorexia or bulimia.

Approximately 15 million more are struggling with binge eating disorders.

While eating disorders are serious, potentially life-threatening illnesses, there is help available and recovery really is possible. It is important for those affected to remember that they are not alone in their struggle; others have recovered and are now living healthy, fulfilling lives.

For additional information about eating disorders and available resources, visit the National Eating Disorders Association (NEDA) website [www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org) or helpline at 800 931-2237.



# Deadlines -- Honoring Day-to-Day Tasks

Deadlines exist for a reason. Often our work product must be completed, and completed in a timely fashion, so that others can add to our work product and pass it on to others. As such, sticking to a deadline is one of the many ways that we exhibit behavior true to the SWVMHI Value of Honoring Day-to-Day Tasks.

Deadlines are not suggestions; they need to be kept. Keeping to a

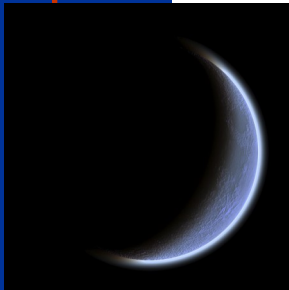
deadline communicates respect for others and for self. Habitual missing of deadlines may inadvertently communicate our own difficulties in time management and/or asking for assistance. When we miss deadlines, we may communicate things about ourselves that are not particularly flattering. When we meet our deadlines it helps ourselves and others.



Remember, a goal is a dream with a deadline. If we miss our deadlines we do a disservice to our dreams, and we may interfere with the dreams of others. When we meet our deadlines we are demonstrating behavior consistent with the Value of Honoring Day-to-Day Tasks.

~ James Moon, Ph.D.  
Psychology Supervisor

## February Lunar Phases



**February 2**

New Moon

**February 11**

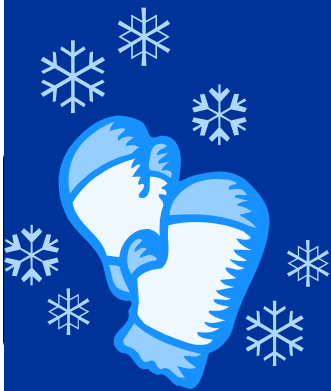
First Quarter Moon

**February 18**

Full Moon

**February 24**

Last Quarter Moon



## Inclement Weather Reminder

As everyone is well aware, winter weather in southwestern Virginia has been pretty rough this season. And when severe weather strikes, late arrivals and absences due to weather conditions rise.

All employees of SWVMHI are considered designated employees for facility operations. During periods of severe weather conditions, all late arrivals and absences must be accounted for by use of documented leave slips. After all circumstances are evaluated by the facility director, and at the director's discretion, late arrivals may be excused up to a reasonable amount of time. Employees are expected to make every reasonable effort to report to work as scheduled. However, employees are cautioned to exercise good judgment regarding travel during severe weather.

They should maintain contact with their supervisors about their individual circumstances.

At the conclusion of a severe weather event, Department Heads should promptly report all late arrivals and absences to the Director's Office so that a timely decision can be made as to whether or not late arrivals or absences will be counted as excused or unexcused. Please keep in mind that decisions are made based on information reported, so it is important that the information reported be prompt and accurate.

Thanks to all employees who make the extra effort to ensure the continuation of quality services to the individuals we serve, especially during periods of inclement weather.

"It is never winter  
in the land of  
hope."

~ Russian proverb

## Chaplain's Corner

*If I speak in the tongues of men and of angels, but have not love, I am only a resounding gong or a clanging cymbal. If I have the gift of prophecy and can fathom all mysteries and all knowledge, and if I have a faith that can move mountains, but have not love, I am nothing. If I give all I possess to the poor and surrender my body to the flames, but have not love, I gain nothing.*

*Love is patient, love is kind. It does not envy, it does not boast, it is not proud. It is not rude, it is not self-seeking, it is not easily angered, it keeps no record of wrongs. Love does not delight in evil but rejoices with the truth. It always protects, always trusts, always hopes, always perseveres. Love never fails... (1 Corinthians 13:1-8a).*

Powerful words from a man who once observed and approved the death of someone by stoning for his faith in Jesus Christ. Willing to sacrifice everything, even to the point of his own death, this man, Saul, set out to destroy the church and all that it stood for. But something happened one day while Saul traveled the Damascus Road. Saul had a spiritual awakening when he met Jesus. Now Saul, who would come to be known as Paul, would travel by a different road. It would be years before Paul would pen words of love so beautiful and comforting as he wrote to the church at Corinth. But Paul had come to learn what it truly means to love and how love, that it is selfless, is the greatest force in all the universe. Paul found love in its purest form when he came in contact with Love Divine, and he would not turn loose.

