Southwestern Virginia Mental Health Institute



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Hidden

There is a valentine hidden on every page in this edition, just like the one pictured here. Can you find all 18 of them?



Honoring Day to Day Tasks: Why Wait?



Good time management is a skill that requires constant practice. Good time management allows us to make better use of our finite and limited resource of time. As such. good time management falls under the SWVMHI Value of Honoring Day-to-Day tasks.

Dr. Donald E. Wetmore, a time management consultant, offers some solid advice for all of us. Dr. Wetmore encourages the use of the 80/20 rule since 20 percent of an effort generally accomplishes 80 per- gests that we radiate a posicent of the result. To achieve an additional 20 percent of the result, it will take an additional 80 percent of the effort. strategy, but consider. If we

We cannot create any more time, but we can leverage our time by focusing on those things that give "the biggest bang for the buck." We should avoid getting bogged down in "majoring in minors." It is important to focus upon what is important!

Dr. Wetmore also advises to work with a clean work environment. We know the old saying, "Out of sight, out of mind." The reverse of that is true, too. "When it's in sight, cally help a grump? it's in mind," and we cannot help but be distracted and drawn to the "quick" and "fun" things while the important tasks are left undone. By working with a clean desk and work environment, not only do we allow ourselves to be more focused, but we also model an important work skill that others around us will tend to follow, helping them to get more focused as well.

Finally, Dr. Wetmore sugtive attitude. I never thought of a positive attitude as being a good time management display a negative attitude, if we are angry, frustrated, anxious, overwhelmed, etc., we will send out that message and negatively infect those around us.

We cannot do our jobs all alone. We rely upon others.

If those who support us in our quest to get the job done do not see our positive attitude, our progress will be impeded. After all, who wants to repeatedly approach and enthusiasti-

~ James Moon, Ph.D. **Psychology Supervisor**



Continued on page 5

New Equipment: CAREFOAM Chair

One of the individuals we serve has a new chair called the CAREFOAM Chair. It has padding with Australian lamb's wool that can be laundered and air dried on the unit. The chair also has a large ottoman-like footrest for leg support. Manufactured from five different densities of foam, including memory foam in the seat, it has no hard surfaces. The chair provides overall support and improved pressure reduction. It also helps to prevent falls and provides safe and secure positioning for individuals with special challenges. The CARE-FOAM Chair can be tilted and used with a mechanical lift. The ottoman facilitates multiple support positions and uses.

As a natural progression of his disease, this individual was having increased involuntary movements, more difficulty walking, and more difficulty performing activities of daily living. He was prone to skin breakdown. Now that he



Staff member Mandy Fields is shown demonstrating the new Care Foam Chair

spends time in his new chair, it seems to have provided him with a sense of security. His restlessness has decreased and he does not make efforts to get up on his own. We are happy to say that it also improved his socialization, as he spends more time in the dayroom and is more comfortable than he was before in a regular chair or a wheel-chair.

When he is asked if he likes his new chair, he consistently says, "Yes." His Authorized Representative likes the chair very much as well, stating that she feels it has helped to reduce skin breakdowns and reduced his risk of falling. She also feels that it has helped to improve the comfort and quality of his life.

For more information on the CAREFOAM Chair, please see your Unit Nurse Manager or www.carefoam.com/products.

Note that because this individual is unable to get up from the chair himself, all provisions of SWVMHI Policy 3001, Restraint for Medical Indications, are followed.

~ Mary Dotson, RNCA Geriatrics

The Star Will Shine Again



The star, which sat high atop the Henderson Building and was illuminated each year from Thanksgiving until early January to announce the Christmas season, was recently removed by Clark Brothers Construction Company to facilitate replacement of the Henderson Building roof.

The star pictured above served us well. It was made of wood and illuminated by several strings of lighting using large clear bulbs. The annual lighting of the star became a tradition

that was enjoyed by the individuals we serve, SWVMHI staff, and the citizens of Marion and Smyth County.

To keep this tradition ALIVE, the roofing project is scheduled for completion in late June, 2014, and a new star will be fabricated and installed. It will be illuminated once again to announce the arrival of the Christmas season in late November 2014.

~ Don Chisler | Physical Plant Services | Director |





On behalf of my family, I would like to thank everyone for your prayers, cards, emails, and monetary gifts to mom's church as we mourn the loss of our mother, Lexie A.

Trivett.

Thank you, again.

~ Vícky Melvín-Keen



Rehab Department News



Wow, this past month has been very cold. BRRRRR... Temperatures have dropped below zero and the wind chill has been unrelenting. But, it is warm inside!

Treasure Seekers continues to be open for business on Tuesdays and Thursdays from 1445 to 1530. We would love to have your business, as proceeds benefits the individuals we serve. Christmas items are currently still on display all are 50 percent off, so come on in and stock up for next year. There is a wonderful assortment of handmade ceramic items, clothing, dance. and woodcrafts that would make great birthday, anniversary, and special occasion gifts. New inventory is added weekly.

A facility Shoe Drive was held on January 16, 2014, to aid in replenishing Bonanza. Thank you to the staff who contributed!!!

A Regional Community Empowerment Recovery Council (R-CERC) meeting was not held during the month of January, but will be held on February 19, 2014. Staff and members will attend for information gathering and a yummy lunch at the park.

