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From the Director

Recovery

SAMHSA notes that “the adoption of recovery by behavioral health systems in recent years has signaled a dramatic shift in the expectation for positive outcomes for individuals who experience mental and/or substance use conditions. Today, when individuals with mental and/or substance use disorders seek help, they are met with the knowledge and belief that anyone can recover and/or manage their conditions successfully. The value of recovery and recovery-oriented behavioral health systems is widely accepted by states, communities, health care providers, peers, families, researchers, and advocates including the [U.S. Surgeon General](#), the [Institute of Medicine](#) (link is external), and others.”

What do we mean by Recovery, anyway?

Recovery is defined as a process of change through which individuals improve their health and wellness, live self-directed lives, and strive to reach their full potential. Recovery is built on access to evidence-based clinical treatment and recovery support services for all populations. ~ SAMHSA working definition of recovery.

Recovery from a mental illness is not the same as recovery from a cold. “Last week I had a cold and now I am recovered.” Recovery from a mental disorder is more like recovery from cancer, diabetes, or a heart condi-

tion. It is a journey.

“Recovering from a mental illness includes not only getting better, but achieving a full and satisfying life. Many people affirm that their journey to recovery has not been a straight, steady road. Rather there are ups and downs, new discoveries and setbacks. Over time, it is possible to look back and see, despite the halting progress and discouragements, how far we have really come. Each time we reach such a milestone, we see that we have recovered a piece of our lives and we draw new strength from it. The journey to recovery takes time, but positive changes can happen all along the way.” www.mentalhealthamerica.net/recovery-journey

Prevalence of mental illness

Mental illnesses are common in the United States. In 2013, there were an estimated 43.8 million adults aged 18 or older in the U.S. diagnosed with any mental illness (AMI) in the past year. This represented 18.5 percent of all U.S. adults. AMI can range in impact from no or mild impairment to significantly disabling impairment, such as in individuals with [serious mental illness](#) (SMI), defined as individuals with a mental disorder with serious functional impairment that substantially interferes with or limits one or more major life activities. In 2013, there were an estimated 10 million adults aged 18 or

older in the U.S. with SMI in the past year. This represented 4.2 percent of all U.S. adults.

The [National Survey on Drug Use and Health \(NSDUH\)](#) defines any mental illness (AMI) as:

- A mental, behavioral, or emotional disorder (excluding developmental and substance use disorders);
- Diagnosable currently or within the past year; and,
- Of sufficient duration to meet diagnostic criteria specified within the 4th edition of the *Diagnostic and Statistical Manual of Mental Disorders* (DSM-IV). (Note, these estimates of AMI do not include substance use disorders, such as drug- or alcohol-related disorders) SMI is defined as:

- A mental, behavioral, or emotional disorder (excluding developmental and substance use disorders);
- Diagnosable currently or within the past year;
- Of sufficient duration to meet diagnostic criteria specified within the 4th edition of the *Diagnostic and Statistical Manual of Mental Disorders* (DSM-IV);
- Resulting in serious functional impairment, which substantially interferes with or limits one or more major life activities.

~ Continued on page 13



Hidden

There is a cornucopia on every page in this edition, just like the one pictured here. Can you find all 15 of them?



Trust and Honesty — How Does Loyalty Fit In?



In last month's column, it was noted that Socrates was to have said, "The unexamined life is not worth living." His point was that the highest form of loyalty to others is loyalty to deeply held shared values because those values link us to our fellow human beings. They are the shared bedrock that give purpose to our lives, and make possible a personal identity as well as a group identity.

Loyalty is closely related to faithfulness, and there are certainly elements of trust and honesty implicit within the concept of loyalty. However, there are important differences. Note that SWVMHI Values include Trust and Honesty (with Compassion); however loyalty is not specifically mentioned. This is very interesting and worthy of further examination. Let

us examine some key differences that might shed some light on why Trust and Honesty are SWVMHI Values while loyalty per se is not. This can be done by examining the trustworthiness of the loyal person and the trustworthiness of the honest person.

Philosopher Dr. Daniel Fincke, notes that loyalty is a type of trustworthiness that involves being a socially reliable ally. If one can be trusted politically or socially to be supportive even to the point of risking self-harm, then that person is trustworthy to you, and this type of trustworthiness is called loyalty. To be loyal, then, is inherently to put the interests of some over others. Note however, a loyal/trustworthy person may not be very widely loyal/trustworthy. The loyal/trustworthy person may have only a few loyalties to a few close intimates and be untrustworthy to everyone else to whom they make no specific implicit or explicit commitment.

