



"People helping people help themselves."

Division of Mental Health and Addictions

Logansport State Hospital

The Spectrum

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Vol. 18, No. 10
October
2008

Employee of the Month



Picture by: Marjorie Potts

November EOM: Erica Deeter (L) is congratulated by Environmental Services Director Clarence Bir (R).

Erica Deeter,
Housekeeper
November EOM

As patrons of the Lynch Building, we would like to exuberantly nominate Erica Deeter, Housekeeper, for Employee of the Month. Erica's hard work and determination reflects in her daily work efforts. Ms.

Deeter goes above and beyond her required housekeeping duties to ensure every area she is assigned (plus) is clean, washed, dusted, fluffed, and if necessary polished for all staff and their offices. Our hallways, bathrooms, classrooms, cubbie holes and dining areas are always in tip top shape. No job, big or small, is a match for Erica. No ladder, floor, light fixture, window seal, refrigerator, trash receptacle, or office equipment is safe from Ms. Clean in our neighborhood. You can count on her to take the extra time to accomplish a task and help in any way possible. If you need anything moved or cleaned, you better plan ahead because before you know it, she's already taken care of it.

Ms. Deeter is currently the co-chairperson for the Morale Booster Committee and gives the same energy and enthusiasm to be involved in extra activities to help benefit all LSH staff. Chairperson of the Morale Boosters, Darrin Monroe stated, "She always gives that extra something, whatever it is, to make sure everyone is set up, prepared, and ready to go no matter what event is taking place to help ensure the quality that we give back to the employees at the hospital. I am proud to have her by my side helping the Morale Boosters Committee with the many decisions and events that take place for all employees. She is truly dedicated and puts her heart into what she does. Thanks, Erica, you make a difference."

EOM continued on page 3...

Nominate Someone Today!



SPYKE THE PSYCHE



OCD Obsessive Compulsive Disorder

The Quick Reference to the diagnostic criteria from DSM-IV-TR (2000) states six characteristics of obsessions and compulsions:

Obsessions

1. Recurrent and persistent thoughts, impulses, or images that are experienced as intrusive and inappropriate and that cause marked anxiety or distress.
2. The thoughts, impulses, or images are not simply excessive worries about real-life problems.
3. The person attempts to ignore or suppress such thoughts, impulses, or images, or to neutralize them with some other thought or action.
4. The person recognizes that the obsessional thoughts, impulses, or images are a product of his or her own mind, and are not based in reality.

Compulsions

1. Repetitive behaviors or mental acts that the person feels driven to perform in response to an obsession, or according to rules that must be applied rigidly.
2. The behaviors or mental acts are aimed at preventing or reducing distress or preventing some dreaded event or situation; however, these behaviors or mental acts are not actually connected to the issue, or they are excessive.

In addition to these criteria, at some point during the course of the disorder, the individual must realize that his/her obsessions or compulsions are unreasonable or excessive. Moreover, the obsessions or compulsions must be time-consuming (taking up more than one hour per day), cause distress, or cause impairment in social, occupational, or school functioning. OCD often causes feelings similar to those of depression.



SPECTRUM

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Symptoms and prevalence

Obsessive Compulsive Disorder manifests in a variety of forms. Studies show that many individuals with the disorder may not be diagnosed. The fact that many individuals do not seek treatment may be due in part to stigma associated with OCD. Another reason for not seeking treatment is because many sufferers do not realize that they have the condition.

The typical OCD sufferer performs tasks (or compulsions) to seek relief from obsession-related anxiety. To others, these tasks may appear odd and unnecessary. But for the sufferer, such tasks can feel critically important, and must be performed.

Obsessive Compulsive Disorder is often confused with the separate condition Obsessive-Compulsive Personality Disorder. The two are not the same condition, however. OCD is *ego dystonic*, meaning that the disorder is incompatible with the sufferer's self-concept. Because disorders that are ego dystonic go against an individual's perception of his/herself, they tend to cause much distress. OCPD, on the other hand, is *ego syntonik* — marked by the individual's acceptance that the characteristics displayed as a result of this disorder are compatible with their self-image. Ego syntonik disorders understandably cause no distress. Persons suffering from Obsessive Compulsive Disorder are often aware that their behavior is not rational and are unhappy about their obsessions but nevertheless feel compelled by them. Persons with OCPD are not aware of anything abnormal about themselves; they will readily explain why their actions are rational, and it is usually impossible to convince them otherwise. Persons with Obsessive Compulsive Disorder are ridden with anxiety; persons who suffer from Obsessive Compulsive Personality Disorder, by contrast, tend to derive pleasure from their obsessions or compulsions. This is a significant difference between these disorders.