The Rehab Department hosted a special event with Mardi Gras as the theme on lanuary 23, 2014, in the Gym. There was Be on the look-out for emails and flifun, games, and snacks for all in atten-

Break week for the Rehab. Department was from January 27 through January 31, 2014. This week served, as usual, as a

time for the individuals we serve to have a break from groups and for the Rehab. Department to look at the current schedule and make any needed changes.

The Animal Assisted Activities Therapy Program (AAA/T) continues to be very successful. The individuals we serve are encouraged and enthused when visiting with the many pets available in the AAA/T program.

Fundraisers through the Rehab. Department will begin again in February. ers soon!

> ~ Sheila Thomas, **Rehab Specialist**

Count your age by friends, not years. Count your life by smiles, not tears. ~ John Lennon



and Sanitizers vs. Hand Washing



Are Hand Sanitizers Better Than Hand Washing Against the Common Cold?

Rhinovirus is the known cause of approximately 30 percent to 35 percent of common cold cases in adults.

Hand-to-hand contact is one of the main avenues of transmission contributing to the spread of rhinovirus infections.

A new study suggests that hand sanitizers containing alcohol are much more effective at removing rhinovirus from hands than washing with soap and water.

In the study researchers compared the effects of hand washing with soap and

water with an alcohol-based hand sanitizer by contaminating the fingers of healthy volunteers with rhinovirus and then randomly grouping them and administering one of six hand treatments.

The experiments ranged from a control Keep using that hand sanitizer! group who had no treatment, several groups who washed their hands for differing amounts of time (some with soap, some without), and several who used varying amounts of hand sanitizer.

Results showed that the alcohol hand sanitizer removed approximately 80 percent of detectable rhinovirus from hands and was much more effective than no treatment, water alone, or soap and water. Soap and water removed rhinovirus from 3 percent of hands.

Results showed that the sanitizer containing both organic acids and alcohol inactivated the virus on hands and prevented infection two to four hours following application.

Information from an article in Infection Control Today magazine, 3/23/10: Reference: R.B. Turner, J.L. Fuls, N.D. Rodgers. 2010. Effectiveness of hand sanitizers with and without organic acids for removal of rhinovirus from hands. Antimicrobial Agents and Chemotherapy, 54. 3: 1363-1364.

> ~ Cindy Jones RN CIC Infection Prevention & Control/ **Employee Health Coordinator**

Staff Development

Take advantage of the training **Opportunities in February**

Ethics with Dr. Gillette When: February 6, 1330 - 1500 Where: Dogwood Room/B Building

Windows 7 Overview

When: February 12, 1500-1700 Where: Computer Lab/B Building

Basic Computer Skills

When: February 19, 1500-1700 Where: Computer Lab/B Building

Basic Microsoft Word

When: February 26, 1500-1700 Where: Computer Lab/B Building

Workplace Violence/ Harassment CAI due

Log onto the Knowledge Center today and complete this CAI between February I and February 29, 2014.

¦Groundhog Day

Groundhog Day 2014 will be here soon! This year marks the 128th year that the famous groundhog, Punxsutawney Phil, has been making weather predictions. He will leave his burrow at 0720 February 2nd at Gobblers Knob in Punxsutawney, Pennsylvania, he will observe the weather conditions and look for his shadow, and he will then make his prediction for the remainder of winter.

If Phil sees his shadow, he regards it as an omen of six more weeks of bad weather and returns to his hole. If the day is cloudy and, hence, shadowless, he takes it as a sign of spring and stays above ground.

Early groundhog observances were held in private. Today's celebrations see tens of thousands of people descend on a small town in upstate Pennsylvania, not unlike our small town of Marion, VA.

If you would like to watch the live video cast on February 2, visit http://www. groundhog.org/ to watch the Seer of Seers, the Prognosticator of Prognosticators, greet his true believers and reveal his prediction for the end of winter.





Staff are reminded that Human Resources and your department manager must have your current contact information. This includes your mailing address, your physical home address, and your phone number (s).

Please insure the correct information is available by contacting Human Resources at Extension 204 and calling your supervisor today.

Congratulations!

The Direct Service Associate (DSA) Career Pathway includes partnerships involving DBHDS, community colleges, the College of Direct Support, and others that promote a rich learning and work environment for DSAs within the facilities. The career pathway supports a more motivated, experienced, and competent direct-care work staff providing higher quality care and service. The experience, training, and development opportunities are structured in three tiers that provide increasing advancement opportunities based on attaining increased experience and competencies as a DSA. The career pathway's three tiers represent career growth opportunities for all participating DSAs.

The following SWVMHI Psychiatric Aides recently achieved Level I and Level II DSA status:

Level I

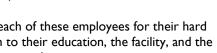
- Barbara Rouse, AB, Third Shift
- Lesa Holmes, F, First Shift

- Ellen Boothe, CD, Second Shift
- Jenette Hurd, CD, Second Shift
- Amanda Jennings, Float, Third Shift

Level II

- Terri Buchanan, ERS, First Shift
- Lorene Blevins, Float, First Shift
- Karen Branson, ERS, First Shift
- Helen Blevins, ERS, Second Shift
- Patsy Reedy, ERS, First Shift

Congratulations to each of these employees for their hard work and dedication to their education, the facility, and the individuals we serve every day.