Dr. Fincke goes on to note that an ideally honest person is trustworthy not necessarily because they are motivated by any particular loyalty to a person but because they are commit-

ted to the truth—in other words, they are loyal to a value, not necessarily a person or group. The ideally honest person does not subordinate their thinking to concerns for social loyalty, but only to the pursuit and presentation of the truth. This type of person may also be a generally loyal person wherever being loyal to the value does not involve being dishonest (or breaking with any other value that ranks of higher importance than loyalty). But what is important about the person whose trustworthiness comes from commitment to honesty first and foremost is that they are reliably truthful to everyone, regardless of any affective attachments and even when being honest involves being disloyal.

At SWVMHI, it is important to be loyal to the Values that define SWVMHI and gird our exceedingly important Mission and Vision to the citizens we serve, the taxpayers who pay the bills, and to each other.

~ James Moon, Ph.D.
Psychology Supervisor

Honesty is the first chapter
in the book of wisdom.

~ Thomas Jefferson





National Adoption Month

We never outgrow the need
for **FAMILY**

This year, National Adoption Month focuses on the adoption of older youth currently in foster care — because “We Never Outgrow the Need for Family.” This theme calls attention to our nation's population of older youth in foster care who need loving, permanent families. Youth ages 15 to 18 make up 5 percent of the foster care population — 84,778 youth. Creating lifelong connections for these young people is critical in helping them prepare for successful adulthood.

Compared to their peers, many youth in foster care face higher rates of poor outcomes, such as dropping out of high school, unemployment, and homelessness. Despite these challenges, research on positive youth development confirms that children and youth have the ability

to overcome traumatic experiences and thrive in adulthood when they are connected to a strong, permanent support system. All youth need a sense of belonging; through adoption, youth are connected to a family who not only provide a sense of stability, but also help them navigate the complicated landscape of their emerging independence. These lasting connections can help youth with important life tasks such as enrolling in higher education, finding stable housing, securing employment, and establishing healthy relationships.

During National Adoption Month, prospective adoptive families can learn more about the needs of older youth and opportunities to positively guide them toward successful outcomes.

For more information, visit <https://www.childwelfare.gov/topics/adoption/nam/about/promoting/>

November is upon us, and that means the holiday season is coming full speed ahead. November holidays that you should be aware of are as follows:

- November 11 — Veterans Day
- November 25 — half day
- November 26 and 27 — Thanksgiving holiday

Non-exempt employees who are scheduled to work the holidays will automatically receive comp time in Kronos Workforce Central upon clocking in.

Exempt employees are reminded that you must first have permission to work and request comp time in advance for working on a holiday. See the Kronos article on page 7 for more information.

Clinician's Corner

RAISE as a Best Practice in the Treatment of Young People Newly Diagnosed with Schizophrenia.

RAISE stands for Recovery After an Initial Schizophrenia Episode. In 2008, the National Institute of Mental Health (NIMH) launched the (RAISE) project. RAISE is a large-scale research initiative that began with two studies examining different aspects of coordinated specialty care treatments for people who were experiencing first episode psychosis. Scientists recently confirmed prior research and demonstrated that the comprehensive menu of treatments and supports can make a ‘substantial difference’ in the lives of individuals with this serious mental illness. The research was conducted over time at 34 clinic sites and included 404 individuals who were being treated. One-half of the sites provided services “as usual,” and the remainder were trained to administer a

coordinated therapeutic approach. This approach involved psychotherapy, medication, supported employment and education, help for families, and case management. The study also confirmed prior findings that it is very important to start the coordinated treatment effort as soon as possible after a first psychotic episode.

Schizophrenia affects approximately one percent of the population and often has a profound, lifelong impact on the individual and the families. The word psychosis is used to describe conditions that affect the mind, where there has been some loss of contact with reality. While approximately 10 percent of individuals who experience psychosis do not need further treatment, the majority of those who experience hallucinations, delusions, and thought disorders will need long-term treatment. Individuals who don't receive adequate treat-

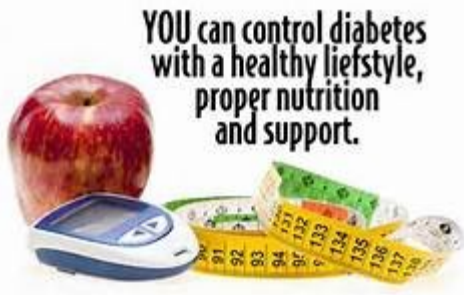
ment can become homeless, victims of crimes and violence, and become incarcerated.

The new research, if implemented across the country, could dramatically increase the chance that individuals can be in recovery and lead productive, self-directed lives in a home of their choice. Funding for the comprehensive program remains a challenge because some of the services are not reimbursed under traditional payment arrangements. However, recently federal agencies issued guidance to help states design better benefit packages that would enable the services to be reimbursed.