Resource: Wikipedia, the free encyclopedia provides numerous references and resources for learning more.

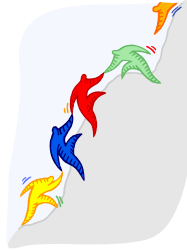
...EOM continued from cover (page 1).

If baking was a performance indicator, Erica would be OUTSTANDING. Several times she has taken her own time and brought in baked items for staff that have had special occasions to lift our spirits or just to put a smile on our faces. *Submitted by Cindy Bruce, Jani Foreman and Darrin Monroe.*

Endorsement by Deb Horner: "I strongly agree with everything that has been stated. Erica is very flexible, and can accomplish every task asked to do. She even volunteers, if no one else wants to do a job. She is back-up for many jobs in the housekeeping department. I sure wish I could clone her!"

Mental Health Awareness Week Celebrated at Logansport State Hospital October 5-11, 2008

Celebrating 18 years of raising awareness through information and outreach



Established by Congress and now in its 18th year, MIAW takes place the first week of October each year, and recognizes nation wide efforts to raise mental illness awareness through outreach programs, promote early detection and accurate diagnosis of, and reduce the stigma associated with mental illness. LSH employees are encouraged to fight stigma associated with mental health.

Ten things we can do to fight stigma:

1. Learn more about mental illness
2. Listen to people who have experienced mental illness
3. Watch your language
4. Monitor media and report stigmatizing material
5. Respond to stigmatizing material in the media
6. Speak up about stigma
7. Talk open about mental illness
8. Demand change from your elected representatives
9. Provide support for organizations that fight stigma
10. Contribute to research related to mental illness and stigma

For more information on what you can do to fight stigma, please contact Community Services at ext. 3708.

THANK YOU!

Thanks to all of the LSH employees that participated in SECC (State Employees Community Campaign) 2008! Together, employees were able to raise over \$20,000 for charities of their choice! Almost 300 employees of Logansport State Hospital, made donations! The campaign kicked off on September 2nd in the Administration Lobby.

“There is more than Corn in Indiana” was the theme. Several employees stopped by to learn more about SECC and to also enjoy free refreshments that were donated by local businesses for this worthy cause.

LSH employees also had the chance to play “Corn Hole” and “Guess how much Corn in the Jar” games. The winner of the guessing game got to pick where the money raised by the days activities, went to. This year, the winner was Jamie Dubuois. Congratulations to Jamie for guessing the closest and *Riley Hospital for Children* thanks you too!

The hospital wide contest to see what department/building would raise the most (by percentage) money was the LYNCH BUILDING! Congratulations to those employees! They are getting a pizza party because of their worthy contributions! Last year IRTC won! Who will it be next year! Thanks again for a great year and campaign! SECC 2008 concluded on September 26th, 2008.

See you all next year!



Picture taken by: Shadi Lilly

pictured is Ed Cramer, psychiatric attendant supervisor JETC, trying to decide how much corn is there???

Breast Cancer Awareness Month

October is designated as Breast Cancer Awareness Month. Based on rates from 2003-2005, approximately 12% (or 1 out of 8) women born today will be diagnosed with cancer of the breast at some time during their lifetime. That means if you look at your family and friends, one of those eight women may be diagnosed, or it may be you. That is what makes breast cancer awareness so vitally important to everyone.

The biology of cancer: Every day, the cells in our body divide, grow and die. Most of the time they do this as they were designed, but sometimes cells grow out of control and cause a mass or lump, which is called a tumor. Tumors are either *benign* or *malignant*, with the benign tumors being non-cancerous, but if left untreated can pose a health risk, and the malignant tumor cells are abnormal cells that can invade nearby tissue, which become cancer.

What affects your risk of getting breast cancer?

The causes of breast cancer are not fully known. However, researchers have identified a number of factors that increase one's chances of getting breast cancer (risk factors). Risk factors are not necessarily causes of breast cancer, but are associated with an increased chance of getting breast cancer. Some women have many risk factors but never get breast cancer. Some women have few or no risk factors but do get the disease. Being a woman is the number one risk factor for breast cancer. There are some risk factors you can control, and others you cannot. Remember, even if you do not have any of these risk factors, you can still develop breast cancer.