The scriptures speak of human love, as a friend for a friend. Jonathan, son of King Saul, we are told, "became one in spirit with David, and he loved him as himself" (1 Samuel 18:1). The scriptures speak of the love of a man for a woman as "Jacob served seven years to get Rachel, but they seemed like only a few

days to him because of his love for her" (Genesis 29:20). There is the love of a daughter-in-law for her mother-in-law as we remember those words of devotion in the book of Ruth (1:16), "Where you go I will go, and where you stay I will stay. Your people will be my people and your God my God. Where you die I will die and there I will be buried." There is the love of a father for a son (symbolizing the love of God for all humanity) in the parable of the prodigal son (Luke 15:11-32). It portrays the story of a son leaving his father's home to go out on his own and live life his way. It seemed to go to the son's satisfaction for a while, but then everything changed, and the son lost it all. With nothing left but shattered dreams, love drew the son back home. The son (shamed, guilt-ridden, broken, and humiliated) goes home in hopes of finding some kind of forgiveness and the expectation that things could never be the same. But to his surprise, the son finds the father waiting with joy, and felt the warm embrace of the father's love and tender kiss of forgiveness. Pure love keeps no record of wrongs.

In the rural area of another state, on the wall of an old country store, hangs a picture. It is a picture of a man, Jesus, lying on the ground, an old wooden cross underneath him. In the foreground, one sees two powerful hands. One hand is holding a hammer and the other a long spike. The tip of the spike rests in the right hand of Jesus. The hammer is ready to come down with such force, it will drive the spike clean through the hand into the wooden cross beneath. It is an emotionally painful moment to look at and to anticipate what is about to happen. But what really stands out in the painting are the eyes -- the eyes of Jesus. No matter where you stand in relation to the painting, the eyes of Jesus seem to follow you. For a moment, time seems frozen, as you stare into the eyes of the man staring at you; eyes filled with pain, but also compassion. Lost in the gaze of

He who is about to die, the mind struggles to understand the meaning of it all. Suddenly, one thought emerges -- one thought supreme -- "THERE IS LOVE."

The heart in each of us longs to be loved as Paul writes in the scriptures above. Equally true is the heart's longing to somehow be set free and love back in the same way. We try! God knows we try! But we seem to fall short of the love that "never fails." Nevertheless, LOVE LIVES! And this LOVE is eager to work its way into our hearts that we might come to know and experience for ourselves, Love Divine being perfected in each of us.



## From the Library

### International Expect Success Month

Did you know that having a positive attitude can prevent a person from having a stroke or heart attack? A study from Dr. Karina W. Davidson at Columbia University showed just that. Her study rated 1,700 people on a 5-point scale of optimism and found that for every point higher a person got, his or her risk of having a cardiac episode decreased by 20%. This study supported a prior study that Johns Hopkins did in 2001 that showed that a positive outlook can decrease the chance of having a major heart event by 50%.

Optimism has been shown to improve many aspects of a person's life. A positive outlook has been shown to have physical health benefits like giving a person a better immune system, making him or her less likely to develop depression, having more energy and strength, and feeling happier. It also creates mental and outward benefits such as making a person more successful and more respected, making it easier to inspire and motivate others, and making life easier. A recent report in US News and World report claimed that optimism makes a person luckier and a recent study at the University of Missouri even showed that people with positive attitudes had more success in finding better jobs.

So how does one capture this feeling when it is often easier to feel down? The article at [successconsciousness.com](http://www.successconsciousness.com) recommends reading inspiring stories and quotes, associating with happy people, visualizing what you want to happen, and choosing to be happy.