This study was led by John M. Kane of Nofstra North Shore-LIJ School of Medicine and will be published in the American Journal of Psychiatry.



American Diabetes Month



November is American Diabetes Month. This year’s theme is “Eat Well, America!” The vision of the American Diabetes Association is a life free of diabetes and all of its burdens. Raising awareness of this ever-growing disease is one of the main efforts behind the mission of the Association. American Diabetes Month is an important element in this effort, with programs designed to focus on the na-

tion’s attention on the issues surrounding diabetes and the many people who are impacted by the disease.

Here are just a few of the recent statistics on diabetes:

- Nearly 30 million children and adults in the United States have diabetes.
- Another 86 million Americans have prediabetes and are at risk of developing Type II diabetes.
- Recent estimates project that as many as 1 in 3 American adults will have diabetes by 2050 unless we stake steps to stop the disease.
- Every 19 seconds, someone in the U.S. is diagnosed with diabetes.

- The American Diabetes Association estimates that the total national cost of diagnosed diabetes in the United States is \$245 billion.
- Diabetes nearly doubles the risk for heart attack and for death from heart disease.
- Diabetes is the leading cause of kidney failure.

Studies have shown that eating healthy, nutritious food helps with diabetes management. For tips on planning and preparing healthy meals and managing diabetes, please visit www.diabetesforecast.org or call 1-800-DIABETES.

~www.diabetes.org

Rehab Department News



The days are growing shorter and shorter as the leaves turn ever more vivid hues of crimson, orange, and gold.

Across the facility’s campus, one can see blankets of leaves sprawling over the grass in colorful decoration. This chilly but scenic weather is inspiring those in the Rehabilitation Department to use the outer elements within our groups as motivation for change and renewal in one’s recovery journey.

The New Day Café operations remain running smoothly and successfully for all those individuals involved. The café offers a wonderful learning opportunity, as well as an autonomous awareness for those individuals working within it, while serving the rest of our SWVMHI community. Weekday morning sales continue to be offered to both the individuals we serve as well

as staff, with its hours of operation still posted at the café’s entrance.

On Friday, October 16, from 1130 until 1245 hours, the Rehabilitation Department’s “Community Integration” group’s successes sparked a Halloween sale in front of the employee cafeteria. Individuals crafted lots of beautiful, practical fall items to sell.

This month’s special event centered around the “Appalachian Woman,” highlighting those who grow up in this region of the country in all its singularity. This activity occurred on Thursday, October 22, from 1330 to 1500 hours. The gym was packed with excited individuals eager to play the many Appalachian-themed games, hear a story from two of our own — Melanie Smith and Charlotte Ball — and take part in the regional snack — potato drops and tea.

This month’s R-CERC meeting took place at Hungry Mother State Park on

Wednesday, October 21, with three individuals participating.

Last, please help the Rehabilitation Department give a warm welcome and hearty congratulations to three new hires! We are very excited to bring aboard **Jennifer Cannon** as our new Recreation Rehabilitation Specialist. Transferring from the position of Geriatric Mental Health Specialist, **Angie Anderson** joined this department as a Rehabilitation Resource Coordinator on our Geriatric Unit, and we are incredibly happy to have her as an integral part of our team. Finally, coming to us from Unit C/D, **Lindsay Baciuska** has accepted a full-time Wellness Rehabilitation Specialist position on second shift. We are absolutely thrilled to see her in her new role. The whole department is overjoyed at having new teammates to aid us in our goal of recovery-oriented care.

~ **Emily Lockhart**
Wellness Rehab Coordinator



Human Resources Corner

Prepare now for Tomorrow: Purchase of Prior Service Changes Coming in 2017

If you have considered purchasing prior service to enhance your retirement benefit, now may be the time to look more closely at that option. Newly passed legislation will change the purchasing rules beginning January 1, 2017.

Under the new provisions, the cost of purchasing prior service may increase in some cases, and the number of months eligible for purchase may be limited. If you have periods of leave or prior service to purchase, especially refunded service, you may want to compare the cost of purchasing the service now versus after the new provisions go into effect. Prior service credit counts toward the years needed to become vested, eligibility for retirement and the health insurance credit.

What This Means for You

- The cost to purchase refunded service will change. Now, active Plan 1 and Plan 2 members can purchase refunded service by paying five percent of their current compensation (four percent for Hybrid Retirement Plan members) for each month purchased.
- You can purchase service under the current purchase of service provisions through December 30, 2016.
- Effective January 1, 2017, the cost to purchase refunded service will be based on the refunded amount, plus interest (currently set at seven percent) from the date of the refund up to the date of purchase.
- After January 1, 2017, you will no longer need to purchase the most recent service first.

Key Dates

If you decide to purchase service under the current purchase of service provisions, VRS strongly recommends that you apply **no**

later than October 1, 2016. Human Resources can help you obtain an official cost letter.