Myths

- I'm only 35. Breast cancer happens only in older women.
- Women with a family history of breast cancer typically get breast cancer.
- If I don't have a mutated BRCA1 or BRCA2 gene, I won't get breast cancer.
- Women with more than one risk factor typically get breast cancer.
- You can prevent breast cancer.
- If I had a mammogram every year, I would be exposed to too much radiation, and that would cause cancer.
- Breastfeeding can increase my risk of breast cancer.
1 American Cancer Society, Breast Cancer Facts & Figures 2007-2008.
2 American College of Radiology,
www.radiologyinfo.org/content/mammogram.htm/.

Facts

- While the risk of breast cancer increases with age, all women are at risk for getting breast cancer.

Actually, most women who get breast cancer have no family history of the disease. However, a woman whose mother, sister or daughter had breast cancer has an increased risk. Having a male relative with breast cancer, although rare, can also increase your risk.

- Just because you do not have a mutated BRCA1 or BRCA2 gene, you can still get breast cancer. About 90 to 95 percent of women who get breast cancer actually do not have an inherited form of breast cancer, or a mutated BRCA1 or BRCA2 gene.¹
- Most women diagnosed with breast cancer have no known risk factors except being a woman and getting older.
- All women are at risk.
- Because the causes of breast cancer are not yet fully known, there is no way to absolutely prevent it.
- However, the drugs tamoxifen or raloxifene can help reduce the risk.
- The small level of radiation from mammograms is believed to be safe, with the benefits outweighing the risks.²
- Breastfeeding may decrease a woman's risk of getting pre-menopausal breast cancer.

Breast cancer screening methods

Breast self-exam (BSE) — Is a tool that may help you learn what is normal for you. BSE includes looking at and feeling your breasts. Many women have a pattern of lumpiness in their breasts, which is normal. But if you feel any change or a new lump in your breasts or underarms, ask your doctor to examine the area. (Step-by-step BSE instructions, at www.komen.org/bse.)

Clinical breast exam — A breast exam by a health care provider should be part of your regular medical checkup. If it is not, ask for it. A clinical breast exam includes a visual examination and carefully feeling the entire breast and underarm area. If you are 40 or older, schedule your mammogram close to the time of your clinical breast exam.

Mammogram — A mammogram is an X-ray picture of the breast. It is done with a special X-ray machine designed for this purpose. The picture is stored on film (standard) or into a computer (digital). A mammogram can find many cancers before they can be felt.

Trouble signs that should not be ignored

Be aware of possible problems in your breast or underarm area.

- lumps, hard knot or thickening in any part of the breast
- swelling, warmth, redness or darkening that does not go away
- change in the size or shape of your breast
- dimpling or puckering of the skin of your breast
- itchy, scaly sore or rash on the nipple
- pulling in of your nipple or other parts of the breast
- nipple discharge that starts suddenly
- new pain in one spot that does not go away

If you notice any of the above signs, make an appointment with your health care provider right away.

Resources

Susan G. Komen for the Cure - 1-877 GO KOMEN - www.komen.org

National Cancer Institute's Cancer Information Service - 1-800-4 CANCER - www.cancer.gov

American Cancer Society - 1-800-ACS-2345 - www.cancer.org

Arts-'n-facts

Longcliff Museum Art-'n-facts

OPEN DOOR POLICY

OPEN DOOR POLICY—It was a big event in the lives of the patients of ward four, a female ward, at the Logansport State Hospital when Dr. Sylvia Cheng, ward physician, right, unlocked the ward door for the first time, enabling the patients to come and go as they wish within hospital limits. Psychiatrists have found that the “open door policy” in state hospitals speeds the recovery of patients. There are now eight open wards at Longcliff.

Logansport Tribune-Press (11/9/1958)



September Summer Finale'

On September 12th, The Rehab Department hosted their annual Summer Finale'. The event was held indoors for the first time as Mother Nature did not cooperate and brought on the rains. The event was a hit nevertheless as around 200 patients and staff visited the Fogel building for an afternoon of fun games, food, prizes, and pictures. Patients received tickets for the booths they participated in and were able to exchange these for food and prizes. The booths included the Price Game put on by our canteen staff, toss games by Larson, Dodds, SW, Staff Development and Community Services, the Wii game by central rehab, Larson 2N had a popular water gun game, JETC helped the patients make greeting cards and SWS had face tattoos. Patients got their pictures taken behind the huge COLTS inflatable and Joe White was here to make his very creative balloons. Music was provided by Bob Wandrei.

Big thanks to all the departments who assisted in this event to make it a special day for our patients. We look forward to this being an even bigger event next year!