~ Norma Brickey, MSN **Assistant Nurse Executive**

FMLA Responsibilities



The Human Resources Department would like to take this opportunity to remind you on some of the employee responsibilities under the Family and Medical Leave Act (FMLA):

 Employees seeking to use FMLA leave are required to provide 30-day advance notice of the need to take FMLA leave when the need is foreseeable and such notice is practicable. If leave is not foreseeable more than 30 days in advance, the employee must provide notice as soon as practicable - generally the same or next business day, depending on the facts and circumstances of the particular case.

- · Employees also must provide sufficient information for an employer to reasonably determine whether the FMLA may apply to the leave request. This is why SWVMHI requires that a health care provider certify the need for leave as a serious health condition of the employee or the employee's immediate family member. SWVMHI, in accordance with FMLA, allows the employee 15 calendar days to turn in the medical certification to the Human Resources Department. It is the responsibility of the employee to ensure it is returned within the allowable time.
- If an employee fails to timely submit a properly completed medical certification, FMLA protection for the leave may be delayed or denied. If the employee never provides a medical certification, then the leave is not FMLA leave. In either case, the absences could be

- considered undocumented and unanticipated in accordance with SWVMHI leave policy.
- FMLA medical certifications and leave requests are only valid during the leave year in which they are requested. A leave year is from January 10 of one year to January 9 of the next year. Leave requests and medical certifications must be renewed each year.

Let's get those request forms and certifications completed and turned into the Human Resources Department in a timely manner. Should you have any questions regarding FMLA, please feel free to contact any member of the Human Resources Department by calling Extension 204 or 363.

> ~ Human Resources **Department**

What's In a Name?



For clarity and for safety, new signage is coming to SWVMHI. You may have noticed that on some wards, a room is numbered with the letter of a different ward, i.e., you may be standing by the nurses' station on Ward H and the rooms leading down the hall to the exit door are numbered as G---. This numbering sequence was useful and accurate when the building was constructed, but with moves and repurposing of space, some of the numbering is confusing and potentially hazardous.

On a recent fire drill, the room location was announced and the responders appeared on that ward. Unfortunately, the "fire" was on another ward and Woodshop is the Horticulture that had the other ward's leading letter as an identifier. Confused? Don't worry. All of the misleading numbers are being changed so that when someone needs to respond to a fire or to a code, the location is clearly identified.

In addition to room re-numbering, some of the courtyards will have new signage. The courtyard opposite the New Day Café will be known as the New Day Café Courtyard. The courtyard between G and H is the G Courtyard. The courtyard at the end of the F hall is the F Courtyard; at the end of the E hall is the E Courtyard. The courtyard outside of Horticulture

Courtyard. The courtyard between the Auditorium Building and Harmon is the Auditorium Courtyard. The areas that are not within the locked perimeter should be referred to using the name of the closest building to the area.

If you have any questions, please contact Amanda Currin, Assistant Director Administrative, at Extension 202 or Don Chisler, Director of Physical Plant Services, Safety, and Security at Extension 221.

~ Safety Committee



Dogwood Discussions

On January 9, 2014, Dogwood Discussions hosted C.J. Copenhaver and Dr. Tim Graham for a very interesting and thought provoking discussion on the topic of "Using 12 Step Principles To Move Through Life Challenges."

C.J. and Tim conduct two morning sessions of the 12 Step/MICA (Mental Illness Chemical Addiction) groups on Tuesdays through Fridays for the individuals we serve in the A/B Activity room. The premise of the group is that healing is a process and the skills we develop over a lifetime can assist us in addressing the problems that currently affect our sense of well being. While the original 12 Step program was developed in the 1930's to address the loving) look at what we are doing without issue of alcoholism, over 300 self-help groups now use the 12 step formula to work through the many problems that interrupt the normal course of life. The use of the 12 Step principles are intended to serve as a guide for facing challenges that would otherwise overwhelm us.

One of the great features of this program is that participants don't have to embrace all the steps at once in order to benefit from the program. The 12 Steps involve a group process that helps its members to evolve at their own pace through mutual support, humor, play, and insight. All people need support and encouragement to recover in their own way, so the 12 Step group honors personal choice and respects the process of individual life journeys.

C.J. and Tim stressed that everyone has a variety of feelings, but it is how we respond to them that shapes our level of contentment in life. It is very important to 3. be honest about our feelings, but also to be open to changes in attitude and behavior if it would be in our best interest to do so. C.J. emphasized that all experiences are 4. temporary, so living each day with an expectation of change and an openness to new opportunities for learning can help reduce worry and stress.

Other points that were addressed featured the H.O.W. formula for addressing change:



- * H- represents taking an HONEST (and self blame.
- * O- represents being willing to be OPEN-MINDED to the benefits of change.
- * W- represents being WILLING to try something new and "rolling with the resistance."

An example of the 12 Steps that C.J. and Tim emphasize in their groups are based on the philosophy of the original 12 Step program and the popular writings of Melodie Beattie:

- We admitted that our lives were out of control. Nothing we have tried has been effective. We let go of the need to control outcomes.
- 2. We accepted the idea that a Higher Power could help us, because we have seen it happen in the lives of others.
- We made a decision to get ourselves and our ego out of the way, and became willing to try something new.
- We took an honest, loving look at our lives, without judgment or criticism.
- We told someone the truth as straight as we could, without concealing parts of our experience.