If you are eligible to purchase service through a salary-reduction agreement, you must have **deductions taken for the month of December 2016, or earlier.**

If you use a **lump-sum payment** method, the full payment must arrive at VRS **no later than December 30, 2016.**

If you are considering a trustee-to-trustee transfer or rollover of funds from another retirement plan to purchase the service, it may take 90 days or longer for your plan provider to process the payment and send it to VRS. You will want to request an official cost letter as soon as possible to ensure payment arrives at VRS no later than **December 30, 2016.**

For more information:

- Check out these online key topics related to current purchase of prior service provisions: [Types of Prior Service](#); [Payment Methods](#); and [How to Apply](#); and resources such as [Quick Facts 161kb](#) and [purchase of prior service forms 88kb](#).
- Visit the [online purchase of prior service estimators](#) to estimate the costs of purchasing service under current provisions.
- Coming in late September to *myVRS*: Refunded Service Comparison Estimator. This new estimator, available when you log into your *myVRS* account, will indicate whether you have refunded service eligible for purchase and provide a comparison of the lump-sum cost to purchase now versus after January 1, 2017.

How Purchase of Prior Service Affects Your Retirement Benefits

You left your job years ago and took a refund. Now you're back in a VRS-covered

job and can purchase that service. What should you consider before deciding whether to purchase service?

- Prior service credit that you purchase counts toward the five years needed to become vested, which is the minimum length of service needed to qualify for a future retirement benefit.
- Because VRS calculates your retirement benefit in a formula using years of creditable service among other factors, more years may mean a higher retirement benefit, so purchasing prior service credit may increase your future benefit.
- Adding service to your record may allow you to qualify for retirement at an earlier date.
- Prior service credit that you purchase also counts toward eligibility for the health insurance credit, if offered by your employer.

You may be able to purchase service from previous public employment, active duty military service, an eligible period of leave or VRS refunded service as credit in your plan. [Find out if you may be eligible to purchase prior service credit.](#)

For any questions, please contact VRS, or a member of Human Resources at extension 204.



Human Resources

Hurricane Preparedness

What to do to prepare for a major storm or hurricane

Two Keys to Weather Safety Are:

1. Prepare for the risks
2. Act on those preparations.

Hurricanes are not only a concern for those whose homes are in the path of one, but for relatives and friends who may worry about those people. Sometimes we are affected by Hurricanes when we have traveled to the beach or areas close to the coast. Hurricane season is June 1st through November 30th. However, storms can come earlier than June 1st or after November 30th.

REFER TO FEMA The Federal Emergency Management Agency

Comprehensive Information On How To Prepare And Take Action: Gather Information

- Consider your options to decide if you should evacuate or not. If told to evacuate, you should. If you evacuate, have a map of your evacuation route, and, if time permits, scout it out ahead of time. Scout out alternative routes in case the main route becomes congested.
- Hurricanes normally travel slow. You should have enough time to visit your bank or go to an ATM and get enough cash to last for at least three days.

PLAN AND TAKE ACTION Pre Hurricane Plans

- Everyone needs to be prepared for the unexpected.
- Keep fully charged cell phones in the event power is interrupted.
- Fill up bathtubs with water to use for sponge baths and to flush a toilet.
- Buy bottled water.
- If possible, procure a generator to use for those who need medical machines. Keep enough fuel to run the generator for at least three days (use the generator in a well ventilated area).
- Keep enough non perishable foods to last at least three days.
- Purchase a manual can opener.
- Have flashlights that use batteries and keep a good supply of spare batteries.
- Put dry clothing and bedding in plastic bags.
- Put together a basic disaster supplies kit. This will include first aid supplies and medications that must be taken daily.

EMERGENCY PLANS Develop and document plans for your specific risks

- Protect yourself and your family with a family emergency plan.
- Be sure to plan for locations away from home.
- Pet owners should have plans to care for their animals.

- Batten down or move to another location all outside objects that could be damaged or become flying objects.
- Ensure your vehicle has a full tank of fuel and is in good and safe running condition. If you don't have a car, ask a neighbor for help.
- Make sure your schools and daycares have emergency plans.
- Gather all insurance papers and valuables and put them in waterproof bags. Store them at a high place off the floor that you think will not get wet in case of flooding.

KEEP CURRENT Stay tuned to local news and weather updates

- Have a radio or television that is battery operated.
- If power is not interrupted, stay tuned to the weather channel on the television. Make sure you know, in advance, which channels broadcast the local weather reports.

