



COMMUNITY TIES

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Special points of interest:

- Christmas 2008
- Klepfer All Faiths Chapel
- Friend-to-Friend
- Tours
- P&A
- Hospital Houses
- Food Drive
- NAMI
- Laundry
- Tournaments

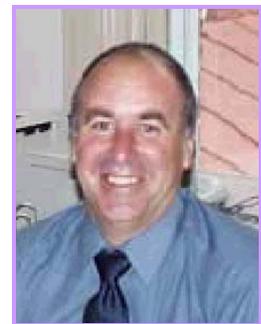
SUPERINTENDENT'S MESSAGE

I would like to take this opportunity to introduce our new Medical Director, Dr. Donald Graber who joined us on March 2. Dr. Graber is an experienced leader and clinician practicing in both the states of South Carolina and Indiana. In addition to excellent knowledge and skills in providing psychiatric care, I was truly impressed by Dr. Graber's philosophy of partnership with the patients and his commitment toward a holistic health care approach. He is committed to the Recovery Model and I am convinced he will be a great fit for the hospital.

We are also revising the Mission and the Vision of the Hospital as well. We believe that our current mission and vision doesn't adequately repre-

sent our emphasis on healthcare and our move towards a recovery model. Those changes will be included in this newsletter. We are also in the process of updating our webpage to reflect those and other changes.

Before the next newsletter we will be undergoing some renovations to the Administration Building. The changes will not significantly alter the outside and inside presence of this beautiful turn of the century building. The scope of this project is to make this building completely accessible on both the first and second floors. An elevator will be added to the west side of the building and new bathrooms will be built on both the first and second floors. This project



Jeff Butler
Superintendent

will necessitate some temporary relocation of the services to other buildings on the campus. The project will begin sometime in late spring or early summer. We will be notifying many of you by letter or email of the timeline and changes as soon as things are finalized.

Have a great spring!

Jeff Butler
Superintendent

NEW MEDICAL DIRECTOR



Donald Graber, M.D.
Medical Director
Richmond State Hospital

Dr. Don Graber became the Medical Director of Richmond State Hospital on March 2, 2009. He has been married to Sherrill (Moore) Graber, R.N., since 1967. They have one son, Scott, married to Angie, who gave birth to the first grandchild, Bailey Grace, on August 2, 2008. Scott, Angie, and Bailey reside in Alamosa, Colorado.

Dr. Graber attended Goshen College in Goshen, IN and I.U. School of Medicine

and Residency Training Program. Don and Sherrill worked together in the private practice of Psychiatry for 17 years before closing the practice to care for their elders. As retirement didn't suit Dr. Graber, he returned to practice at Oaklawn Community Mental Health Center, serving as the ACT (Assertive Community Treatment) Team Psychiatrist and CSP (Community Support Team Psychiatrist), basically working 4 years with the seriously ill adult population. Due to a

growing interest in this special needs population as well as integrated Psychiatric Medical and Addictions treatment, he is excited about his new position at Richmond State Hospital. He believes in Richmond State Hospital's values, i.e., Recovery, Strength, Hope, and also believes Richmond State Hospital stands for "Recovery Starts Here" .

*"Nothing before,
Nothing behind;
the steps of faith fall
on the seeming void
and find the rock
beneath."
~ John Greenleaf
Whittier*

NEW HEALTH INFORMATION SERVICES DIRECTOR



Jay Wenning, RHIA
Health Information
Administrator

Mr. Jay Wenning has joined Richmond State Hospital as the Director of Health Information Services and the Privacy Coordinator. Mr. Wenning is a Registered Health Information Administrator (RHIA) and a graduate of the Ohio State University. He has worked at Larue D. Carter Memorial Hospital (a sister state hospital) in Indianapolis since 2002. While at Larue Carter Hospital, he was the

Director of Health Information Services, Privacy Coordinator, Forms Coordinator, and Records Retention Coordinator.

Richmond State Hospital is committed to abiding by all HIPAA rules and regulations in the effort to protect our patients. If you have any questions, please feel free to contact Mr.

Wenning at 765-935-9235, email him at Jay.Wenning@fssa.state.in.gov, or send a fax to 765-935-9509.



NEW SECURITY DIRECTOR

Mr. Greg Pipes is the new Security Director at Richmond State Hospital. Greg and his wife, Karen, lives in Centerville.

Mr. Pipes retired after a 30 year career as a police officer with Richmond Police Department, having

held all rank including Chief of Police.

He graduated from Richmond High School and Indiana Police Academy.

Mr. Pipes is the father of two daughters, Emily, 28, and

Jessica, 22. He has two stepsons, Karl, 13, and Nicholas, 10. Emily has two beautiful daughters, Grace, 5, and Olivia, 2. We welcome Mr. Pipes to Richmond State Hospital.



*Greg Pipes
Security Director*

"Those who preserve their integrity remain unshaken by the storms of daily life. They do not stir like leaves on a tree or follow the herd where it runs. In their mind remains the ideal attitude and conduct of living. This is not something given to them by others. It is their roots...it is a strength that exists deep within them." ~ Anonymous Native American.

VISITOR INFORMATION

Please keep the following in mind when visiting a patient:

- Hospital visiting hours are from 9:00 a.m. to 8:00 p.m. daily.
- The visitor sign-in process is for the safety of our patients and visitors. In the event of an emergency, the sign-in logs are used to account for any visitors on grounds.
- Visitors under the age of 18 must be accompanied by a parent, guardian, or family member over the age of 21.
- For visitors with children under the age 14, the visitation must occur off the unit for safety reasons.
- When left unattended, vehicles must be turned off and locked.
- Due to privacy laws, the use of cameras or cell phones with cameras is prohibited while on hospital grounds.
- The use of personal electronic devices (PDAs, Ipods, MP3 players, cell phones, etc.) is prohibited while on hospital grounds.
- Tobacco products, lighters, matches, alcohol, and associated paraphernalia are not ever to be brought on grounds or given to patients.



There are security cameras located in various areas of the buildings and grounds. This is a method of protecting people and property. Please be aware as you visit that you may be on video. The care and security of our patients is number at Richmond State Hospital.

SURVEYS AT RSH

By Kay Stephan
Quality Management Director



Kay Stephan, RHIA
Quality Management
Director

MEDICARD SURVEY

On January 26, 2009, the Centers for Medicare and Medicaid Services (CMS) arrived at RSH for an unannounced Medicare survey. RSH has 30 Medicare certified beds on unit 420B in the RTC Building. Two surveyors, a psychiatrist and a nurse, spent 2 days reviewing medical records, staffing schedules and interviewing both patients and staff.