- We became ready to let go of the barriers to our health, harmony, and happiness.
- We asked a Higher Power for inspiration to do what works and offer direction.
- We remembered those we have damaged, putting ourselves at the top of the list.
- We made things right wherever we could, using positive actions, not just words.
- 10. We continued to work at being honest and congruent, promptly admitting and correcting mistakes as we became aware of them.
- 11. We continued to become more aware of our Higher Power's presence by spending more quiet time looking within.
- 12. We tried to carry the message of unconditional love and acceptance to others by demonstrating respect and love for ourselves.

Future Dogwood Discussions are planned monthly, usually the first Tuesday or Thursday from 1200 to 1245. We encourage participants to bring their lunch and join us. When the weather is mild, we will host the discussions on the Terrace of the B Building and the talks are aptly named, "Terrace Talks." Past speakers have included Dr. Jim Moon, Dr. Tim Graham, C.J. Copenhaver, and Sharon Neitch. Future speakers will include the above as well as Amanda Currin and Dr. Colin Barrom.

If you have a topic of interest that you would like to share, please call the Training Department at Ex.167 or Ex.168 to schedule a presentation date.

~ Tim Graham, D.Min. and C.J. Copenhaver, CAC/CSAC/MACe



Henderson Building Water Event

Tuesday, January 7, 2014, started like any other day. There was record setting cold outside, but the Henderson Building was toasty warm. Early in the day Ron Atkins rounded throughout the building to verify the heaters in the attic were working and that nothing was frozen. All was well.

At 1557 we heard the clang of the gong indicating that the sprinkler system was releasing water, immediately followed by the fire alarm. Knowing Chief Harrison would never subject us to a fire drill in the cold of winter, much less at the end of shift for Maintenance and Security, we quickly got out of the building and assembled according to the fire plan.



Broken sprinkler pipe in Henderson Building

Soon Maintenance responded and reported that a sprinkler in the ceiling of the third floor had broken – it wasn't due to

the cold but just due to age! We were allowed to return to the building to protect and/or save whatever we could. The break occurred in the ceiling of an unoccupied office on the third floor. With water at 75 psi coming out a one inch pipe (about 560 gallons), the ceiling tiles and fan coil heater in the room were soon on the floor in about four inches of water.



Third floor office where leak occurred



Clean-up begins in Brian Comb's Office

The water spread into the hallway and adjoining offices and then to the ceiling of the office below; unfortunately, that second floor office was occupied by Brian Combs. His ceiling tiles absorbed the water and then began falling to the floor. Soon everything in the office was saturated with water and there was about two inches of water on the floor. Below Brian's office was the office of Rita Coe, which soon resembled an indoor wading pool.



Rita Coe's Office

What a mess! However, Housekeeping and Maintenance quickly responded with wet vacs, carpet extruders, brooms, shovels, garbage cans, mops, towels, etc. Everyone pitched in and got the worst of the water and trash removed before 1830 Tuesday night.

Wednesday was a busy day in the Henderson Building. Rita Coe was moved

to the Administrative Conference Room, Phyllis Miller moved to a vacant office on Ward H, and Brian Combs moved to a vacant space in the Bagley Building. The sprinkler system received an initial evaluation. Consolidated Construction Services (CCS) placed fans and de-humidifiers throughout the affected areas and removed more debris. Thursday, January 9, the sprinkler system was tested and was found to have no leaks so it was re-filled with water. Staff anxiously listened for drips but none were heard nor seen.

CCS re-arranged the fans and dehumidifiers and pronounced the "dryout" was going quite well.

ECS – Mid Atlantic, an environmental firm, took samples of the tiles, plaster, carpet, etc., to determine if there were any contents that required special disposition. By Friday, the building no longer smelled like an old wet dog!

All in all, we were quite fortunate. No one was hurt. Only two occupied offices had significant damage. The server room, where all of our "computer brains" are located, only had water on the floor that seeped from the adjoining office.

After more than three weeks, the second and third floors continue to have some residual moisture, but are drying out evenly and without incident. The contractor and the estimator have taken pictures, measurements, etc., and by the end of the month hope to begin demolition of the remaining water damaged items and then will re-build the areas "back to their original grandeur!"

~ Amanda Currin Assistant Director Administrative



MONTHLY PATIENT CENSUS

December 2013

Admissions 47
Discharges 46
Passes 22

Average Daily
Census
146

PERSONNEL CHANGES

New Employees

D. I. D. II EDG.II . G	
Rebecca Ball, ERS Unit Secretary	Dec 10
Kayla Campbell, P14 Psychiatric Aide	Dec 10
Kimberly Cregger, Psychiatric Aide	Dec 10
Michelle McCloskey, Registered Nurse	Dec 10
Justin McGhee, P14 Food Service Worker	Dec 10
Brittney Moore, PI4 Registered Nurse	Dec 10
Kathleen Olinger, Psychiatric Aide	Dec 10
Tanya Panella, Psychiatric Aide	Dec 10
Dawn Sessoms, P14 Registered Nurse	Dec 10
Michelle Todd, Registered Nurse	Dec 10
Brian Combs, Information Technology Lead Technician	Dec 17
William Brown, P14 Painter	Dec 30
Natalie "Elaine" Tucker, Clinical Social Worker	Dec 30

Separations

Aaron Lundy, Housekeeping Worker	Dec I		
Joyce McCormick, P14 Patient Registrar	Dec 16		
James Jones, P14 Psychiatric Aide	Dec 23		
Scott Oldham, Psychiatric Aide	Dec 30		

Promotions/Role Changes

Donna White, Psychiatric Lead Aide to Psychiatric Aide	Dec 10			
Tina Woods, Psychiatric Aide to Psychiatric Lead Aide	Dec 10			

MAMAMAMAMAMAMAMAMA

The Recognition Committee is looking for new members from across the facility. If you have an interest in joining, talk to your supervisor, and then ask that your supervisor to contact the Human Resource Department at Extension 289 or Extension 204.