Source: Warriors4Safety.com

~ Safety Committee



Great American Smokeout



Every year on the third Thursday of November (this year on November 19), smokers across the nation take part in the

American Cancer Society Great American Smokeout. They may use the date to make a plan to quite, or plan in advance and then quit smoking that day. The Great American Smokeout event challenges people to stop using tobacco and helps people know about the many tools they can use to help them quit for good.

Research shows that smokers are most successful in kicking the habit when they have support, including stop-smoking groups, counseling, nicotine replacement products, prescription medication, and support and encouragement from family members and friends. Using two or more of these measures to quit works best.

To learn more about quitting smoking, visit your medical provider or visit www.cancer.org. Or you can also call the American Cancer Society anytime at 1-800-227-2345.

Smoking Statistics

- About 1 in 5 U.S. adults smoke cigarettes (that is more than 43.6 million people)
- Lung cancer is the leading cause of cancer death for men and women
- The risk of developing lung cancer is about 23 times higher in male smokers and 13 times higher in female smokers compared to lifelong non-smokers
- Smoking also causes cancers of the larynx, mouth, sinuses, pharynx, esophagus, and bladder.
- Smoking is responsible for nearly 1 in 5 deaths in the U.S.

Feeling gratitude and not expressing it is like wrapping a present and not giving it. ~William Arthur Ward

Kronos Workforce Questions and Answers

November, December, and January are filled with lots of holidays. For many, that means extra time off. For many others, that means working on the holiday. If you normally work a Monday through Friday schedule, you normally take the holiday as it falls. However, if you are among the staff members who must help to cover the units 24/7, that means you most likely work the holiday or the holiday falls on a scheduled day off. Both mean that you will receive comp earned.

How can I tell if I receive comp time by looking at my timecard?

If you work Monday through Friday, you'll see the name of the holiday and the number of hours (maximum is 8) that you took on the day of the holiday.

Mon 10/12	Columbus Day YR 1	8.00
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If you worked the holiday, you'll see the name of the holiday, and a 0 next to it and on the very next line, you'll see your punches and the total number of hours you worked that day.

705 7am Columbus Day ...	0.00
	14:20

To see your comp earned, you'll need to look in the bottom left corner of your timecard under "paycode totals" and you'll see comp earned 8.00.

Pay Code	Amount
OVERTIME	4.10
TOT HRS MINUS OT	59.90
Comp Earned	8.00
WORKED HRS TOT	64.00

If, however, the holiday falls on your scheduled day off, you're timecard can look a bit confusing. You'll see the name of the holiday with the number of hours next to it. On the next line, you'll see "Holiday" with a -8.00 followed by another entry of "CE on Day Off" with a 8.00.

Mon 10/12	705 7am Columbus Day ...	8.00
Mon 10/12	705 CE on Day Off	8.00
Mon 10/12	HOLIDAY	-8.00

Wait, what?? Remember, purple entries indicate a system-generated entry, so when the timekeeper needs to show that you were scheduled off that day and should receive comp earned because of it, she has to subtract out the system-generated entry and then give you your comp earned. You still receive your holiday credit, it's just an extra step for your timekeeper.

If you are an exempt employee, and work on the holiday, Policy 6004 requires that you request permission to work on the holiday in advance. The reason should be for a business purpose, and your supervisor should grant permission. In order to receive comp earned for that time, however, you must receive approval from the Director, as only the Agency Head (Director) can grant comp earned for exempt employees according to DHRM Policy 3.10, *Compensatory Leave*. That permission will then be communicated to your timekeeper for entry into Kronos Workforce.

Remember: Comp earned must be used within one year from when it is earned. The fiscal office is tracking this and will notify your supervisor and timekeeper if you are close to losing comp earned.

Questions regarding your specific time should be directed to your timekeeper or supervisor. Questions regarding your eligibility for comp earnings should be directed to a member of the Human Resources Department.

~ **Kronos Implementation Team**

Ten Tools to Live Your Life Well

The 10 Tools

These proven tools can help you feel stronger and more hopeful. **Check out each page for specific, easy-to-follow tips.**

1. [Connect with others](#)
2. [Stay positive](#)
3. [Get physically active](#)
4. [Help others](#)
5. [Get enough sleep](#)
6. [Create joy and satisfaction](#)
7. [Eat well](#)
8. [Take care of your spirit](#)
9. [Deal better with hard times](#)
10. [Get professional help if you need it](#)

~ <http://www.mentalhealthamerica.net/living-well>





Staff Development

Take advantage of Training Opportunities in November

When: 11/03, 1515 to 1615

Where: Dogwood Classroom

What: Overcoming Burnout

When: 11/17, 1515 to 1615

Where: Dogwood Classroom

What: Motivate, Recognize, & Energize Employees

When: 11/19, 1330 to 1500

Where: Dogwood Classroom

What: Dr. Gillette: Ethical Issues in Sexuality and Gender

The Back Injury Prevention CAI is due during the month of November.