[www.associatedcontent.com/article/5412710/prevent\\_heart\\_disease\\_with\\_a\\_positive.html?cat=5](http://www.associatedcontent.com/article/5412710/prevent_heart_disease_with_a_positive.html?cat=5)

[http://www.cio.com/article/503265/The\\_Secret\\_to\\_Job\\_Search\\_Success\\_Planing\\_and\\_a\\_Positive\\_Attitude](http://www.cio.com/article/503265/The_Secret_to_Job_Search_Success_Planing_and_a_Positive_Attitude)

[http://www.successconsciousness.com/positive\\_attitude.htm](http://www.successconsciousness.com/positive_attitude.htm)

### Donations

The library would like to thank the following people for donating items:

Sharon Winebarger  
Robin Heldreth  
Christy Hall  
Angela Berry  
Charlotte Ball  
Kelly Cassell  
Lesu Cole

And is also very thankful for the



many anonymous cards, magazines, and books and anyone I may have accidentally left off the list.

### New Books

The following is a list of some of the newer books we have in the library and another huge thank you to all of the staff who have been so generous with such great donations:

- \* *Bare Bones* by Kathy Reichs
- \* *Codex* by Lev Grossman
- \* *The Reaper's Song* by Lauraine Snelling
- \* *The Promotable Woman* by Norma Carr-Ruffino
- \* *Amish Dutch Cookbook* by Ruth Redcay
- \* *Unaccustomed Earth* by Jhumpa Lahiri
- \* *The Grass is Singing* by Doris Lessing
- \* *The Known World* by Edward P. Jones
- \* *The Shadow Country* by Peter Matthiessen
- \* *Black Sunshine* by S.V. Date
- \* *Word Hard, Study, and Keep out of Politics* by James Baker
- \* *Beach to Bluegrass: Virginia's Longest Road* by Joe Tennis

## Important Tax Changes for 2011



Bush Tax Cuts were extended; however, the 2009 American Recovery and Reinvestment Act expired 12/31/2010 (Making Work Pay credit) and the new tax tables for 2011 reflect that expiration with a slight increase in withholding. To see what your current withholding status is, go to Payline. On the left vertical menu select Main Menu. Select Employee Profile Data. Scroll to the bottom of the screen and see your Federal and State withholding status. To change your status, click on the links for form W4 and/or VA4. Print out this form, complete it and submit it to the Payroll office with your original signature. Or come by the Payroll Office on the 3<sup>rd</sup> floor of the Henderson Building.

~ Sharon Bullins, Payroll Office



# Word Search

How many words can you find related to the month of February?

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

Many events and holidays take place during the month of February. February 2 is Groundhog Day, where Punxsutawney Phil (well, he's the most famous groundhog anyway) comes out of his underground hole and determines whether we will have six more weeks of winter simply by looking for his shadow. For all of you football fans, Superbowl Sunday falls on February 6. For the romantics out there, Valentine's Day is on February 14 -- if you like flowers and candy, you better order early. For you animal enthusiasts, the Westminster Dog Show runs from February 14 - 15. Presidents Day, the day we celebrate the birthdays of George Washington and Abraham Lincoln, falls on February 21 -- it is also a state holiday. February is also the month of numerous observances, including American Heart Month, National Patient Recognition Week, and African American History Month. And for those of you who like to celebrate unusual holidays, February is the month of the Avocado, Banana, Cherry, Grapefruit, and Sweet potato, and Jello Week begins February 6.





# Clinical Documentation = Critical Communication

**Principle # 1: Documentation should be patient-centered, patient-focused, and collaborative.**

**(Note: To better reflect our recovery-oriented system, we have changed this terminology to read “person-centered, person-focused, and collaborative.)**

Documentation is an integral part of clinical practice. It ensures the safe and effective care of the individuals we serve, and provides a record of clinical accountability.

*Good clinical documentation accurately represents the individual’s situation and takes into consideration how the individual is portrayed.*

Incorporate these person-centered, person-focused practices when you document patient care:

- ✓ Use language that is respectful and non-judgmental.
- ✓ Be factual and provide specific examples.

- ✓ Describe the individual’s behaviors.
- ✓ Use precise language such as “evidenced by” rather than “appears to.”
- ✓ Focus on goals that tie back specifically to the recovery services plan.
- ✓ Identify problems and actions taken to address them.
- ✓ Avoid making value statements and giving opinions.
- ✓ Avoid using critical language and words like *always, never, good, bad.*

- ✓ Use only approved abbreviations.

Documentation is a collaborative effort and includes diverse information from within and across multiple services, settings, and care providers.

- ✓ Write clear descriptions that enable other care providers to take actions based on review of your comments.