STANDISTINIST



Outlook Tips and Tricks



Microsoft Outlook is the email application that we use here at SWVMHI. But did you also know you can use the calendar function as well? In fact, you are encouraged to use the calendar feature and keep it up to date because planning meetings can be made easier with less headaches for those who try to schedule them,

in addition to keeping you on track. Following are just a few of the many things you can do with the calendar feature in Outlook:

Automatically insert holidays. You can have Outlook automatically enter standard holidays to your calendar. To do so, open the Calendar Options menu and select "Add Holidays."

Automatically find free time for meeting attendees.

How many times have you repeatedly had to ask for available times from everyone on a committee because you find out that the dates you originally thought would work, did not? Microsoft Office can help you out by automatically selecting the next free time for all the attendees. Click the "Auto Pick Next" button after adding all the attendees to your meeting. Of course, this feature is only good if everyone is using the calendar feature.

Track meeting attendees. Use the scheduling view for meetings to track the status of the attendees for your meeting. You can quickly see who has accepted, declined, tentatively accepted, or not responded at all. For those of you who receive a calendar request for a meeting, it is important that you respond with one of the choices given. Not only does it help the meeting planner know who is coming to a meeting, but Outlook will automatically put the meeting on your calendar

and send you a reminder before the meeting is about to begin.

Color code appointments. Using your calendar is a great tool to keep you organized, but sometimes, those appointments can all blend together. To set your appointments apartment from each other, try color coding them. There are ten different colors available for use. To add color to your appointments, right-click the appointment in your calendar. You should receive a menu. Click on "Label" to see the available colors, then select the color you want to use for each appointment.

Use the reminder function. Are you constantly late for meetings? Do you have critical deadlines that you must meet? Use the reminder function whenever you add an appointment to your calendar. To set a reminder, click on "Reminder" and set the function to sound a bell five minutes, ten minutes, fifteen minutes or more before the scheduled appointment or deadline. Just make sure your computer's speakers are on. You should also receive a pop-up message on your desktop so you can see what meeting you need to attend or assignment you need to complete.

Project and time tracker. Do you ever need a way to track what you are working on or how long it took you to complete a project? If so, simply create a new appointment with the starting time of the project. When you are done, enter the ending date and time. When you look back on your calendar, you can see how long you worked on that project.

Do you have any other Outlook tips you would like to share? Please send them to Cheryl Veselik for inclusion in a future edition of A View From the Hill.



February Lunar Phases

February 6 First Quarter Moon February 14

Full Moon, also called "Snow Moon" by Native Americans of New England and the Great Lakes because this time of the year experiences heavy snowfalls. It is also called the "Hunger Moon" because of the meager hunting during this time of year.

February 22
Last Quarter Moon



Meals in Minutes: Slow-cooker Lasagna

Lasagna is a family favorite, but the traditional version requires at least 30 minutes of prep work, plus an hour to cook. Enter the slow cooker. This hands-off lasagna recipe uses no-cook noodles and takes just 15 minutes to assemble, but still has all the beefy, cheesy goodness you expect. Ready in four hours, it's perfect for weekends or days when you're home in the afternoon.

Ingredients

- I pound ground beef, 96% lean
- I/4 tsp red pepper flakes
- 2 tsp dried thyme
- One 24-ounce jar low-sodium marinara sauce
- One 3/4-pound eggplant, unpeeled, diced(2 cups)
- 15 ounces part-skim ricotta cheese
- I cup shredded Italian five-cheese blend *
- \circ I/4 cup egg substitute (or I egg white)
- I tbsp chopped fresh parsley
- 6 no-boil lasagna noodles



Directions

- In a skillet over moderate heat, brown the ground beef and drain any excess fat. Stir in red pepper flakes, thyme, tomato sauce, eggplant, and 1-1/4 cup water.
- 2. In a mixing bowl, combine the ricotta, shredded cheese blend, egg substitute, and parsley.
- Coat the inside of the slow cooker with nonstick cooking spray. Place enough meat sauce in the slow cooker to cover the bot

tom.

- Top with 2 or 3 lasagna noodles (break them up as needed) to cover the meat sauce. Repeat layer.
- Top the second layer with all of the cheese mixture and finish with a top layer of the remaining meat sauce.
- Cover and set the slow cooker on low. Cook for 3 1/2 to 4 hours.

Please note that the cooking time should not exceed 4 hours. This is not an "all day" slow-cooker meal.

*Note: If you can't find the Italian five-cheese blend, shredded part-skim mozzarella will work just fine.