A final report has not yet been received by administration. Early indication of possible

citations include timeliness of dictation of discharge summaries as well as the format and way treatment plans are written for each patient. Once a final report is received, hospital staff will be required to write a Plan of Correction for any deficiencies and submit back to CMS. Surveyors were very complimentary of our organization, the environmental surroundings and hospitality of staff and patients.

Joint Commission Surveys Laboratory

On January 9, 2009, a Joint Commission

Medical Technician arrived to survey our Laboratory. This survey, covering only one day, reviews Laboratory policies and procedures, staffing, as well as waived testing on the patient unit. Survey findings cited were related to formal documentation of acceptance of new equipment, critical test results processes and participation in a proficiency testing program for lab tests. None of the findings resulted from any direct patient care issues. All citations have been corrected.

We are what we repeatedly do. Excellence then, is not an act, but a habit.
~ Aristotle

RICHMOND STATE HOSPITAL

OUR MISSION:

To provide individualized, quality holistic healthcare with respect, dignity, and caring.

OUR VALUES:

We believe in all individual's capacity for:

- Recovery
- Strength
- Hope

OUR VISION:

We have accepted the challenge to:

- Partner with: consumers, families, providers, and communities for recovery.
- Provide a healing, safe, recovery oriented environment.
- Promote innovation and utilize evidence based practices for recovery.
- Promote trauma informed care.



ADULT PSYCHIATRIC SERVICE LINE 420A and 420B

Unit Directors:

420A - Kaye Clark

420B - Tanya Melody

The mission of the Adult Service Line is to provide Active Treatment aimed at stabilization and rehabilitation from time of admission through transfer and/or discharge.

STATISTICS

SEPT. '08 — FEB. '09

Admissions — 73

Discharges — 43

ADULT SERVICE LINE

420A (Dual Diagnosis Admission Unit)

Census 26

- 21 White, 5 Black
- 21 Males, 5 Females
- Average age – 32
- Average length of stay on the unit 64 days
- Education – 8 - Under 12th grade; 13—12 grade or more; and 5 - GED.
- Primary Diagnosis – Schizophrenia, most common secondary diagnosis of Substance Abuse/Dependence
- Religion – 4 Catholic, 5 none, 9 Christian, 2 Baptist, 1 Wicca; 1 God; 1 Atheist; 2 Pentecostal; and 1 Unknown.

420B (Psychiatric Admission Unit)

Census 30

- 24 White, 5 Black, 1 Asian
- 18 male, 12 female
- Average Age - 40
- Average Length of stay on the unit - 73 days
- Education – 11 - Under 12th grade; 13 - 12 grade and more; and 6 - GED.

- Primary Diagnosis – Schizoaffective Disorder; most common Secondary diagnosis Borderline Personality Disorder
- Religion - 10 none; 4 Christian; 4 Catholic; 5 Baptist; 1 Protestant; 1 Methodist; 1 Pentecostal; 1 Yahwist; 1 Wicca and 2 Mennonite.

ACTIVITY CORNER

Jeremy Bane, Kim Singleton, Jonelle McGathey, Tanene Smith and Lisa Ginn

It has been a beautiful 6 months. Of course all periods of time have their own kind of beauty. The winter has been pretty mean, but it is almost over. There have been lots of those really cold days that kept us from being able to go outside. Because of the cold weather the ASL has had to become inventive with our activities. Some of those cold weather activities have been:

- ☺ Extreme Games in the grove
- ☺ Multiple Christmas events including unit parties
- ☺ Super Bowl Party
- ☺ Several reward trips to the community

Summer is coming so we are looking forward to lots of outside activities like:

- ☺ Cookouts
- ☺ Baseball Tournaments
- ☺ Hospital-wide Fun Days
- ☺ Trips to the park
- ☺ Dairy Queen

CONTACTS: 765-966-0511

Kaye Clark, 420A Unit Director - ext. 9203

Tanya Melody, 420B Unit Director – ext 4929

Barbara Jackson, Secretary - ext. 9204

Tanya Melody, Assistant Director of Nursing (420 A)– ext. 4929

Lisa Ginn, Senior Therapist for Recreational Therapy - ext. 9335

Jamen Bales, Senior Therapist for Social Work - ext. 9370

Dr. Toni Gesler, Senior Therapist for Psychology - ext. 9363

Renee Madron, Senior Therapist in Substance Abuse Counseling - ext. 4957



LIFE SKILLS
422A and 422B
WINTER 2008/SPRING 2009

422A CLIENT DEMOGRAPHICS

- ❖ 5 African American, 25 White
- ❖ 9 Females, 21 Males
- ❖ Average Age—43
- ❖ Average Education - 11th
- ❖ Primary diagnosis — Schizophrenia, Schizoaffective
- ❖ Religion — 3 Baptist; 4 Catholic; 8 Christian; 2 Lutheran; 7 Protestant; 1 Jehovah Witness; 8 None, 2 Unknown; 2 Methodists
- ❖ Discharges
 - ❖ 2008 — 13
 - ❖ 2009 — 0
- ❖ Transferred to a less restrictive unit
 - ❖ 2008 — 0
 - ❖ 2009 —1

422B CLIENT DEMOGRAPHICS

- ❖ 8 African American, 20 White, 1 Asian
- ❖ 12 Males, 17 Females
- ❖ Average Age — 48
- ❖ Average Education — 11th
- ❖ Primary Diagnosis — Schizophrenia, Schizoaffective
- ❖ Religion — 3 Baptist; 1 Catholic; 7 Christian; 2 Lutheran; 2 Protestant; 9 None; 1 Other; 2 Unknown; 1 Methodist; 1 Muslim
- ❖ Discharges
 - ❖ 2008 — 24
 - ❖ 2009 — 3
- ❖ Transferred to a less restrictive unit
 - ❖ 2008 — 17
 - ❖ 2009 — 2

POETRY BY SUNSHINE (Patient on 422B)

THE HIM'S!

Love is so strange
 My feelings are now gone for him
 When I say him's it's not just one
 But all the him's
 In my life
 Guy's love me, but is it real?
 Is my life even real?
 Do I exist in this love story will the book ever end?
 I don't know who is the one for me
 I don't know who to choose or deny
 Or who to love
 Or beloved by
 But
 I guess it's all because of him's in my life that I am so lost
 So help me find me
 So I can find him



Picture of RSH courtyard taken during winter 2008.