*Good documentation stands the test of time – it is easily interpreted even after a significant amount of time has elapsed.*



~ Communications Team

## How to Resolve 5 Common Grammar Problems

Even an expert writer loses credibility and risks being misunderstood by making grammatical errors. It's or its? Blonde or blond? Once-in-a-while or once in a while? Harry and me or Harry and I? Avoid these five common grammatical errors in English:

1. Use a hyphen when combining two or more words to describe a word that follows. The combined words act as a single adjective: a ten-dollar bill, a three-year-old boy, a once-in-a-lifetime experience.

Don't use the hyphen if the describing words come after the word being described: A well-done steak should be well done. An over-the-top presentation was over the top.

2. Use an apostrophe when a letter or group of letters is being left out to form a contraction. Remembering this simple rule will help avoid one of the most common grammar dilemmas: it's or its? Use the apostrophe when the word means it is. Leave it out for "The dog wagged its tail."
3. Don't be confused about when to say "Sally and me" or "Sally and I." The simple way to check is to leave the other person out of the sentence altogether. "He spoke to Sally and I" becomes "He spoke to I." "My friends and me went to the concert." becomes "Me went to the concert." If the sentence sounds wrong without the other words, it is wrong.

4. Adjectives are almost always singular. No matter how many dollars are involved, it's a twenty-dollar bill. No matter how many drugs he sells, he is a drug dealer, not a drugs dealer. The exception is when the meaning is unclear: The two countries are engaged in an arms race, not an arm race.
5. Be careful about words that have masculine and feminine forms. A man is blond; a woman is blonde. The man is a fiance; his girlfriend is a fiancée. Francis is normally a man; Frances is a woman. Marion is most commonly a masculine form of the name; Marian is feminine.



# PERSONNEL CHANGES

## New Employees

Kambiz Birashk, PI4 Psychiatrist	Dec 3
Stephanie Hollandsworth, Registered Nurse	Dec 10
Aasta Pauley, RN Clinician A	Dec 10
Kathryn Snead, RN Clinician A	Dec 10
Suzanne Eller, PI4 Peer Support Specialist	Dec 10
Rebecca Huggins, PI4 Food Service Tech	Dec 10

### MONTHLY PATIENT CENSUS

December  
2010

Admissions 64  
Discharges 59  
Passes 9

Average Daily  
Census  
133

## Separations

Susan Sanslow, Psychiatric Aide	Dec 30
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## Promotions/Role Changes

None	
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**KNOW YOUR NUMBERS**

Talk to your doctor and keep close tabs on key health indicators like cholesterol and blood glucose levels. Here's where you need to be for optimal heart health:

Health Factor	Goal
Total cholesterol	< 200
LDL "bad" cholesterol	< 100
HDL "good" cholesterol	50 +
Triglycerides	< 150
Blood pressure	< 120/80
Fasting glucose	< 100
Body mass index (BMI)	< 25
Waist circumference	< 35"

~ American Heart Association

## Meals in Minutes -- Football Turnovers

Superbowl Sunday is just around the corner. Try this recipe to wow your hungry party guests:

### Ingredients:

- 1 box (15-ounce size) refrigerated piecrusts
- 1/2 pound meatballs, cooked
- 1 can (8-ounce size) tomato sauce
- 1/4 cup grated Parmesan cheese
- Milk for glaze

### Directions:

To make a batch, first set out the crusts to bring them to room temperature (about 15 minutes) and heat the oven to 375 degrees. Meanwhile, cut the meatballs into small pieces, then place them in a small saucepan

with the tomato sauce and simmer for 5 minutes. Let the mixture cool thoroughly.

One at a time, place each crust on lightly floured waxed paper and use a floured rolling pin to flatten it slightly into a 10-inch circle. Use a biscuit cutter to cut 4-inch circles from the dough, then reroll the dough scraps to get more dough circles.

Spoon 1 tablespoon of filling onto half of each circle, leaving about a 1/2-inch margin at the edge, then sprinkle on about 1/2 teaspoon of Parmesan cheese. Use your fingertips to moisten the edges of the dough with water, then fold the uncovered half of the dough over the filling and press

the edges together to seal. Crimp the edge with a fork, then transfer the turnovers to a lightly greased baking sheet and poke each one twice with a fork for vents. Brush each one with milk, then bake for about 25 minutes or until golden brown.

Transfer to a rack to cool.

Serve warm or at room temperature.