Christmas Gift Lift

Community Services is seeking help with this year's Christmas Gift Lift. We are seeking individuals to sponsor a patient or to donate items. Needed items are as follows: Christmas Cards, Extra Large Clothing (XL—4XL), Games, Phone Cards, Walkmans, Batteries, Wallets, Purses, Hygiene Items, Cosmetics, Word Search Books, Puzzles, Art Supplies, Stationery & Pens, Calendars, Candy & Gum (Sugar Free and Regular), and more....

Call Shadi Lilly @ ext. 3708 or Chris Taylor @ ext.3709 with questions or for a complete list of needed items.■

Promotions / Position Changes

Prissilla DeFord - Full time in Dietary
Larry W. Smith - Full time Driver
Stuart D. Rose - LAN Administrator Int.
Joanne M. Decker - Nurse 4
Jay C. Zuehl - Social Service Specialist
Brittany L. Hudson - P.A. 5
Justin D. Hall - DON Secretary
Vicky L. Hinkle - Housekeeper Supervisor
Samuel L. Pankow - PT Driver
Stephannie S. Hartleroad - Full time in Dietary
Joe Remaly S. A.
Joe Martin - P. A. 5
Chris Christian - Housekeeper 4
Tim Ehase - Housekeeper 4
Jani Foreman - Staff Development Secretary
Deb Marciniak - Food Service Supervisor 5
Darrin Monroe - Information Specialist 4
Maureen Guimont - Personnel Officer 2
Janita Burkhardt - Personnel Officer 5

A graphic featuring a yellow spotlight beam shining from the top left onto a red background. The text "Spotlight ON PSYCHOLOGY Department" is written in a stylized, black, serif font within the beam.

Spotlight ON PSYCHOLOGY Department



LSH Psychology Staff L-R: Dawn Graham, Judy Gilbert, Tim Templin, Michael Gray, Dr. Gayle Iwamasa, John Craig, Dikki Isaacs, Robert Balz, Jim Bibby, Jean Wandrei, and Claudia Kelly. Not pictured: Brett Hurm, Kelly Kearns, Nancy Maxwell, Dr. Mary Ann Nusbaum, Heather Wells, Michael Jones, Mark McClellan, Drew Miller, and Laura Suhr.

Department of Psychology at Logansport State Hospital: Growing and Moving Forward

In a previous issue, we introduced you to Dr. Gayle Iwamasa, the new Psychology Director at LSH. In this article, we would like to introduce you to the entire Psychology Department, who were asked to provide a brief paragraph on themselves. First, we would like to share with you the department's new Mission Statement, Vision Statement and Values:

Psychology Mission Statement:

The mission of the Logansport State Hospital Psychology Department is to provide the delivery of empirically supported psychological assessment, diagnosis, and treatment in order to reintegrate patients into community settings in the least restrictive environment.

Psychology Vision Statement:

The Department of Psychology at Logansport State Hospital is dedicated to providing the highest quality of psychological services utilizing state of the art knowledge and skills, while upholding the highest professional standards.

Psychology Values:

- Ethical and compassionate treatment
- Honesty and Integrity
- Diagnostic practices consistent with modern and ethical considerations
- Consultation with other disciplines
- Accurate and evidence-based assessment and treatment
- Holistic Model of Mental Health
- Expert and knowledgeable in psychological science and practice

The Department consists of Psychologists, Behavior Clinicians, and Practicum Students.

Psychologists--These individuals have a doctoral degree and advanced education and training in psychological assessment, diagnosis, treatment, and prevention of psychological disorders. They are trained to conduct individual, group, family and couples therapy. They also have experience with psychoeducation. They are licensed and are able to supervise psychology students and Behavior Clinicians. Licensed Psychologists are required to attend continuing education workshops to maintain their licenses and are involved with the state, national and international psychological and interdisciplinary organizations that focus on mental health. They are an integral part of each Service Lines' Treatment Teams and provide psychological consultation and expertise to other LSH staff.

Behavior Clinicians--These individuals have Master degrees in Psychology or a related field. They have advanced education and training in psychological assessment, diagnosis, and treatment. Many have experience working with a wide variety of populations. BC's provide group, individual and family therapy to patients and also serve as Case Managers for several patients on their units. They are an integral part of their units' treatment teams and provide the team with suggestions for the mental health treatment of patients.

Practicum Students--These individuals are in graduate programs in Clinical Psychology from various universities. They are advanced students, having already obtained their master's degrees in Psychology. They have advanced education and training in psychological assessment, diagnosis, and treatment. However, unlike BC's who are LSH employees, practicum students are at LSH for additional advanced training and education and are supervised by Psychologists.

Perhaps the most important member of the Psychology Department is Dikki Isaacs, who serves as the Department Secretary, providing much needed assistance with record keeping, purchasing, word processing, and meeting minute-taking, among many other duties.