MI/IDD SERVICE LINE UNIT 421-B

STEPPING STONES PROGRAM

The Stepping Stones Program is a co-ed program for individuals who have dual diagnoses of mental illness and individuals with a developmental disability (MI/IDD). The program focus is on skill development in daily living skills, and adaptive behavioral development. The program encourages positive behaviors and appropriate social interactions. The goal is to return to a lesser restrictive environment, like a group home or supervised assisted living program.

The MI/IDD program is housed in the Residential Treatment Center Building (CTC), unit 421B. The treatment philosophy incorporates the values of least restrictive intervention and utilization of positive reinforcement. Program residents enjoy recreational activities on the hospital grounds as well as community programs such as Worker's Night Out, and reward trips.

The program provides classes to help patients learn community living skills. Patients begin their journey to *Recovery* based upon assessments to compliment their strengths. They progress with the class curricula as their goals are met. Active treatment classes include: money management, social skills, cooking, health/nutrition, health/safety, community education, anger management, home economics, adult education, life skills, spirituality, vocational training, and fitness, to name a few. Patients are involved in arts/crafts, storytelling, health and beauty classes, and other leisure activities. Patients go on outings into the community and some residents work on grounds. Each patient has a treatment plan that is individualized. The team working on the plan includes the patient, physician, psychology, nurses, social work, activity therapists, and the case attendant, as well as the family and gatekeeper -- community mental health center.

TIME FOR A TUNE UP!

Staff have been given the opportunities to attend free trainings through Outreach Services of Indiana. Topics have included Positive Behavior Supports, dysphasia, communication, fall prevention, understanding sensory processing, and nursing care. The 2009 INARF Annual Conference will be held in Indianapolis. Tylene Ferguson will share current information on Advancing Leadership and Building Resources to promote Services of People with Disabilities.



Tylene Ferguson,
RN, BSN
MI/IDD Service Line
Manager

“A ship in a harbor is safe but that’s not what ships are made for.”

CONTACTS 765-966-0511

Tylene Ferguson, Director/ADON - ext 9278

Kathy Tuggle, Secretary - ext 9394

Valerie Darling, Treatment Team Coordinator, RT - ext 9339

Amy Banta, Social Worker - ext 9372

John Jantz, Behavioral Clinician - ext 9331

Glenn Plaster, Behavioral Clinician - ext 9319

Dr. Bhangoo, Psychiatrist - ext 9319

RNs — Newton/ Duke/ Pritchett - ext 4986, 4987 or 4033

Becky Miller, Peer Specialist - ext 9405

Carolyn Hanna, Dietician - ext 9229

MI/IDD SERVICE LINE, continued



Patients from 421B enjoy participating in Special Olympics.

*Be a fan of RESPECT
~ Support Special Olympics!*

421B TREATMENT TEAM INFORMATION

The mission and vision of the Stepping Stones Program is under going a positive re-evaluation. As referrals to the Stepping Stones Program arrive, we are aggressively trying to meet the needs of the patients and facilitate discharges as

efficiently as possible. This has recently included SOF ICF/MR units in Indiana. This step will assist the transition of the patient from acute, psychiatric services requiring stabilization to community based services. The individual focus has decreased the length of stay av-

erage for the patient. Many staff, including Amy Banta, Social Worker, are to be congratulated for the great work implementing individual treatment plans that are realistic for the patients to meet based upon their strengths and goals.

Staffing for this service line includes regular physician coverage with on-call physicians available 24 hours a day along with nursing staff present in three shifts. Patients have access via referrals/physician's orders to the hospital's on-site Health Clinic, Dental Clinic, Laboratory, and Pharmacy. Acute medical services beyond the scope of our medical services are referred to the ER at Reid Hospital and Healthcare Services.

HIPPA: It's not just a good idea. It's the law.

PROGRAM/PATIENT DEMOGRAPHICS

Gender — 11 Female/13 Male

Average Age — 38.72 Years

Average Length of Stay — 1843.33 Days

Ethnicity — 5 African American; 1 Hispanic; 17 White; 1 Bi-racial

Education — Average grade level completed is 7th grade

Primary Diagnosis — Mild/Moderate Mental Retardation; Schizophrenia; Paranoid Type

Religion — 5 Unknown; 6 Protestant; 1 Jehovah Witness; 1 Christian; 4 Baptist; 7 None



Pictured above: inside the Crafts area where patients from 421B get involved with many new ideas in crafts, sewing, and ceramics.

SUBSTANCE ABUSE SERVICE LINE



Lynda Dean
Substance Abuse
Service Line Manager

The Substance Abuse Service Line at Richmond State Hospital is made up of five separate programs with a total of 105 beds. The length of stay varies and is determined by program assignment. All programs have a capacity of twenty-three to twenty-four co-ed beds. Lawson house has a capacity of eight co-ed beds. Patients participate in individual and group therapy, lectures, structured experiences, leisure time and vocational/recreational activities, meditation, and self-help groups in area communities. In addition to these general therapies, there are special therapies for patients that deal with women’s issues, eating disorders, grief, anger, depression, anxiety, AIDS, and spiritual issues. GED self-study and testing is also available. Urine screening and Breathalyzers are also used to insure patients remain abstinent.

CONTACTS RSH -- 765-966-0511

Lynda Dean, Service Line Manager -- 765-935-9381

Ruth Edwards, Service Line Administrative Assistant -- 765-935-9382

417A—STAR PROGRAM

Sheila Buckler, Coordinator, 765-935-9360

This program is for patients with a dual diagnosis of substance abuse and mental illness.

<p>Primary Diagnosis consists of the following:</p> <ul style="list-style-type: none"> ▶ 1 Alcohol Dependence ▶ 2 Bipolar Disorders ▶ 1 Cognitive Disorder ▶ 1 Depressive Disorder ▶ 1 Impulse Control ▶ 3 Major Depressive Disorders ▶ 1 Obsessive Compulsive Disorder 	<ul style="list-style-type: none"> ▶ 1 Polysubstance Dependence, ▶ 1 Psychotic Disorder ▶ 4 Schizoaffective Disorders ▶ 2 Schizoaffective Disorders ▶ 1 Schizophrenia Paranoid Type <p>Ages range from 20 to 62 years old.</p> <p>Commitments: Regular — 10 Temporary — 12 Voluntary — 1</p>	<p>Race:</p> <ul style="list-style-type: none"> ▶ White — 10 ▶ Black — 4 <p>Sex:</p> <ul style="list-style-type: none"> ▶ Female — 8 ▶ Male — 11 <p>Education:</p> <ul style="list-style-type: none"> ▶ 7th -1 ▶ 8th -1 ▶ 9th - 1 ▶ 10th - 2 ▶ 12th/Graduate 10 ▶ GED - 3 <p>Religion:</p> <ul style="list-style-type: none"> ▶ Catholic - 3 ▶ Christian - 4 	<ul style="list-style-type: none"> ▶ Pentecostal - 1 ▶ Presbyterian - 1 ▶ Protestant - 1 ▶ None - 9 <p>Drug of Choice:</p> <ul style="list-style-type: none"> ▶ Alcohol - 8 ▶ Cocaine - 3 ▶ Crack - 1 ▶ Heroin - 1 ▶ Marijuana—2 ▶ Meth - 1 ▶ Tobacco - 1
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Substance Abuse, continued

417B—EXODUS PROGRAM

Phyllis Jackie Johnson, Coordinator, phone number 765-935-9384

In this program, patients have minimal or no additional psychiatric/medical impairments.