~ [www.cdktichen.com/recipes/](http://www.cdktichen.com/recipes/)



*"Hope is the most precious treasure to a person."*

~ fortune cookie

## NASMHPD's Statement Regarding the Arizona Tragedy

### NASMHPD Urges Public Education and Early Detection of Mental Health Disorders.

The members and staff of the National Association of State Mental Health Program Directors (NASMHPD) are deeply saddened by the tragic shooting in Arizona. We join President Obama and the rest of the nation in extending our sympathies to all of the families who have experienced profound loss as a result of this act.

While we do not yet know if the alleged shooter has a mental illness, the incident has triggered emotional discussions about mental illness, the availability and quality of treatment, and violence and access to firearms. Incidents like this highlight the need for early detection and public education regarding mental illness.

As the discussion advances about how our nation can best help people with mental illness, policymakers and other stakeholders must come together to ensure that all people with mental illness have

access to a continuum of mental health services that includes prevention, early intervention, treatment and recovery supports. Abundant research supports a range of effective treatment and services available to support the recovery of people experiencing mental illness, and a growing body of research suggests that prevention and early intervention efforts yield positive outcomes. A useful example that NASMHPD recommends for widespread adoption is Mental Health First Aid, a set of skills that equips first responders, educators and the general public with basic skills to identify emerging mental health problems and employ basic interventions to engage and link people with appropriate mental health services. Visit [www.mentalhealthfirstaid.org](http://www.mentalhealthfirstaid.org) to learn more.

Millions of Americans live with mental illness and contribute positively in their communities. Improvements in treatments and medications over the years have successfully enabled people across the country to recover from mental illness.

NASMHPD cautions against categorizing people with mental illness as violent be-

cause it only further stigmatizes the vast majority of those living with mental illness who pose no danger to anyone. This stigma makes it less likely that people will seek or continue in treatment. Research shows that nearly one quarter of Americans will experience a mental health problem at some point in their lives, and that people with mental illness are more likely to be victims of violence than perpetrators of it.

NASMHPD represents the state mental health authorities across the country that manage the nation's public mental health system. We stand ready and willing to work with all stakeholders to ensure that public education reaches people of all ages, early detection and intervention are made a priority, and that a continuum of mental health services is available. While public mental health systems cannot prevent all tragedies from occurring, accessible mental health services and a more informed public can minimize the likelihood of violent incidents and improve the lives of people with mental illness.

~ Robert W. Glover, Ph.D., Executive Director

# Pedestrian Safety

Pedestrian safety is for all ages. Unfortunately, in traffic incidents involving pedestrians and motorists, it is the pedestrian who suffers, often with tragic results. In many cases, it is not the driver's fault. As a 24/7 facility with staff arriving/departing work at various times of the day and night, it is important that motorists and pedestrians understand and follow some simple rules:

Pedestrians should:

- \* Use sidewalks and walk in the inside of the sidewalk. Where there are no sidewalks, walk as far away from the traveled portion of the road as possible. See and be seen. Walk facing traffic if a sidewalk is not available.
- \* Cross at marked crosswalks or traffic lights, not in the middle of the block or between parked cars. Look left, right, and left again for traffic prior to stepping off the curb.
- \* Make sure drivers see you before you cross.

- \* Cross when traffic has come to a complete stop.
- \* At a traffic light, cross at the beginning of a green light. Do not cross once the "Don't Walk" signal begins to flash or once the light has turned to yellow. **Never cross on a red light.**



- \* Watch for traffic turning at intersections or entering and leaving driveways.
- \* Wear bright or light-colored clothing or reflective strips when walking at dusk or darkness.
- \* Be alert and stop at driveways to check for vehicles.

Motorists should:

- \* Be patient, especially with older pedestrians who need more time to cross the road.
- \* Always look for pedestrians, especially when turning.
- \* Remember, stay alert and slow down on residential streets and through school zones.
- \* Be alert for traffic signs and obey posted speed limits and warnings.

Maintaining a safe environment for pedestrians is the responsibility of both the driver and the pedestrian. Please do your part!