Bios were self submitted by Psychology Staff :



Dikki Isaacs--Secretary 4, has enjoyed working at LSH for over 19 years. She currently is the secretary for two busy departments, Psychology and Social Services.

Gayle Y. Iwamasa--Ph.D., HSPP, is the Director of Psychology. She received her Ph.D. in Clinical Psychology from Purdue University and completed a post-doctoral clinical and research fellowship at the University of California, San Francisco, School of Medicine, Department of Psychiatry. Prior to her position as Psychology Director, she spent 16 years as a college professor. Dr. Iwamasa has extensive experience in the education, supervision and training of clinical and counseling psychologists, as well as in research and evidence-based psychological treatment.



Jim Bibby--M.S. (Master of Science) in Clinical Psychology, Purdue University, 1972. Location of work: C L Williams and Larson One East. I have been at LSH for almost 13 years. In that time I was a service line manager for 5 years and for the last 7.5 years have worked as a Behavior Clinician on CLW and L1E. Before coming to LSH, I worked as an outpatient therapist in Eastern Ohio for a couple years and then as program developer and agency CEO at an Indiana CMHC, and as CEO of an Indiana Community MR/DD agency from 1973 to 1996. I particularly enjoy working hands -on with the patients here and have become more of a clinical technician over the years. I am reasonably competent in individual and group therapy and do formal psychological assessments for intelligence and personality function. I generally conceptualize mental functioning from a social learning point of view interacting with a biological perspective.

Dawn Graham--MA in Applied Behavioral Science: Counseling from Valparaiso University (1999), PhD in Counseling Psychology Purdue University (in progress), Jayne English Treatment Center-East. I work primarily from a cognitive behavioral approach. In addition, I add in existential and systems theories when applicable. I work primarily with the MR/DD population. My specializations include cross cultural psychology, health psychology, stress management, creative therapies and a newly developing interest in forensics. Experiences have included hospitals, community mental health centers, schools, administration, and university counseling centers. I have a passion for the practice and science of psychology and strive to utilize a humanistic, hands-on approach to the patients I treat.





Judy E. Gilbert--BC III @ Larson 2 North (Sexual Responsibility Program) M.S. – Clinical Psychology, Licenses – LMHC, LSW, LMFT. Judy has worked with the Sexual Responsibility Program in some fashion since its beginning in 1993 and worked with offenders prior to that time. She does cognitive-behavioral treatment with the sex offender population with a goal of both a safer community and more productive lives for current clients.

Michael A. Gray--My B.S. in Psychology is from Purdue University. My M.S. in Education is also from Purdue and emphasized counseling and clinical psychology with a strong psychological assessment background. I have completed all the requirements for the Ph.D. except the dissertation. BC- 3 LMHC. I also hold licenses as a LMFT, LMHC, and LCSW. I currently work on Southworth Treatment Center, helping teach skills such as interpersonal, anger management, stress management, use of humor in daily life, and coping skills for anxiety and depression. Humor in daily life is also discussed in a special group for this. I have enjoyed working with the people at this hospital for the past 36 years. My main interest is working with people who appear low functioning behaviorally, but show the potential to function much higher. Many of the groups I hold are in a psychoeducational format, which frequently leads into a process group if one or two of the members have issues to deal with.



John Craig--With over 35 years experience in corrections, addictions and university instruction, John has been at IRTC since 1994 and specializes in teaching Legal Ed II and Psychology Education (MICA-1). John has a B.S. in Criminology and Psychology, and M.S. and Ed.S degrees in Counseling and Psychological Testing.

Kelly A. Kearns--Psy.D. is a new staff psychologist at Logansport State Hospital. She obtained her doctorate in clinical psychology from The Chicago School of Professional Psychology in 2007. Dr. Kearns completed an internship at Henry Ford Hospital in 2007, with specialized training in neuropsychology and consultation/liaison psychology. Subsequently, she completed a postdoctoral fellowship in geropsychology at the VA Pittsburgh Healthcare System in 2008. Clinical interests include: psychological and neuropsychological assessment of older adults, assessment of decision-making capacity, group psychotherapy, and memory skills training.





Claudia Kelly--I work on Larson 1 South with male patients who have been transferred from other treatment centers due to their aggression and noncompliance. I love animals and have 2 dogs and 6 cats. Given my intense interest in current events in the United States and elsewhere in the world, I frequently watch the cable news channels when at home.