Primary Diagnosis consist of

- ▶ 8 Alcohol Dependence
- ▶ 2 Amphetamine Dependence
- ▶ 2 Cocaine Dependence
- ▶ 1 Opioid Dependence
- ▶ 6 Polysubstance Dependence
- ▶ 1 THC Dependence

Ages range from 17 to 75 years old.

Commitments:

- ▶ Voluntary - 20

Race:

- ▶ White - 20

Sex:

- ▶ Female - 5
- ▶ Male - 15

Education:

- ▶ 9th — 5
- ▶ 10th — 3

- ▶ 11th - 3
- ▶ 12th/Graduate - 5
- ▶ GED - 4

Religion

1. Baptist - 1
- ▶ Catholic - 1
- ▶ Christian - 3
- ▶ Pentecostal - 1
- ▶ Protestant - 2
- ▶ None - 9

Drug of Choice

- ▶ Alcohol - 6
- ▶ Cocaine - 2
- ▶ Crack - 1

- ▶ Heroin - 1
- ▶ Marijuana - 2
- ▶ Methadone - 4
- ▶ Opiates - 2
- ▶ Pain pills - 3
- ▶ Xanax - 2

417C—NEW HORIZONS PROGRAM

Vanda Nunley, Coordinator, phone number 765-935-9397

This program provides individual treatment for focusing on the aspect of co-occurring diagnosis with the disease of addiction as the primary diagnosis.

Primary Diagnosis consist of

- ▶ 10 Alcohol Dependence
- ▶ 3 Cocaine Dependence
- ▶ 1 Depressive Disorder
- ▶ 1 Major Depressive Disorder
- ▶ 1 Marijuana Abuse
- ▶ 2 Opioid Dependence
- ▶ 3 Polysubstance Dependence
- ▶ 1 PTSD
- ▶ 1 Substance Induced Mood Disorder

Ages range from 19 to 59 years old

Commitments:

- ▶ Regular - 6
- ▶ Temporary - 10
- ▶ Voluntary - 1

Race:

- ▶ White - 19
- ▶ Afro American - 3
- ▶ Other - 1

Sex:

- ▶ Females - 8
- ▶ Males - 11

Education:

- ▶ 8th - 4
- ▶ 9th - 3
- ▶ 10th - 1
- ▶ 11th - 3
- ▶ 12th/Graduate - 3
- ▶ GED - 7

Religion:

- ▶ Baptist - 1
- ▶ Catholic - 3
- ▶ Christian - 12
- ▶ Methodist - 1
- ▶ None—4

Drug of Choice:

- ▶ Alcohol - 11
- ▶ Cocaine - 2
- ▶ Marijuana - 1
- ▶ Methadone - 2
- ▶ Opiates - 1
- ▶ Pain Pills - 1
- ▶ Valium - 1



SUBSTANCE ABUSE SERVICE LINE, continued

417D — PHOENIX PROGRAM

Sandra Vanderbeck, Coordinator, 765-935-9389

This program is designed to provide services to relatively high functioning individuals who have an addiction, and who may also have a mental/medical illness.

Primary Diagnosis consists of the following:

- ▶ 10 Alcohol Dependence
- ▶ 1 Cocaine Dependence
- ▶ 1 Mood Disorder
- ▶ 10 Polysubstance Dependence

Ages range from 21 to 63 years old.

Commitments:

- ▶ Voluntary - 21
- ▶ Temporary - 1

Race:

- ▶ White - 22

Sex:

- ▶ Females - 7
- ▶ Males - 15

Education:

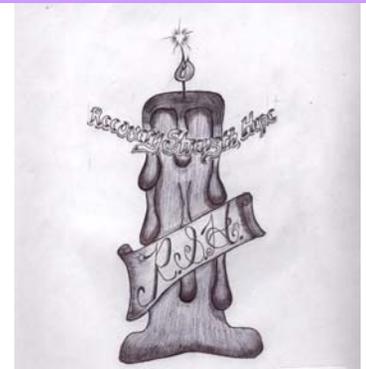
- ▶ 7th - 1
- ▶ 9th - 1
- ▶ 10th - 2
- ▶ 11th - 1
- ▶ 12th/Graduate - 6
- ▶ GED - 4
- ▶ Above 12th - 4

Religion:

- ▶ Baptist - 1
- ▶ Catholic - 3
- ▶ Christian - 12
- ▶ Methodist - 1
- ▶ None - 4

Drug of Choice:

- ▶ 10 Alcohol
- ▶ 1 Cocaine
- ▶ 1 Crack
- ▶ 3 Heroin
- ▶ 1 Marijuana
- ▶ 1 Methadone
- ▶ 2 Oxycotin
- ▶ 1 Pain Pills



The art work below was done by 2 clients. One drew the candle and the other did the new RSH motto of **Recovery, Strength and Hope**. Both were gracious and kind in giving us permission to share. We regularly have very gifted clients among us and it is a joy to share the positive side that we are hoping will bless their years and our communities in their life of Recovery.

LAWSON HOUSE

Phronia Kramarczyk, Coordinator, 765-935-9385

The Lawson House is a Relapse Prevention Program. Clients from other substance abuse programs may be referred to the Lawson house in their last thirty days of treatment. Lawson House was established so clients getting ready for discharge could prepare for a successful return to community living. Clients will develop a relapse prevention plan, establish outpatient appointments, and obtain a temporary self-help group sponsor. Our hope is they will return to community living without returning to drug abuse.



Comfort Rooms are on each of the units. Staff and patients have enjoyed making plans for the rooms. Various sensory items that are soothing to assist patients develop their own skills at self soothing are available in these rooms.