Makes 8 servings; roughly one cup.

http://recipes.sparkpeople.com

CPR Tips

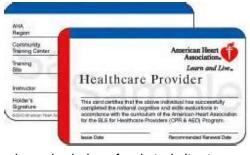
Historically, February has been Heart month. In thinking of our hearts, it reminds me of cardio-pulmonary resuscitation or more commonly known as CPR.

2014 is a renewal year for most of the staff at SWVMHI who must take CPR. The knowledge and skills learned in our CPR classes can save a life. Who knows, that life could be yours!

When we are first certified in Basic Life Support (BLS) CPR through the American Heart Association (AHA), we receive a BLS CPR card that is good for two years. During the in-between year, our facility requirement is to review the skills for adult BLS and SWVMHI's Code Blue Policy. These are extremely valuable learning times, even though they do impact the daily workings of our staff.

Staff are very fortunate that SWVMHI is able to offer CPR classes on every shift, along with a competency class and a "new" class for folks who have never had CPR or whose cards have expired.

When you see the staff listed below,



please thank them for their dedication and commitment to SWVMHI and for the extra mile they go to help ensure CPR competency in saving lives.

First shift instructors are Angie Anderson, Megan Hollandsworth, Angel Smith, Josie Wade, Brittany Williams, and Christine Woods. Our second shift instructors are Amy Dempsey and Marie Guilmette. Third shift instructors are Tommy Terry, Teresa Gillespie, Regina King, and Sarah Smith. Rebecca Sparger, Ginny Moorer, and Robin Poe can fit in first, second, or third shift. Rebecca and Ginny are also back-up instructors for classes comprising more than six students.

The AHA has a quick reference guide

with a simple algorithm we use.

- Remember it is C-A-B, for Compressions-Airway-Breathing.
- Unresponsive, no breathing, or no normal breathing only gasping.
 - ✓ Check for five to ten seconds.
- Call for help (Code Blue) and get AED.
- Check pulse.
 - Check for five to ten seconds.
- · Start CPR.
 - √ 30 compressions to 2 ventilations.

 1. The state of the state o
- Activate the AED, turn it on, place pads, listen to AED instructions.
- Continue high quality CPR (hard, fast, deep compressions) until more advanced help arrives.

~ Rebecca Sparger, RN, BSN Training and Development Coordinator

Word Search

Just for fun, how many of the following words can you find related to Valentine's Day?



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February 14 has long been celebrated with the exchange of candy, flowers, and gifts between loved ones, but how did Valentine's Day start? There are several theories. Some believe it started to commemorate the anniversary of St. Valentine's death or burial around A.D. 270. Others claim that the Christian church may have decided to place St. Valentine's feast day in the middle of February to "Christianize" the pagan celebration of Lupercalia. Lupercalia was a fertility festival celebrated on the ides of February (February 15) and dedicated to the Roman God of agriculture, Faunus, as well as to the Roman founders, Romulus and Remus. At the end of the fifth century, Pope Gelasius outlawed Lupercalia, deeming it "un-Christian" and declared February 14 as St. Valentine's feast day. During the middle ages, it was commonly believed in France and England that February 14 was the beginning of birds' mating season, which added to the idea that Valentine's Day should be a day for romance. Valentine greetings were popular as far back as the middle ages, but didn't begin to appear in writing until after 1400. By the middle of the eighteenth century, it was common for friends and lovers to exchange small tokens of affection or handwritten notes. By 1900, printed cards began to replace written letters. Today, according to the Greeting Card Association, it is estimated that one billion Valentine's Day cards are sent each year.



Special Gym/Game Room Activities



Consumer Empowerment
Recovery Council (CERC)
February 20, 2014
1515—1530

Patient Activity Council (PAC)
February 20, 2014
1530—1545



Bingo February 5, 2014 1830 - 2000

Pool Tournament February 7, 2014 1830—2000





Movie Nights
February 10 & 11, 2014
1830—2000

<u>Jeopardy</u> February 18, 2014 1830—2000

Birthday Party February 19, 2014 1800 - 2000 No Cafe



St. Valentine/Patrick Day Party February 20, 2014 1330 - 1500



Church Services
Church Services are held each
Thursday from 1830 - 1930
No Cafe

Please note that game room activities, in addition to those listed here, are held every weeknight, except Thursday, from 1830 - 2000. New Day Café hours are from 1800 - 1830 unless otherwise noted.



- Chest pain or discomfort that lasts for more than a few minutes.
- Pain in the neck, jaw, arms, or upper back.
- Abdominal pain or feeling of heartburn.
- Cold sweats or clammy skin.
- Unusual tiredness or nausea.
- Dizziness or lightheadedness.
- Shortness of breath.

If you think you or someone else is having a heart attack, call 911 immediately!

February Days to Celebrate

"Off the cuff" February holidays to celebrate:

February 2
Groundhog Day
February 7
Bubble Gum Day
February I I
Get Out Your Guitar Day
February 14

Ferris Wheel Day



National Hippo Day
February 22
International Tongue Twister Day
February 23
Curling is Cool Day
February 26
For Pete's Sake Day
February 28
National Tooth Fairy Day

February 15









Out of the bosom of the Air, Out of the cloud-folds of her garments shaken, Over the woodlands brown and bare, Over the harvest-fields forsaken. Silent, and soft, and slow Descends the snow. - Henry Wadsworth Longfellow, Snowflakes

First Aid Tips: Winter Weather



temperatures ... Ugh! Where is summer weather when we need it?! With winter weather comes winter injuries. Some injuries like

frostbite, and hypothermia, have been covered in earlier editions of the newsletter. So looking out the window with snow and ice on the ground, falls with injuries come to mind.