Nancy Maxwell--BA Indiana University Bloomington in Criminal Justice and Sociology, MS University of St Francis in Psychology, Post Grad training in clinical psychology, Certificate in Computer Programming from IVY TECH, Training in Computer Maintenance and Microsoft Programming, Alzheimer's/Dementia Certification, SMQT Certified by CMS as Surveyor, DBT Training, Advanced Autism Spectrum Disorders Training.



Dr. Mary Ann Nusbaum--Psychologist.

Timothy J. Templin--An employee of Logansport State Hospital for six years, I am currently assigned to the Isaac Ray Treatment Center. I teach legal education to patients who have been determined to be incompetent to stand trial. Also, I work on the 2 West unit developing plans to resolve serious behavioral problems. I am a graduate of John Jay College of Criminal Justice (Forensic Psychology) and the University of Indianapolis (Clinical Psychology).



Jean Wandrei--Behavioral Clinician, IRTC.



Robert Balz--MA, Forensic Psychology. I came from the correctional system where mental health problems were running rampant, and since I have a love for psychology and the correctional system, I thought that Logansport State Hospital was the next step in my career. I came to Isaac Ray very excited to work with the patients and confident that I will be able to make a difference in their lives. My approach is to treat the patients as individuals, and when they respond positively to my enthusiasm is when, I will know that I am going to start being an effective as a Behavioral

Clinician.

Heather Wells--BA in Psychology and MS in Educational Psychology. Current location: DODD. As I work with patients suffering from mental health issues, I like to remember that at any time this could be me or my loved one. No one asks to have mental health problems. I strive to treat everyone with dignity and respect as I help them to have the highest quality of life they are capable of.



Brett Hurm--Counseling Psychology Doctoral Candidate at Purdue University with an M.S. degree from Indiana University School of Education I am currently located on the Dodds Treatment Center: One East and Two West I have extensive experience with individuals in various settings, including hospitals, schools, universities, community mental health centers, and day treatment programs. I work from a scientist-practitioner model and practice primarily using a cognitive-behavioral approach with a focus on the interpersonal dynamics of the individual's

relationships."

2008-2009 Practicum Students

Laura Suhr--Laura Suhr, M.S. Originally from Lincoln, Nebraska where she earned her Bachelor's degree in Psychology at the University of Nebraska-Lincoln. Last year Laura received her Master of Science in Clinical Psychology from Purdue University, she is currently working towards her Ph.D also in clinical psychology. Laura is a practicum student working on Isaac Ray. Laura commented: "I am really enjoying my time at Logansport as I am learning a lot and seeing something new nearly every day."





Michael S Jones--Returning to college after a 30-year career in Information Technology, Michael is a "non-traditional" student in the Doctor of Psychology program at the University of Indianapolis. Michael received a Bachelor's degree in Computer Science in 1976. This past Spring, he was awarded a Master's degree in Clinical Psychology. Michael's clinical training here at LSH is with Dr. Mary Ann Nusbaum in Admissions and on the Dodds Units. His professional interests are in psychotherapy with a concentration in geropsychology. His dissertation is the creation of an objective form of the Thematic Apperception Test. Michael has a son and two grandchildren living near Charlotte, NC.

Mark J. McClellan A.K.A. "MAC"--M.S. Mac attended Purdue University's Clinical Psychology program. Mac's research "focuses" on attention and memory. Mac commented: "Much to the credit of LSH's staff and patients, Tuesdays and Thursdays have now become his favorite days of the week, and I thank you."



Drew J. Miller--Drew graduated Summa Cum Laude with a Bachelor's degree in Sociology from DePauw University, Greencastle, Indiana in 2005. Drew decided to pursue a career in psychology and attended the Clinical Psychology program at the University of Kentucky from 2005-2006. After receiving his Master's degree in Clinical Psychology from Kentucky, Drew began work on his Ph.D. at Purdue University. Drew's research interests reside within "psychopathology across the lifespan" with an emphasis on relations between personality and affect-related constructs and antisocial behavior, substance abuse, and sexual risk-taking. Drew's clinical interests include working with incarcerated juveniles and adults and individuals suffering from personality disorders (e.g. psychopathy, borderline personality disorder). Drew is currently working with Judy Gilbert on Larson 2 North on the Sexual Responsibility service line.