Please log into the Knowledge Center and take your CAI today. Questions should be directed to any member of the Training Department.

Did You Know?

- The Pilgrim’s thanksgiving feast in 1621 occurred sometime between September 21 and November 1. It lasted three days and included 50 surviving pilgrims and approximately 90 Wampanoag Indians, including Chief Massasoit. Their menu differed from modern Thanksgiving dinners and included berries, shellfish, boiled pumpkin, and deer.
- Now a Thanksgiving dinner staple, cranberries were actually used by Native Americans to treat arrow wounds and to dye clothes.
- The Friday after Thanksgiving is called Black Friday largely because stores hope the busy shopping day will take them out of the red and into positive profits. Black Friday has been a tradition since the 1930s.
- Thanksgiving football games began with Yale versus Princeton in 1876.



~ <http://facts.randomhistory.com/thanksgiving-facts.html>

Flu Vaccines

Have you received your flu shot yet? If not, it isn’t too late. Please contact Cindy Jones today to find out when and where it is available.

If you would rather, you can also receive your flu shot at the Health Department, your doctor’s office, or your local pharmacy — just be sure to bring proof of your vaccination to Cindy Jones so you receive your “15” for your name badge.

If you chose not to take the flu shot, you must complete the declination form and send it to Cindy Jones as soon as possible.

For more information contact Cindy Jones at Ext 231 today.

15

November Lunar Phases

November 3

Last Quarter Moon

November 12

New Moon

November 19

First Quarter Moon

November 25

Full Moon, also called “Beaver Moon” by Native Americans of New England and the Great Lakes because at this time of year those little beavers are industriously preparing for winter.



Welcome Aboard!

Please welcome the newest additions to the SWVMHI team!



Left to right: Glenna Dickerson, Tonya Dotson, Lisa Parrish, Jennifer Cannon, and David Peterson

Glenna Dickerson is a lifetime learner. She also loves to read and hike. Glenna graduated from Chilhowie High School, Virginia Highlands Community College with an Associate of Science Degree in General Studies, and from Radford University with a Bachelor of Science in Psychology. Glenna lives in Rural Retreat, Virginia. She has worked at Wal-Mart, McDonalds, Austin Grill, and Walgreens. Glenna will be working full time in Food Services.

Tonya Dotson just moved back to Virginia after living in Washington State for 16

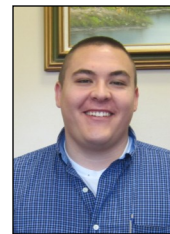
years. She and her husband have a 15 year old daughter and a 5 year old son. Tonya has been a Registered Nurse for 18 years. She grew up in Rural Retreat, and graduated from Rural Retreat High School. Currently, Tonya and her family live in Speedwell. She formerly worked at Johnston Memorial Hospital in Abingdon, and Carrington Place of Rural Retreat. Tonya will be working full-time on Ward F on night shift. Halloween is her favorite holiday and she loves candy and sweets.

Lisa Parrish has been a CNA for eight years. She is married and has a young son and they all live in Marion. In the past, Lisa worked at Valley Health Care Center in Chilhowie, and Carrington Place of Rural Retreat. Lisa will be a full time float psychiatric aide on dayshift.

Jennifer Cannon will be working full time in Rehab Services. She is married with four children, including a son, a daughter, and identical twin girls. Jennifer and her family live in Chilhowie, where she graduated from Chilhowie High School. Jennifer worked at Marion Middle School for 14 years as an aide in a self contained classroom for multi-handicapped youth. She is a Girl Scout Troop Leader who loves the outdoors and

being with her family, including her two dogs.

David Peterson currently works full time at St Albans in Radford, Virginia, and will be working part time as a security officer for SWVMHI. He has three children and one granddaughter. David graduated from Pulaski County High School. David splits his home life in Pulaski and Saltville. David also worked for the Virginia Department of Corrections in Bland, Virginia.



William "Billy" Wyatt is a new full time security officer. He is married and lives in Chilhowie, Virginia, and enjoys hunting, shooting, and cars. He graduated from North-

wood High School, Virginia Highlands Community College, and the Virginia State Police Academy. Billy worked at Hardees, and then worked as a Virginia State Trooper before joining SWVMHI as a security officer.

Please give our newest employees a warm welcome to the SWVMHI family.

~ Training Department

Recovery Hero

A Spotlight on Our Employees Using TOVA Skills and Assisting People with Their Recovery

This month's Recovery Heroes are the ERS staff. During the month of September, ERS implemented a new treatment team on Ward I, with the opening of 9 additional beds. The implementation of the Ward I Treatment Team resulted in 17 internal moves of individuals, as well as 10 transfers of individuals from the Admission Unit.