Who hasn't slipped on the ice or in the snow and had the breath knocked out of them or bruised a leg (or ego, if someone sees us!), sprained an ankle or worse, broken a bone?

When our breath is knocked out of us, or part until examined by a more adit is scary, but our breath comes whooping back in and we feel so relieved. With a bruise, the bump itself hurts a lot and we usually say something like, "Wow, that's going to be a big bruise!" Then the bruise can also hurt. We have probably all experienced the stages of bruises healing. First the bruise is purple-blue then progresses to green-yellow, and then fades along with the memory of the injury and the pain.

Snow, ice, freezing However, falls can contribute to sprains or fractures. A sprain is when joints move in ways they are not intended to move. Sprains are trauma to a joint that cause pain and some disability depending upon the degree of injury to the ligaments. Symptoms include rapid swelling, heat, and disability. Initially signs and symptoms of a sprain can be confused with a fracture or break of the bone. Until otherwise known via xray, treat a sprain like a fracture.

> As always, make sure the scene is safe then utilize the RICE method of treatment. RICE is an acronym for Rest, Ice, Compression, and Elevation.

> Rest means to avoid using the limb vanced provider, especially if a fracture is suspected.

Ice is placed in a bag with water and wrapped in a towel or cloth. It is used for the first 24-36 hours. After that time frame, heat is more effective. Ice helps decrease pain and swelling and should be applied for no more than 20 minutes per hour. The injured joint and surrounding tissue will probably show significant bruising.



Compression may or may not be utilized and consists of the use of an ACE bandage. It is usually applied by a health care provider. It helps with stabilizing the joint and reducing swelling of the tissues.

Elevation can help reduce swelling, can help reduce pain, and helps with resting the joint or limb.

If there is an open wound(s), cover it with a clean dressing. Don't try to straighten a bent or deformed limb. Don't move a victim if a bone is protruding through the skin. If needed, a splint may be fashioned out of a rolled up magazine or newspaper and taped in place to prevent the injured part from moving.

Of course, prevention is the best medicine. So, bottom line, in bad weather, wear boots with sturdy, gripping soles; hold onto handrails; scatter salt, sand, or kitty litter over snow or ice; and be careful!

~ Rebecca Sparger, RN, BSN **Training and Development Coordinator**

Cleaning the Mobile Germ Warehouse

Take a look at your mobile device. Do you see oily fingerprints and lint on the touch screen? Dust and crumbs forming particulate frost in the corners? Is that a hair stuck at the screen's edge? Because our electronics are constantly within our grubby grasp, they can get pretty gross. They are taken into public restrooms, handed to runny-nosed toddlers, passed around to share photos and pressed against sweaty skin in gyms. Repeated studies show what accumulates is germy nastiness worse than what is on the bottom of your shoe.

Cleaning your device can be tricky, since you don't want to damage it and manufacturers don't give you much guidance. It can be done, however, if you're careful and conscientious.

Regularly wiping down your device with a And yet, in the Apple Store, you'll find moist microfiber cloth is sufficient to eliminate many kinds of common bacteria. More enduring and dangerous bacteria like clostridium difficile (which can cause less, the wipes work great at cleaning diarrhea or even inflammation of the colon) and flu viruses may require a steriliz-I ing agent like bleach or alcohol.



This is a problem, since Apple on its website officially warns against using "window cleaners, household cleaners, aerosol sprays, solvents, alcohol, ammonia or abrasives" to clean its products and advises instead to "simply wipe the screen with a soft, lint-free cloth to remove oil left by your hands." Other manufacturers offer similar advice or none at all.

the 32-percent isopropyl alcohol Clens wipes by Bausch & Lomb. Apple declined to explain the contradiction. Neverthegrime, muck and marks off your device and they also disinfect. A Clens kit that includes three Clens wipes, a 3-ounce bottle of Clens cleaning spray and a

cleaning cloth costs about \$20. But it's far cheaper to make your own alcohol and water solution.

To clean his own mobile devices, a member of Best Buy's Geek Squad said he used a 1:1 ratio of 70 percent isopropyl alcohol and distilled water, which together cost less than \$4 at most grocery and drugstores. Fill a spray bottle with the diluted alcohol, lightly moisten a lint-free, preferably microfiber, cloth (no paper towels) and gently wipe down the screen and case. Never spray directly onto the device. To clean corners and around ports, use lint-free foam rather than cotton Q-tips.

It's up to you how obsessively you want to clean your mobile devices, but health and electronics experts advise wiping down your mobile device with a moist microfiber cloth at least daily for basic sanitation and upkeep.

Excerpted from article that appeared in the New York Times 1/1/14

~ Safety Committee /



ONE

One tree can start a forest. One smile can begin a friendship. One hand can lift a soul. One word can frame a goal. One candle can wipe out darkness. One laugh can conquer gloom. One hope can raise your spirits. One touch can show you care. One life can make this difference. Be that ONE today.