Farewell

To
Steph Helvie





Employee Recognition Day Awards Ceremony



Employees at Logansport State Hospital were honored this year at the Annual Employee Recognition Awards Ceremony on October 9th. Service awards were presented to 106 employees celebrating years of service between 5 and 40 years. The Awards Ceremony took place at 2pm in the Fogel Auditorium. A reception for midnight shift staff was also held on the same day at 7am in the Administration Building. Employees being recognized were:

40 years

Joyce Johnson – Southworth

35 years

Carol Smith – Southworth

Cliff VanWinkle – Southworth

30 years

John Babb – Southworth

Gary DeWitt – Isaac Ray

Terri Frame – Southworth

Judy Gaby – Quality Management

Cathy Hickey – Southworth/L1E

Teresa Horton – Larson

Mark Kemper – Isaac Ray

Carol Middleton – Dodd

Karen Peters – Isaac Ray

Ruth Ann (Buttons) Smith – HIS

25 years

John Bates – Isaac Ray

Cathy Bowles – CLWilliams/Southworth

Gayle Edgerly – Quality Management

Paul Howerton – Isaac Ray

Peg Nolte – Nutrition Services

Jackie Springer – Larson

Gloria Stines – Larson

Jennie Wright – Isaac Ray

20 years

Mary Barnes – Central Rehab

Jeff Cochran – CLWilliams

Sonja Conrad – Dodd

Pam Davis – Housekeeping

Gerry Ellis – Isaac Ray

John Freels – Housekeeping

Tom Geisler – Steam Plant

Marilyn Goodrich – Dodd

Dave Graham – Housekeeping

Polly Grandstaff – Housekeeping

Patty Hardesty – Dodd

Paula Johnson – Dodd

Terry Schrock – Social Services

15 years

Chris Bailey – Dodd

Ellen Blevins – Business Administration

Mary Downhour – Patient Accounts

Julie Friend – Nutrition Services

Judy Gilbert – Larson

Cliff Jones – Dodd

Marcia Smith - Jayne English

Terry Tharp – Larson

Deb Yerk – Clothing Store

Paul Zimdahl – Central Rehab

10 years

Sabrina Click – Larson 1 East
Sandy DeLucca – Nutrition Services
Melanie Edmondson – Human Resources
Brenda Farrell – Nutrition Services
Suzanne Felty – Isaac Ray
Audrey Hickle – Dodd
April Kinzer – Nutrition Services
Dave Mucker – Dodd
Stacey Platt – Dodd
Karen Ragle – Allied Health
Ruth Shaffer – Housekeeping
Michele Shepperd – CLWilliams
Eli Smith – Maintenance
Rob Stevens – Isaac Ray
Dan Toncheff – Larson
Bob Wandrei – Maintenance
Cindy Wolavka – Larson

5 years

Jennifer Adams – Isaac Ray
Warren (Junior) Adams – Jayne English
Diana Anderson – Central Rehab
Steph Birnell – Larson
John Blickenstaff – Dodd
Tressa Bowman – Superintendent's Office
Jesse McCarty – Housekeeping
Julie Miller – Housekeeping
Mark Miller – Larson
Ryan Murray – Southworth
Amanda Myers – Isaac Ray
Tera Price – Isaac Ray
Micheal Prophitt – Housekeeping
Loretta Quaglio - Larson
Mary Quillon – Dodd
Carolyn Rose – Dodd
Sarah Rutschmann – Allied Health
Tiffany Sherman – Jayne English
Don Smith – Isaac Ray
Laura Swafford – Hillside Café
Barbara Wake – Switchboard
Nancy Williams – Larson 1 East

John Yoakum – Isaac Ray
Kathryn Younce – Jayne English
Janice Conn – Jayne English
Becca Cramer – Larson 1 East
Kyle Cree – Dodd
Leesa Criswell – Isaac Ray
Jo Curtis-Bamberga – HIS
Natasha Davidson – Dodd
Joanne Decker – Dodd
Freda Dodt – Jayne English
Tim Duncan – CLWilliams
Kirby Edmonds – Maintenance
Melinda Eldridge – Southworth
Donna Hiers – Larson
Debra Holmes – Nutrition Services
Kim Hopper – Dodd
Jerry Jones – Isaac Ray
Mark Jones – Isaac Ray
Sandy Jones – Dodd
Verlin Klinefelter – Isaac Ray
Don Madson – Larson
Sandy Marchal – CLWilliams/SW/L1E





Culinary Corner

MONSTER BURGERS

Ingredients

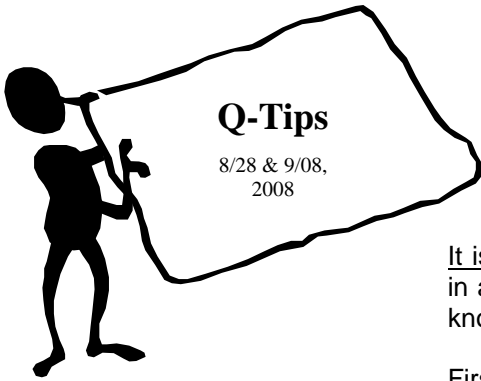
8 ground beef patties (4 oz. each)
8 burger buns, split
8 slices (3/4 oz. each) American Cheese
8 thin slices cooked ham
16 slices dill pickle
Ketchup