~ SWVMHI Safety Committee



All employees must complete the following CAIs between February 1 and February 28, 2011:

- Workplace Violence
- DBHDS IT Security Awareness

## February Days to Celebrate

"Off the cuff" February holidays to celebrate:

- February 1**  
Give Kids a Smile Day
- February 2**  
Groundhog Day
- February 9**  
Read in the Bathtub Day
- February 15**  
National Gum Drop Day



- February 19**  
Chocolate Mint Day
- February 20**  
Clam Chowder Day
- February 24**  
National Chili Day
- February 26**  
For Pete's Sake Day!
- February 28**  
National Tooth Fairy Day



## Free “Big Read” events scheduled

Continued from page 2

Once again, Washington County, Virginia is proud to Kick Off it's Big Read festivities - this time for the 2011 Book Choice: *The Stories and Poems of Edgar Allen Poe* - with a Community Carnival at Barter Theatre's Stage II and Café! A celebratory gathering of readings, live music, special events tables and booths, tons of free give-aways, food, goodies, books, and more! While the Carnival swirls with fun door-prize competitions and fun in the Barter Café, inside at Stage II, Barter Theatre actors, local college acting students, and popular community musicians will fill your eyes and ears with the works of Edgar Allen Poe. The community theme of creativity and its relationship to mental illness - the fine line between genius and madness - will be discussed and explored, along with the exciting readings and musical presentations!

FREE TO ALL - Come join the big fun at The Big Read KICK-OFF 2011!! For more info call 276-619-3314.

**Event Location:** Barter State II, 127 W. Main Street, Abingdon, VA  
**Date:** Tue, Feb 15, 2011  
**Time:** 6:00 pm – 8:00 pm

### 2011 Big Read Discussion: The Stories and Poems of Edgar Allen Poe.

We want to hear your thoughts and ideas about the Stories and Poems of Edgar Allan Poe! Help us get the conversation started by joining us at the Washington County Public Library Main Branch in Abingdon to discuss Edgar Allan Poe's famous poem "The Raven." Poe's life and other works will also be discussed to further explore the meaning behind his writing. This event is free and open to the public! For more information call 276-676-6391.

**Event Location:** Washington County Public Library @ 205 Oak Hill Street, Abingdon

**Date:** Thu, Feb 17, 2011

**Time:** 6:00 pm – 8:00 pm

The Mental Health Creative Ideas Committee has scheduled three presentations relating to mental illness as part of this year's Big Read events.

On February 28 and March 7, In Our Own Voice presentations can be seen at the Barter Stage II, 127 W. Main Street, Abingdon, VA. These feature local consumers who share the tragedies and triumphs of their own recovery stories. Sometimes sad, sometimes humorous, but always powerful, these are stories to bring hope and enlightenment to those with mental illness and those who work with them.

On March 14, a special presentation of the consumer-written and -acted play, *The Path*, will be presented, at the Washington County Public Library, 205 Oak Hill Street, Abingdon, VA. All events are scheduled to begin at 7:00 p.m.

**Look for additional dates in the March Newsletter**

“Hope is the companion of power, and the mother of success.”

~ Samuel Smiles

**WHAT AM I  
ANSWER:**

A Candle

## 24 Hour time and your computer clock

Now that we have moved from 12 to 24 hour time, you will want to change the clock on your computer if you have not already done so.

To adjust your computer clock display, go to:

**Start>Settings>Control Panel>Regional and Language Options**

In the **Regional and Language Options** window, click **Customize...**

The **Customize Regional Options** window will open. Click the **Time** tab.

There is a drop down menu next to **Time format:** Choose the **HH:mm:ss** option and the time will now be displayed in 24-hour time format on the bottom right of your computer. This will also affect how the Outlook Calendar works, as well as how time is displayed in Kronos.

Thanks to Dr. Moon for these instructions!



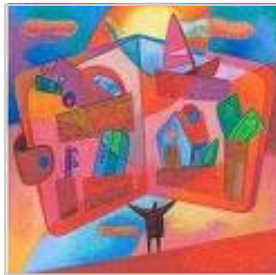
# Central Rehab News

The Rehab Dept. would like to offer a huge 'thank-you' to all who volunteered and donated a variety of services, supplies, and financial support for all of the Christmas events! There were brightened faces, warm smiles, and excitement in the air as the individuals we serve participated in a variety of seasonal special activities.

As we have returned to our scheduled recovery routine, programs have returned with some tweaking to meet the interests and needs of participants involved.