***Pictured left:* Comfort Room for 417-A, Star Program. *Pictured right:* Comfort Room for 417-B, Exodus Program.**



SUBSTANCE ABUSE SERVICE LINE, continued

STATS for 2008

**Admissions – 276
Discharges - 313**

All admissions have to be referred by gatekeepers who are the liaisons between Community Mental Health Centers as courts/legal systems throughout Indiana. Self referrals and referrals by agencies not approved by the Indiana Division of

Mental Health and Addictions will be accepted. The clients must be a resident of Indiana, age 18 or older, and detox.

Clients being admitted should bring enough clothing and personal hygiene items to last a couple of weeks. We do have laundry facilities, plastic hangers are allowed (no

metal). They should also bring stamps, stationary, phone cards, etc. We do supply soap, shampoo, and laundry soap, but if you prefer to bring your own you may do so.

Clothing that display alcohol or drugs is not permitted. As a matter of confidentiality, cameras are not permitted. Cli-

ents are not permitted to have their automobiles while in treatment. No items made from glass and no products containing alcohol are permitted. Please remember we are non-smoking so no cigarettes or lighters are to be in buildings or on grounds.

CLIENTS' COMMENTS



At first I didn't want to be here but after coming and keeping an open mind about it I was able to learn a lot about myself and my addiction and for that I am truly grateful. Thank you.

Staff proved to be very knowledgeable, informative, and considerate. Applause to the staff. Good work and much thanks.

This is a great program. You just have to apply yourself. You have to want it and apply it. I believe if I would have put more in this I would have gotten more out of it.

This program had been very beneficial to me to get me at the state of mind where I'm at in my life now. I am truly thankful for all aspects of this program.

Richmond State Hospital has done wonders for me. They taught me things that I never knew before in order to stay sober which I never thought I was capable of before.

Without the support that I received here at RSH for the last several months, I would probably be dead or crippled. Thanks to all for the second chance at life. I am stronger for the experience. Thanks for the hope.

This is the most complete program my son has participated in; he has obviously made some good progress from our view point. We are hopeful. Thank you.

This was the best thing that could have happened to me at this point in my life. The 3 months I was here has brought out a person in me that I had forgotten about. I am very anxious to re-enter society with a totally new outlook and feeling. I have a chance with what I have learned while I was here.

Transitional Service Line

DEMOGRAPHICS OF CLIENTELE

421A

- 20 White, 6 Black, 2 Hispanic
- 2008 Average Age- 42
- Males-16 Females- 12
- Average Education 12th Grade
- Average Length of Stay of those discharged in 2008, 104 days
- Admissions 2008-49
- Discharge 2008- 28
- Admissions 2007- 54
- Discharges 2007- 48
- Average Length of Stay of those discharged in 2007- 181 days

Darby House

- 3 White, 2 Black
- 2008 Average Age - 39
- Males - 3
- Females - 2
- Admissions 2008 - 17
- Discharge 2008 - 10
- Average Length of Stay of those discharged in 2008, 133 days
- 2007 Length of Stay - 171 days
- Admissions 2007 - 12
- Discharges 2007 - 8

Kreitl House

- 5 White Males
- Average Age - 39
- Admissions 2008 - 11
- Discharged 2008 - 6
- Average Length of stay of those discharged in 2008 - 89 days



Corey Laughlin
Transitional
Service Line
Manager



The Transitional Service Line is composed of the 421 Program, the Darby House Program and the Kreitl House program. Each of the programs facilitates the patients' successful return to the community in the least restrictive setting.

STAFF CHANGES & CURRENT NEWS

The Transitional Service Line has acquired a new physician the past few months. Dr. Malladi joined the TSL last November. He replaced Dr. Bhangoo on 421A and Dr. Kim at the Kreitl House. Dr. Kim went back to her regular assignment in the Life Skills Service Line. Dr. Bhangoo expanded her role in the MIDD service line and took on the role as Chief of Staff for RSH until a replacement was hired. Her service to the TSL the past few years has been greatly appreciated by both the clients and the staff. Both the Darby House and the Kreitl House continues to offer various programs to meet the clients needs in the least restrictive environment on grounds. Programs and activities include family style dining and menu planning, as well as numerous trips into the community. All 3 units have had direct care staff trained on blood glucose monitoring to be more responsive to the specific needs of our diabetic clients. In 2008 the most frequent primary diagnosis for all 3 units was schizoaffective disorder followed by schizophrenia paranoid type and bipolar disorder. All three units were given a rocking chair to compliment the comfort rooms over the past weeks and the clients report enjoying having them available.

CONTACTS:

Corey Laughlin, Service Line Manager 765-935-9392

Darlene Anglin, Secretary 765-935-9391

Brenda Jeffries, Assistant Director of Nursing 765-935-0280

D'Aune Matheny-Murray, Senior RT and 421-A Treatment Team Coordinator 765-935-0342

Tom Tash, Social Worker, 421A, 765-935-9371

Angela Youkon, Social Worker, Darby & Kreitl House 765-935-9358

YOUTH SERVICE LINE

Youth Richmond State Hospital is a 20-bed adolescent inpatient program on two units. It is accredited by the Joint Commission on Accreditation of Health Care Organizations and is Medicaid approved. Referrals come from the entire state of Indiana. We provide 24 hour nursing care, on-grounds school, group and individual therapy, activity therapy, level program, social services, psychological services, and psychiatric services.

Youth Services staff attended a two day retreat at Quaker Hill Conference Center in January. The retreat covered team building, mission/vision activity, Common Diagnosis Training, explanation of services and therapies, expectations, and core values. Performance Improvement Teams (PIT) were developed and included medical, professional, and direct care staff. The teams will work on improvements for the students and staff.

A new logo was developed with the help of Ron Dean. The logo includes 7 Core Values:

1. Safety
2. Recovery
3. Positive Relationship
4. Hope
5. Healing
6. Respect
7. Education

The Youth Service Program also adopted the motto of "Teaching Skills, Healings Hearts, Changing Lives" as a reminder of what we do.

Demographics

Average length of stay—279 days

Average Age - 15 years old

Number of students in Work Readiness Program—8

The high school students have been working with the Work Readiness Program and Denise Townsend, Vocational Rehab Director. Students are earning an hourly wage while learning the responsibilities that go along with having a job.



Pictured right: The auditorium, one of the areas where our teens uses the full size gym for playing basketball and other sports during the winter months.