Staff did a great job working together as a team to ensure that the process of moving individuals went smoothly during this time of transition. They also did an excellent job in communicating changes to the individuals on all three wards and welcoming those individuals transferred from the Admission Unit.

It took a lot of extra work for the staff to accomplish these moves in order to open the additional beds. Due to the staffs' dedication, we were able to open them with success.

ERS staff are an asset to the facility, and their dedication to teamwork and recovery is greatly appreciated.

~ Angela Routh, RNC, BSN
Unit Nurse Coordinator, ERS





PERSONNEL CHANGES*

New Employees

William "Billy" Wyatt, Security Officer	Oct 5
Glenna Dickerson, Food Service Technician	Oct 10
Jennifer Cannon, Recreation Rehabilitation Specialist	Oct 10
Tonya Dotson, Registered Nurse	Oct 10
Lisa Parrish, P14 Psychiatric Aide	Oct 10
David Peterson, P14 Security Officer	Oct 13
Tangie Rose, Registered Nurse	Oct 25

MONTHLY PATIENT CENSUS

September
2015

Admissions 74
Discharges 83
Passes 15
Average Daily
Census
158

Promotions/Role Changes

Constance Owens, P14 to Full Time Housekeeping Worker	Oct 25
Katerina Vidili, Promoted to RNCA	Oct 25
Lindsay Baciuska, Promoted to Wellness Rehab Specialist	Oct 25
Ava Mitchell, Promoted to Team Nurse	Oct 25
Angie Anderson, Transfer to Rehab Resource Coordinator	Oct 25

*As we express our gratitude,
we must never forget that the
highest appreciation is not to
utter words, but to live by them.*

~ John F. Kennedy

* As of the time the newsletter was printed for distribution

Special Gym/Game Room Activities

Consumer Empowerment
Recovery Council (CERC)

NO MEETING IN
November



Patient Activity Council
(PAC)

NO MEETING IN
November



Movie Nights

Nov. 2, 3, 9, 10, 16, and
17, 2015
1830 - 2000

Birthday Party

November 24, 2015
1830- 2000
No Café



Bristol Senior Show Choir

November 19, 2015
1330 to 1500



Church Services

held each Thursday from
1830 - 1930. New Day
Café open prior to
Church Services

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



REMINDER: Daylight savings time ends at 0200 on November 1, 2015. Remember to set your clock **BACK** one hour before you go to bed.

For those of you who work third shift that night and work the entire shift, you may receive one hour of over-time. This is contingent on your working your entire schedule prior to the time change, without any time off that week. If you had time off, that extra hour will show up on your timecard as comp earned. Please see your timekeeper or supervisor if you have any questions.

November Days to Celebrate

“Off the cuff” November holidays to celebrate:

November 3

Sandwich Day



November 6

National Nachos Day

November 11

Origami Day

November 16

National Button Day



November 21

World Hello Day

November 23

National Espresso Day

November 29

Square Dancing Day



Chaplain's Corner



Earlier this month I attended the National Storytelling Festival in Jonesborough, Tennessee. People from all over the country gathered to celebrate the time honored art of storytelling. The weekend was filled with gifted people sharing personal stories from the past, ancient myths, funny recollections, animal tales, spiritual insights, and a variety of performance story venues.

I suppose I have always been drawn to stories because they are the essence of our spiritual traditions and family memories. Our therapeutic storytelling groups have developed a growing interest among individuals on our wards as we explore the Recovery secrets of traditional folk tales, musical lyrics, and humor on a weekly basis. The insights we gain from imagining past adventures, fantasy characters, and hidden truths can illuminate all our lives with insight

and encourage a sense of hope within each of us.

There is a famous Jewish legend that recounts the heroic deeds of the great Rabbi Bal Shem Tov. When this Rabbi was alive and sensed disaster approaching his people, he would go to a certain part of the forest, make a special fire, chant a certain prayer, and invoke a saving miracle from God.

In the next generation, during a time of danger, the Rabbi's disciple went to the forest, said the right prayer, but didn't know how to make the special fire. God heard the prayer from the sacred place and that was sufficient.

In the next generation, the succeeding Rabbi attempted to deliver his people from danger, didn't know the specific prayer, couldn't make the proper fire, but did know how to find the special place in the forest, and that was sufficient for God to bring about a miracle.

In the next generation, the rabbi didn't know the prayer, couldn't light the proper fire, and did not know the correct spot in the forest. He cried out to God. "I don't know where to go, what prayer to say, or what kind of fire to light. All I can

do is tell the story about it."

That desire to tell the story was sufficient for God to create a miracle because it is said that people live through stories and God made people because God loves stories. (Adapted from *The Power of Personal Storytelling*, J. Maguire, p.37-38.)