We are excited to announce that three members of the Local CERC (Consumer Empowerment Recovery Council) attended the Regional Budget Hearings held in Abingdon's Higher Education Center, supporting the Regional CERC on January 6. These three members had the opportunity to hear speakers talk from their hearts, advocating for budget support from everything from agricultural needs and fine arts supportive agency needs, to mental health service needs for all ages. It was encouraging to hear the number of expressions to support the funding for the active functioning of our Geriatric Unit's services here at our hospital and to hear requests for funding for a variety of mental health services in institutions and in the community. Along with heightened awareness of services offered in the community, members that attended expressed their increased confidence in voicing their own opinions of services that they may advocate for in the future. They connected with real life stories of consumers and family members speaking on behalf of a loved one who reported their changed lives and their ability to live more independently and maintain their health with the valued services they are currently receiving.

The Patient Activity Council (PAC) met on January 12th and is planning a variety of upcoming special activities, including a Pre-game Super Bowl party and Valentine Day events in February and a potential Mardi Gras event in the beginning of March. Look for email notices with details of these and other events coming up.



The Rehab Dept. is wishing that your upcoming year is filled with personal accomplishments and happiness!

~ Central Rehab Department

## SWMH Values

We best promote mental health in the people we serve by valuing:

- \* Communication,
- \* Honesty,
- \* Trust,
- \* Teamwork,
- \* Self-initiative,
- \* Leadership, and
- \* Honoring day-to-day tasks.

## What is the right way to wash your hands?

- \* Wet your hands with clean, running water (warm or cold) and apply soap.
- \* Rub your hands together to make a lather and scrub them well; be sure to scrub the backs of your hands, between your fingers, and under your nails.
- \* Continue rubbing your hands for at least 20 seconds. Need a timer? Hum the "Happy Birthday" song from beginning to end twice.
- \* Rinse your hands well under running water.
- \* Dry your hands using a clean towel or air dry them.



# History From The Hill - Dr. J.C. King, Superintendent

Dr. John C. King served as the fourth Superintendent of Southwestern State Hospital, from 1908 - 1915. There was not a lot of information found on Dr. King, other than that reported here.

Dr. John C. King was born April 29, 1871, in Henry County, Virginia. He served as part of the Medical staff at Southwestern Lunatic Asylum, later known as Southwestern State Hospital, prior to being appointed as Superintendent on December 8, 1908. While he served on the medical staff, he was in charge of the "male service."

In 1902, Dr. King was instrumental in having the name of the facility changed from Southwestern Lunatic Asylum to Southwestern State Hospital, because he felt the that name "sounded too bad."

Under Dr. King's administration, an Amusement Hall was built in 1908, and the Tubercular Cottage was completed in 1912, which housed 50 patients who were fed from their own kitchen. Due to the shortage of money and timber at the time, permission was given by the Board of Directors to cut and burn the wood from the trees in the old sugar orchard to make the bricks for the building.

Also under Dr. King's administration, the General Assembly voted to locate a building for the care and treatment of the criminally insane in Marion. The two-



story building was completed in 1911, and was designed with the idea of giving patients and those confined awaiting trial or under observation, every opportunity for exercise and freedom of movement.

Apparently not satisfied with how things were going at the Marion facility, Dr. King resigned as Superintendent of Southwestern State Hospital on November 10, 1915, and set out to realize his vision of a facility that could produce a higher percentage of recovery for mentally-ill patients. With \$500 of his own money and \$16,000 in borrowed funds, Dr. King set up a corporation and acquired the buildings and 56 acres

of land known as the St. Albans School for Boys in Radford, Virginia. The buildings were thoroughly renovated and on January 15, 1916, four patients were admitted to the St. Albans Sanatorium, later known as St. Albans Hospital. Dr. King and his wife kept St. Albans going for many years with their own money, because of the financial difficulties the facility experienced.

## References:

[www.glencoemuseum.org](http://www.glencoemuseum.org), "A Place to Heal - St. Albans Sanatorium," by Hanns-Peter Nagel, 2007; "History of Southwestern State Hospital," by Phyllis Doss, 1972; "Mental Health in Virginia," Autumn 1958 edition, pp 47-51, by Mr. F.M. White, an employee who retired from SWSH after 50 years of continuous service from 1901 to 1951; "Mental Health in Virginia," Summer 1959 edition, pp 46-52.

" Hope is the thing with  
feathers  
That perches in the soul.  
And sings the tune  
Without the words  
And never stops at all. "

~ Emily Dickinson

## February Factoid

**February** is the second month of the year in the Julian and Gregorian calendars. It is the shortest month and the only month with less than 30 days.