Contacts:

Unit 416-A 765-966-0511, ext. 4999
 Unit 416-B 765-966-0511, ext. 4802

Director of Youth Services
 Carl Rhinehart – 765-935-9330

Nursing
 Maurice Franck, Days
 Bev Garnet, Evenings
 Pam Karanovich, Evenings

Recreation Therapist
 Sam Byrd – 765-935-9520

RSH staff work closely with Richmond Community Schools. Admissions criteria include a full scale IQ of 70+.



New Youth Services logo by Ron Deane, Recreational Therapist



CHRISTMAS 2008



Christmas Gift Lift Program

We would like to thank the following people who made donations for RSH patients' Christmas. Aileen Githens; Alice Daggy; Becky Hines; Bill Manuel; Camille Gatzek; Carolyn Bryant; Connie Mahley; Dakota Siler-Mofun; Diane Ferlauto; Gail Fralick; Georgia Shuck; Gwen Frazier; Jacqueline Smith; Janice Potter; Jean Saylor; Jennifer Clark; Jill Gerwe; Mr/Mrs Jim Turman; Kay Gephart; Kris Lopresti; Lorene Bischoff; Louise Ronald; Marilyn Brown; Monica; Nancy & Jessica Pipes; Nancy LaFuze; Nancy Sharp; Joanne Passett; Shade Family; Rema Marquis; Sharon Basiewics; Sheila Houchins; Shelia Armstead; Sue Kinsey & Friends; Sue Miller; Susan Wise; Vicki Toschlog; Vickie Fulle; William Starr; Mr/Mrs Andrew Hamilton; Ashley Schnieder; Barbara Jenkins; Mr/Mrs Bill Abney; Mr/Mrs Bill Brumfield; Mr/Mrs Bob Christiansen; Bonnie Philbeck; Mr/Mrs Bradley LaMar; Mr/Mrs Buck Bengel; Mr/Mrs Donald Stinson, Dr. Perez; Edward Lafever; Eric Tuegel; Frank Wintrow; Mr/Mrs Greg Hilligoss; Patricia Heepe; Mr/Mrs James Bond; Mr/Mrs James Reed; Mr/Mrs John Burgess; Mr/Mrs John Burgett; Mr/Mrs John Stickdorn; Mr/Mrs Keith Reese; Mr/Mrs Kenneth Maurer; Mr/Mrs Larry Raper; Mr/Mrs Mark Fulle; Mr/Mrs Mike Walton; Mr/Mrs Philip Kuhans; Mr/Mrs Robert Swanson; Mr/Mrs Ron Imel; Mr/Mrs Rusty Keller; Sandra Powell Freeman Family; Mr/Mrs William Harvey; Mr/Mrs William Niersbach; Bethel AME; Central United Methodist; First Christian; First Friends Meeting; First United Methodist; Middleboro United Methodist; Northside Church of Christ; Richmond Baptist; St. Paul's Episcopal; St. Paul's Lutheran; Brown Appraisal Service; Burns Dentistry; Cuts & Curls; Edward Jones, Bob Gillman; ESCO Communications; Girl Scout H-57; Imperial, McClain & Associates; McSherr; Meals on Wheels; Richmond State Hospital Credit Union; Richmond State Hospital Employees; MHA Blackford County, MHA Delaware County, MHA Randolph County; MHA Wayne County; Murray Family; Stults Dentistry; AAUW; Alpha Omicron Sorority; American Legion

Auxiliary; Reid Hospital Staff; Carl Kilgus Circle 17; Hagerstown Optimist Club; Harrington-Hoch; Kappa Chapters; Tri-Kappa; NAMI Madison County; NAMI East Central Indiana; Opportunity Club; Rodella; Sigma Delta Pi; West Main Street Medical Center

Unit Christmas Parties and More

Many joyous sounds were coming from the units at Richmond State Hospital during the unit parties. On behalf of the patients and staff, we want to extend a sincere thank you to each of the Christmas party providers. The following groups were great with their donations of time, talents, food, gifts, and so much more: First Christian Church; First Presbyterian Church; Golden "K" Kiwanis; Greens Fork Fire Department; Mental Health America of Randolph County; Noon Kiwanis; Pentecostal Tabernacle; Richmond Baptist Church; Richmond State Hospital Leadership; St. Paul's Lutheran Church; White-water Valley Harley Davidson Motorcycle Club. A special thank you goes to Frank Waltermann, our "Santa" and Karen Butler, Santa's "elf".

AAUW members, Herman & Tommy Estes & Friends, Barbara Sparks, Ilene Sparks, and RSH employees did a great job wrapping gifts.

The Veteran Auxiliary Christmas Wrap and Party days were both great. We want to thank Mary Hughes-Broderick and everyone in the department and state who helped. A great group who remembers patients who were in the military.

We received several thank you cards and drawings from patients expressing their thanks for all that you do. Again, thank you all for making Christmas 2008 so memorable for our patients.



KLEPFER ALL FAITHS CHAPEL

Klepfer All Faiths Chapel is a resource for everyone at Richmond State Hospital. On difficult days employees come to the quiet of the sanctuary for a time of meditation or prayer away from busy hospital routines. Clients drop in for spiritual support with the chaplain or for prayer in the chapel. Peer specialists hold classes in the conference room which is also used by Narcotics Anonymous on Saturday evening and Dual Recovery

Anonymous on Sunday evenings. Local musicians, the Chanticleer Quartet, visit annually to provide world-class classical and popular music. On occasion local church groups provide us with gospel music or plays with a spiritual theme.

When visiting Richmond State Hospital you are welcome at Klepfer All Faiths Chapel, located on the east side of campus. Sunday service is at 1:15PM and all

are invited to participate. We enjoy it when someone blesses us with a hymn, a reading, or a poem. During the week feel free to drop in with friends and family to enjoy the quiet of the sanctuary, the convenience of the conference room, or to consult with Chaplain David on spiritual matters. Our church family looks forward to meeting you!



Klepfer All Faiths Chapel

FRIEND-TO-FRIEND PROGRAM

The Friend-to-Friend program at Richmond State Hospital is one that most people participating in find beneficial to them and their "friends".

Patients who are in the program are thrilled to receive letters, cards, phone calls, or visits from their friends. The experiences found depends on your

friend's needs and your own interests, time, and capabilities. Call Community Relations at 765-935-9218 for more information.

"Plant a seed of friendship; reap a bouquet of happiness."

~ Louis L. Kaufman

TOURS

Tours are offered at RSH from January through October. Each tour is tailored to meet the needs and interest of our tourists. Several colleges and high school groups tour each

year. Some school groups participate in the Substance Abuse Prevention program, "2 Smart 2 Start". Many have found this program exceptionally informative.