As we approach the holiday season, we will all have a renewed opportunity to tell stories of the past and make some new stories for the future.

Isak Dinesen once said, "To be a person is to have a story to tell." How we frame our stories can reframe our lives by emphasizing our strengths, forgiving our blunders, and finding life lessons in our experience.

Happy Thanksgiving to you and your family.



May you have stories to tell, memories to recall, and opportunities to smile.

~ Timothy Graham, D. Min.
Chaplain

Advance Medical Directives

An Advance Directive (AD) is a document that allows you to give directions about your health care instructions and preferences for a time in the future when you may be unable to make informed decisions about your care because of injury or illness.

With an AD, you have three different ways that you can take control of your future

health care: 1. You can choose someone to carry out your wishes and/or make health care decisions for you. This person is called your agent. OR 2. You can write down specific instructions or preferences about the health care you would like, and the health care you refuse. OR 3. You can do BOTH.

An AD can be used to cover any or all of these types of health care:

- Medical Health Care
- Mental Health Care
- End-of-life Care

See more information at:

www.virginiaadvancedirectives.org

You can store this important tool online at: www.virginiaregistry.org.

The Appalachian Woman

On Thursday, October 22, 2015, a cultural enrichment program entitled “The Appalachian Woman” was presented to individuals we serve and staff in the gym.

Sue Riley led the event with an introduction concerning the importance of our cultural heritage and its influence on our current way of life.



This was followed by a reenactment by Leiann Smith as a Appalachian woman who spoke about her life and

experience in Appalachia. Leiann was dressed in an ankle length dress depicting the attire that a woman from the mountains would have worn in past generations. Leiann gave the audience an opportunity to ask questions and add their own insights.

This open ended forum covered many topics from the status and role of Appalachian women, to the cultural history of Southwest Virginia.

Melanie Smith, Dr. Tim Graham, and Sue Riley acted and shared in the telling of an Appalachian tale about a woman’s misadventures of picking a green gourd off the vine too soon. Many of the individuals we serve took part in the interac-

tive portions of the story with rumbles and screams that added comedic sound effects to the story.

When the presentations were concluded, individuals had the opportunity to play games such as Appalachian mountain trivia, bucket bean bag toss, and Appalachian alphabet. The afternoon ended with the serving of an Appalachian themed snack we called “potato drops” and iced tea.

There were a total of 68 individuals who participated in the event and the afternoon was an enjoyable experience for everyone.

~ Jan Barrom

From the Director, continued

Who Can Recover?

In our wisdom, we cannot know if the individual diagnosed with schizophrenia we see today is one of the 10 percent who will not need further treatment, or is one of the individuals who will need services and supports for some time to come.

We do know that a person who is experiencing symptom can be in recovery. A person who is receiving services can be in recovery too, just like the individual who is diabetic!

Think of the actor Christopher Reeve, who played Superman in four films beginning in 1978. In 1995, Reeve became a quadriplegic after being thrown from a horse. He required a wheelchair and a portable ventilator for the rest of his life. He lobbied on

behalf of people with [spinal-cord injuries](#) and for human embryonic [stem cell research](#), founding the [Christopher Reeve Foundation](#) and co-founding the Reeve-Irvine Research Center.



Known the world over as Superman, he served as a symbol of strength, the force of good, with the ability to fly and soar over the problems of man. After his accident, Reeve was not ever cured from his

injuries but he lived his life as an example of Recovery. Reeve learned to live outside his body in a way that few people have the strength or courage to do.

All of us are, in some ways, prisoners in life -- some by limited thinking, others by mental illness or addiction, others by physical limitation. But rarely has a man demonstrated such a wonderful ability to face limitation, to cry for all that it robbed him of, and then step beyond it into a life that knows no limitation. We do know that a person who is experiencing symptom can be in recovery. A person who is receiving services can be in recovery too, just like the individual who is diabetic!

~ Cynthia McClaskey, Ph.D.
Director



Word Search



Just for fun, how many of the following words can you find related to Thanksgiving?

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

DID YOU KNOW? Americans eat 46 million turkeys each Thanksgiving.

corn

cranberries

family

feast

football

gravy

green beans

harvest

mashed potatoes

November

parade

pilgrims

pumpkin pie

squash

stuffing

Thanksgiving

Thursday

travel

turkey

Wampanoag Indians





**Southwestern Virginia
Mental Health Institute**

**Address: 340 Bagley Circle
Marion, Virginia 24354**
Phone: 276-783-1200
Fax: 276-783-9712

Comments, Suggestions or Ideas?

SHARE THEM!

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



This Month's Word Search Answer Key

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

Please submit articles for the next newsletter to Cheryl Veselik by November 20, 2015.

The next newsletter will be published December 1, 2015.