Directions

- 1) Set oven control to broil. Place ground beef patties on broiler pan. Broil with tops 3 to 4 inches from heat 10 to 12 minutes or until thoroughly cooked, turning once.
- 2) Place bottom halves of buns on serving platter. For each monster burger, place 1 cooked patty on bottom half of bun. Cut cheese slice in half in zigzag pattern to look like teeth. Place half of cheese slice on burger, with "teeth" hanging off 1 side of patty.
- 3) Loosely fold ham into tongue shape; place on top of "teeth." Place remaining cheese "teeth" on top of "tongue." Top with top half of bun. Place 2 pickle slices on top for eyes. Dot "eyes" with ketchup for pupils.

High Altitude (3500-6500 ft): No change.



Continuous Readiness Reminders

- HIPAA reminders
- Restriction of a Patient's Conditional Rights

By Quality Management

It is not acceptable to post the patient's first and last names in any area that can be visible to others that do not "need to know".

First and last names should be secured at all times; for example....

- Chart room doors should be locked when staff is not in there.
- If you are charting in the nurse's office and have to leave, the chart should be closed or covered, so that confidential information is not laying open for anyone to see.
- Bulletin boards near the phone or outside the nurse's office (Larson, JE, SWW, SWS, CLW, L1E, Dodds) may not contain information with patient's first and last name.



If you have specific questions, please feel free to contact Jo Curtis-Bamberg at extension 3777.

Joint Commission standard RI 2.100 states that when an organization restricts a patient's visitors, mail, telephone calls, or other forms of communication that the restriction is

- Determined with the patient's (and family when appropriate) participation
- Documented along with justification in the clinical record.
- Evaluated for therapeutic effectiveness.

RI 2.140 states that patients' personal items may be kept locked, but that it must be clinically indicated and documented.

Federal Statute states that if denying access to a particular visitor, telephone, or mail is necessary, the denial must be in writing and incorporated in the treatment plan.

Conditional Rights include

1. To have access to their own clothing and personal possessions, including toilet articles, a reasonable sum of money and individual private storage.
2. To receive visitors at a reasonable time
3. To correspond by sealed letter and by telephone with people outside the hospital.

Logansport State Hospital has a procedure in place in order to track the review of conditional rights.

Please review the REVISED PROCEDURE and form attached with this Q-Tip! We must document these restrictions in the treatment plan under the strategy that coincides with the problem leading to the restriction.

Weekly, the treatment team must review these restrictions and determine whether they must continue. At a minimum, during the 90 day review, the Case Manager will address the restriction in the treatment plan review indicating the status and any information regarding the review as to why it is continuing.



As a treatment team, make sure you are doing the “right” thing!



UPCOMING EVENTS

September 25 - October 20

- 📅 October 23 - Clinton Co Gold Ladies - 9:00 AM D2E
- 📅 October 23 - Clinton Co Gold Ladies - 10:00 AM CLW/L1E
- 📅 October 23 – Treasures and Delights – 6 – 4 AM Fogel Auditorium
- 📅 October 27 - Tippecanoe Co MHA 1:30 PM SWW
- 📅 November 3 - Cass Co MHA 6:00 PM Dodds
- 📅 November 12 - Clinton Co Church Party in Frankfort Dodds/CLW/L1E
- 📅 November 17 - Tippecanoe Co MHA 1:30 PM SWW
- 📅 November 19 - Purdue Bingo 2:00 PM D1W
- 📅 November 19 - Catholic Mass

Who Am I?

Can you guess who the individual in this picture is?

If you can, call Darrin Monroe at # 3803 or e-mail: darrin.monroe@fssa.in.gov by November 12. All correct answers will be entered in a drawing sponsored by the Morale Boosters to win a free “Jumbo” soft drink at the Hillside Café. You must have the correct answer of both pictures to qualify for an entry.

Winner will be announced in the next Spectrum.

Need a hint? West LPN.

Find out who this is in our next issue.

Last Issue:



Pam Kindem



Paula Johnson had the correct guess to the people in the “Who Am I” pictures.

If you have an early picture of an employee and would love to have a little fun with it, call Darrin Monroe at # 3803.