To ask questions or to schedule a tour call 765-935-9218.



Tours often include the Administration Building, Darby House, Museum, and the Clinical Treatment Center.

PROTECTION AND ADVOCACY

MISSION STATEMENT: "To protect and promote the rights of individuals with disabilities, through empowerment and advocacy."

Indiana Protection and Advocacy Services (IPAS) was created in 1977 by state law (IC. 12-28-1-6 as amended) to protect and advocate the rights of people with disabilities and is Indiana's federally designated Protection and Advocacy (P&A) system and client assistance program. It is an independent state agency, which receives no state funding and is independent from all service providers, as required by federal and state law.

IPAS is governed by a 13-member commission, which sets the agency's priorities and is advised on mental illness matters by a 10-member advisory council.

IPAS staff includes disability rights advocates and attorneys who have the authority to pursue appropriate legal and administrative remedies on behalf of people with disabilities, to ensure the enforcement of their constitutional and statutory rights. IPAS may be able to assist Hoosiers who have a disability and are being denied a right or are being discriminated against because of that disability.

IPAS is committed to continually improving its services. IPAS believes that a critical part of this is asking our clients how satisfied they were with our services. Each year IPAS mails hundreds of satisfaction

questionnaires to individuals whom we represented or whom received information and referral services. In addition, IPAS has contracted with Indiana University, Institute on Disability and Community, to conduct telephone interviews with some of our clients. The interviews are aimed at determining how our services affected the lives of our clients. The results of all these efforts indicate that the vast majority of IPAS clients were generally satisfied with the help they received from IPAS. Most also indicated that things improved for them concerning the problem they brought to IPAS. The

information collected from these assessments is shared with staff, the advisory council and commission, and is used to improve our services.

The P&A Specialist for this area is Donna Dellinger. To contact Donna, you may call 1-800-622-4845, ext. 236. You may also contact P&A at 1-800-838-1131 or by mail at Indiana Protection & Advocacy Services, 4701 North Keystone Ave., Suite 22, Indianapolis, IN 46204.



HOSPITALITY HOUSES

RSH provides hospitality houses for relatives of patients traveling from a distance to visit their loved ones. The hospitality houses are available at no cost to families of patients. All houses are completely furnished, in-

cluding an operative kitchen and laundry.

If you would like to make a reservation call Donna Crist, Administrative Assistant, at 765-935-9201.



Outside and inside of one of the hospitality houses on the campus of RSH.

FOOD DRIVE HELPS LOCAL FOOD PANTRY



Indiana First Lady Cheri Herman Daniels was born and raised in new Albany, IN. She is the granddaughter of Baseball Hall of Famer, Billy Herman. Cheri attended Indiana University where she studied journalism.

Richmond State Hospital was included in more than 65 agencies across Indiana who reached out to Hoosiers down on their luck by collecting nonperishable items for local food banks in February in a statewide food drive.

Indiana first lady Daniels announced

the start of the Hoosiers Helping Hoosiers food drive in Indianapolis. The food drive ran through February 27.

Requests for donations included canned fruits, vegetables, meats, soup, rice and pasta.

Over 600 items were donated by RSH em-

ployees and delivered to a local food pantry to help Wayne County residents.



One of the tables filled with food from RSH employees.

EAST CENTRAL INDIANA NAMI

NAMI is the National Alliance on Mental Illness, the nation's largest grassroots organization for people with mental illness and their families. Founded in 1979, NAMI has affiliates in every state and in more than 1,100 local communities across the country. NAMI recognizes the key concepts of recovery, resiliency and support are essential to improving the wellness and quality of life of all persons affected by mental illness. Mental illnesses should not be an obstacle to a full and meaningful life for persons who live

with them. NAMI advocates at all levels to ensure that all persons affected by mental illness receive the services that they need and deserve, in a timely fashion.

NAMI members and friends work to fulfill their mission by providing support, education, and advocacy. The address for NAMI's web site is www.nami.org. Over 7 million visitors a year turn to NAMI for information, referral, and education.

NAMI East Central Indiana is located on

the campus of Richmond State Hospital in the original farmhouse. The office is opened on Mondays, Wednesdays, and Fridays from 10:00 a.m. to 2:00 p.m. The phone number is 765-066-4094.

Kim Lairson is on the NAMI board. The following article written by Kim was in the Richmond newspaper: "Roses to the countless wonderful people who made the NAMI Christmas party the success it is. Many people donate money and food. Others donate time. All provide services without which the



Jane Horn, (pictured above), is a member of the Mental Illness Advisory Council at the state level. Jane was a social worker at RSH from 1990 to 2000.

NAMI Christmas party would not be able to do without. May you all be blessed with the wonderful Christmas experience you all helped to provide for over 500 people on December 2 at the Richmond State Hospital gymnasium. Thank you all very much."

GRASSROOTS



You must begin to think of yourself as becoming the person you want to be.

~ David Viscott



Grassroots is a committee that was started over 30 years ago by two employees. The purpose was to plan events for employees, help with morale, social events away from work, and to raise funds for employee related functions. There were a variety of activities throughout the years such as bake sales, cook outs, raffles, etc. Superintendent Butler asked for volunteers to work with him on planning events and activities to not only raise funds so that annually we can continue with a recognition program, but equally as important to help create an atmosphere where all employees can get to

know each other a little better. The following employees volunteered: Linda Gregory, Rehab; Kathy Tuggle, Youth Services, Julie Morrow, Accounts Payable; Penny Sams, Dietary; Mary Clark, Print Shop; Peggie Layne, Nursing; Terri Ogle, Secretary; Debbie Lanman, Admission.

Several ideas have been shared. Some of the topics were an RSH cookbook; RSH history; cookouts; bake sales; chili cook-offs; craft/garage sale; working such events as 4-H Fair; Coon Hunters Show. They also talked about restaurants and businesses

that allow employee groups/businesses to have special nights, and some of the proceeds to the organization. Joe's Pizza and Texas Roadhouse are two of these businesses.

Grassroots is currently sponsoring "The Biggest Loser" among employees. Eighty-four employees have joined in the quest of losing weight. The total weigh in was right at 18,909 pounds. The cost to participate was \$5.00. Half of the money will go in the Grassroots employee fund and half will go to the biggest loser.

Richmond State Hospital
~
A place where our family cares for your family.



RSH ADMINISTRATION BUILDING OPENED IN AUGUST 1890.