The month has 29 days in leap years, when the year number is divisible by four (except for years that are divisible by 100 and not by 400 in the Gregorian calendar). In com-

mon years the month has 28 days.

In the Southern Hemisphere, February is the seasonal equivalent of August in the Northern Hemisphere.

February starts on the same day of the week as March and November in common years, and on the same day of the week as August

in leap years. February ends on the same day of the week as October every year and January in common years only.



### Quick Facts

- Most people think of heart disease as a “man’s disease,” but it is the leading cause of death for both men and women in the United States .
- In 2006, heart disease was the cause of death in nearly 316,000 American females.
- In 2006, heart disease was the cause of death in 315,706 American men.
- The average age for a first heart attack for men is 66 years.
- Between 70 and 89 percent of sudden cardiac events occur in men.
- Smoking causes coronary heart disease, the leading cause of death in the United States.
- Breathing second-hand smoke increases a person's risk for a heart attack and other heart conditions.
- Eating healthy, staying active, being smoke-free, and getting regular check-ups is your best weapon to fight heart disease.

# February is American Heart Month

Heart disease is the leading cause of death in the United States and is a major cause of disability. The most common heart disease in the United States is coronary heart disease, which often appears as a heart attack. In 2009, an estimated 785,000 Americans had a new coronary attack, and about 470,000 will have a recurrent attack. About every 25 seconds, an American will have a coronary event, and about one every minute will die from one.

The chance of developing coronary heart disease can be reduced by taking steps to prevent and control factors that put people at greater risk. Additionally, knowing the signs and symptoms of heart attack are crucial to the most positive outcomes after having a heart attack. People who have survived a heart attack can also work to reduce their risk of another heart attack or a stroke in the future. For more information on heart disease and stroke, visit CDC's Division for Heart Disease and Stroke Prevention.

Other conditions that affect your heart or increase your risk of death or disability include arrhythmia, heart failure, and peripheral artery disease (PAD). High cholesterol, high blood pressure, obesity, diabetes, tobacco use, and secondhand smoke are also risk factors associated with heart disease. For a full list of diseases and conditions along with risk factors and other health information associated with heart disease, visit the American Heart Association's website at [www.heart.org](http://www.heart.org).

A healthy diet and lifestyle are the best weapons you have to fight heart disease. Many people make it harder than it is. It is important to remember that it is the overall pattern of the choices you make that counts. As you make daily food choices, base your eating pattern on these recommendations:

- Choose lean meats and poultry without skin and prepare them without added saturated and trans fat.
- Select fat-free, 1% fat, and low-fat dairy products.
- Cut back on foods containing partially hydrogenated vegetable oils to reduce trans fat in your diet.
- Cut back on foods high in dietary cholesterol. Aim to eat less than 300 mg of cholesterol each day.
- Cut back on beverages and foods with added sugars.
- Choose and prepare foods with little or no salt. Aim to eat less than 2,300 mg of sodium per day. All persons who have hypertension, all middle-aged and older adults, and all African Americans should consume no more than 1,500 mg of sodium per day.
- If you drink alcohol, drink in moderation. That means no more than one drink per day if you're a woman and two drinks per day if you're a man.
- Keep an eye on your portion sizes.

~ [www.cdc.gov/Features/HeartMonth/](http://www.cdc.gov/Features/HeartMonth/)

### Know Your Signs and Symptoms

Some heart attacks are sudden and intense; however, most heart attacks start slowly, with mild pain or discomfort. Often people affected aren't sure what's wrong and wait too long before getting help. Here are signs that can mean a heart attack is happening:

- **Chest discomfort.** Most heart attacks involve discomfort in the center of the chest that lasts more than a few minutes, or that goes away and comes back. It can feel like uncomfortable pressure, squeezing, fullness, or pain.
- **Discomfort in other areas of the upper body.** Symptoms can include pain or discomfort in one or both arms, the back, neck, jaw, or stomach.
- **Shortness of breath.** May occur with or without chest discomfort.
- **Other signs.** These may include breaking out in a cold sweat, nausea, or lightheadedness.





**Southwestern Virginia  
Mental Health Institute**

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**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's Word Search Answer Key**

	P					R	E	T	S	N	I	M	T	S	E	W		
	U				S												P	
	N				U	N	U	S	U	A	L						R	
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**Please submit articles for the next newsletter to Cheryl Veselik by February 20, 2011.**

**The next newsletter will be published March 1, 2011.**