 Author unknown Submitted by Janie Atwell, PA, Geriatrics





Code Orange, Class IV!! (Intruder Alert!)

Based on the Hazard Vulnerability Analysis (HVA) annually completed by the Safety Committee, it was determined that a drill to test SWVMHI's response to an intruder would be of greatest benefit to the facility. To that end Chief of Security Dickie Harrison developed a drill scenario to test SWVMHI's response to an armed intruder in a facility building. Chief Harrison coordinated the drill with Smyth County's SWAT team and the hostage rescue team, the Commonwealth of Virginia State Police, and the Town of Marion Police and EMS.

On December 17, 2013, the Power Plant operator announced "Code Orange, Class IV Henderson Building" three times and the drill was underway. The scenario: A very angry, loud, and intoxicated man entered the Henderson Building and demanded to speak with the Director - he was very upset about the care his mother was receiving on Geriatrics and he wanted to speak with the Director and then take his mother home. As the Director was out of town, the intruder took the Assistant Director at gunpoint with him to the Rehab Building.

Emergency Drill

Every area immediately responded, moving patients away from windows, assembling in protected or safe areas.

When the drill concluded, a debriefing and evaluation was conducted with the responders and with facility staff. The responders thought it was a very productive drill and an excellent learning experience for them. They indicated that drilling in our facility not only familiarizes them with the buildings and staff but also the buildings are similar to a school and it is a great place to practice. There were communication problems between the various responders due to lack of compatibility of radios. In addition, the repeater in the Henderson Building was not functional due to the construction.

From the hospital staff we learned that the since the announcement did not indicate if the intruder was internal or external, there was discussion as

to the proper response. Since the intruder was identified as located initially in the Henderson Building, the proper response varied based on location.

In all drills, communication is identified as an opportunity for improvement and this drill was no different. To that end, additional radios are being purchased for the B Building and Clinical Services.

The full evaluation document is available from the Safety Committee for discussion at departmental meetings.

Similar drills will be conducted on off shifts and on weekends. The sobering comment made by the responders was that it isn't a question of if Smyth County will have such an event, but when. To that end, we'll keep drilling so that our responses are reflexive and the best that we can do.

BTW: There was an Oscar nomination for Don Chisler for his role as the crazed intruder and one for Dickie Harrison for best screenplay/script!

~ Safety Committee



My heartfelt thanks to each of you for all the kindness, sympathy, and friendship given to me and my family during the illness and loss of my sister. Your thoughts, prayers, calls, and cards mean so much. I feel very blessed to have such friends and co-workers. May God bless each of you. ~ Cindy Jones



Go Red For Women February 7, 2014



National Wear Red Day this year is February 7, 2014.

The American Heart Association (AHA) launched National Wear Red Day® in 2003 to bring attention to cardiovascular disease, which claimed the lives of nearly 500,000 American women each year. In 2004, the AHA created Go Red for Women to educate women on heart disease, help women come together to show their support, and increase funding for heart disease research and treatments for those in need.

A Decade of Success

Since the first National Wear Red Day® in 2003, we've made tremendous strides in the fight against heart disease in women. Through research and education to healthy lifestyle changes, we're proud that:

 34 percent fewer women now die from heart disease, saving 330 lives every day.

- More women are taking ownership of their health by developing healthy lifestyles:
 - √ 37 percent are losing weight.
 - √ 43 percent are checking their cholesterol.
 - ✓ More than 50 percent exercise more.
 - √ 60 percent have improved their diets.
 - √ 33 percent have developed heart health plans with their doctor.
- Awareness is up: 23 percent
 more Americans now realize
 heart disease is the number
 one killer of women.
- Awareness among minorities is up, doubling among Hispanic women and tripling among African American women.
- 15 percent have quit smoking, and high cholesterol has declined by 18 percent.
- More communities have joined the fight. Registration in Go Red For Women (GRFW) is now more than 1.75 million. More than 25 million Red Dress Pins have been worn to support the cause. More than 185 cities host GRFW events and luncheons. And more than 2,000 landmarks light up in

- red on National Wear Red Day.
- Legislative efforts are making a difference. Women no longer pay higher premiums than men for health coverage. And 20 states have programs for low-income women to get screenings for heart disease and strokes through the Centers for Disease Control and Prevention's WISE-WOMAN.
- More gender-specific guidelines have been developed, because women's symptoms and responses to medication differ from men's.
- Gender-specific medical research is up. The FDA now requires clinical trial results be reported by gender.
- Gender-specific inequalities have been identified, ensuring women receive the same level of heart treatment as men.

Learn more about National Wear Red Day® by visiting https://www.goredfor women.org.



You may have noticed that there are new **time clocks** throughout the facility. The new clocks are black and replace the red clocks that have hung on the walls for the past fifteen or so years. As we work to program them in preparation for updated software, please do **NOT** punch any buttons, other than those specifically listed in the instruction sheet over each time clock. You will be hearing more about the use the new time clocks and how to check your own punches, time record, leave balances, etc. in the coming days. Be alert for further announcements. In the mean time, should you have any questions or problems, please contact your timekeeper.

SWVMHI Established in 1887



Honoring Our Past Celebrating Our Present Cultivating Our Future



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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

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Please submit articles for the next newsletter to Cheryl Veselik by February 20, 2014.