LAUNDRY STORY



David Shelford, CPA
Assistant Superintendent

Beginning March 16, 2009 our laundry will be reduced from a full service operation to one of just picking up dirty linens from client units and delivering clean. Washing, drying, ironing and folding will be done by offenders at the Pendleton Correctional Facility. This plan was ordered by the Division of Mental Health and Addictions as a cost savings measure at Richmond State Hospital. The plan will save the hospital \$110,000 per year and possibly more if the pick up schedule by Pendleton Correctional can be re-

duced. While it is sad to see the jobs of seven fine laundry employees eliminated or changed, we are pleased to report that none of those people will be without a job. Two of the seven will remain in laundry to pick up and deliver linens, four will remain with the hospital as direct client care employees and one found another position outside the hospital. The other positive with this plan is the creation of jobs for offenders in our correctional system. Those jobs are used by Corrections to create attitude and work

ethic changes for future release of offenders back into society. Yes, our laundry will still be clean and sanitary. Provisions are in place to ensure that laundering and handling meet the strict standards required by a hospital. Corrections has been doing their own laundry for many years and also does laundry for the Indiana Veterans Home and Logansport State Hospital.



"The most pathetic person in the world is someone who has sight, but has no vision."

~ Helen Keller

TREATMENT TEAMS

Every patient's treatment plan is reviewed in an interdisciplinary team meeting at least every 90 days. Families of patients are encouraged to be involved in the treatment team meetings.

The treatment team is composed of a coordinator, physician, psychologist, nurse, social worker, activity therapist, and, in

some cases, substance abuse counselors. Letters from treatment teams should be sent every time a master treatment plan or review is being done.

Conference phones are available for family participation in the meetings. Whenever you are calling our toll free number, please al-

low us to call you back immediately on our hospital line. This helps keep the cost of our toll free number down.

If you want to contact a staff member, our toll free number is 1-800-986-6691.



Our Roadmap Journey and Accountability

Judy A. Malone Cole, Clinical Director

The snow has melted, a cool breeze blows with hints of spring—a time of renewal and of new growth—in an era of accountability. From Wall Street to the side streets everyone is talking about how messy things have become—economy, war, health care, unemployment—take your pick of any number of issues confronting us, our families, or our society. For RSH (and we're not alone) being accountable for coercive interventions like seclusion and restraint is a journey through our own culture. Our biggest challenge has been articulating our values and how those values fit with use of restraints and seclusion. And what a journey we have begun.

Accountability in the American Heritage Dictionary is defined as follows: "capable of being explained", or "answerable. For Richmond State Hospital it means explaining care to our consumers, their families and, more importantly, ourselves.

Three years ago, RSH decided to look at how we care and embraced "Roadmap to Recovery"—a modular program from SAMSHA on how to have restraint-free mental health services. We spent 3 full days teaching *everyone* in the organization about the negative impact of seclusion and restraint and how to reduce use. In 2008, we "refreshed" the clinical units and focused on teambuilding and introduced components of recovery. With the help of consultants for the Youth Services Program, we now talk about preventing restraints instead of reducing numbers and how to integrate trauma informed care into our fabric of services. The process for reviewing each incident of restraint and seclusion has changed so that we can learn about how to prevent future events and identify unmet needs. With the help of families, consumers and peer specialists we're planting the seeds of collaboration and embracing family oriented care. We've watched with great pride (and often sur-

prise!) how many consumers move into our communities to become our own neighbors. During this spring, RSH starts its 3rd year of "Roadmap" with the focus on empowering direct care staff to articulate and live their values for care. We will make the connections between what we do that expresses care, respect and dignity. And we will "explain" and be answerable for our care.

We'd like to hear from you of successes and of what we should do better. As you read about our services, look at our data, or reflect on new technologies, we welcome dialogue. It's our business to be answerable for your tax dollars but more importantly, we care for you or your family members in a time of vulnerability and need. What a privilege coupled with awesome responsibility.

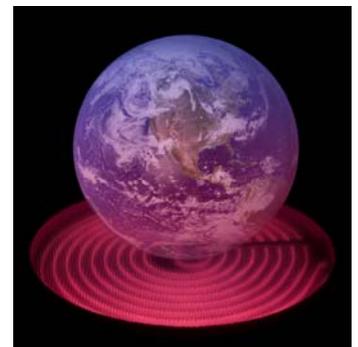
And the journey continues—cultural changes take a time and courage to stay the course.



*Judy A. Cole, Ph.D.,
R.N., Clinical Director*

"We'd like to hear from you of successes and of what we should do better."

~ Dr. Judy Cole



PET THERAPY

Hello Everyone,

It seems like forever since I have given updates and information from Crafts and Pet Therapy. The Craft department is going great and, as always, new things are being taught.

The latest being done is our Cultural Diversity Banners/Quilt. First we are going to make banners out of Cultural Diversity squares. We are making them now and patients and staff will carry the banners in our Carnival parade this summer. Then, after the parade, we are going to make this into a quilt for hanging somewhere on grounds to be enjoyed by our patients and staff. The squares are looking very good with lots of colors and thoughts from our patients. Another new group in crafts is the "Gratitude Group". This group helps us to be grateful for what we have and helps us to push out any negative thoughts that may try to creep into our minds. We are making our own Gratitude beads and bags to hold the beads. If you want to get a serious jump on at-

tracting wonderful things to yourself, try saying "Thank You". Be grateful for what you have. Be grateful for what you know is on it's way to you. Be thankful for the ability to think this way, with clarity and gratitude.

Our Pet Therapy groups our going so well and the golden retrievers enjoy giving love twice a week here at RSH.

We have a new puppy golden which will be joining us very soon for training. She is a Barkley's and Rose's baby. The patients have loved watching her grow. New pictures are posted weekly in the craft room. The puppy is called "Nottie". Once she is certified this will be 6 certified pet therapy golden retrievers supplying the love, empathy, outward focus, nurturing, rapport, acceptance, physical contact, touch, physiological benefits, socialization, entertainment and much more. When the patients are with the dogs, some feel spiritual fulfillment or a sense of oneness with life and nature.

This is a GOOD thing and creates so much wellness for them. We have added a group called "Paws To Relax" with the dogs. Music is played that is designed to nurture the bond between pets and people by creating a relaxed environment serves to reduce stress together. Extensive research and clinical trials has proven that listening to calming music reduces stress, improves our mood, aides overall health and promotes longevity for both pets and people it serves.

Our goal in crafts is total wellness. With hugs given to a dog or by being creative with our hands, we feel we accomplish this goal is reached.

Well until next time have a great Spring and beautiful Summer.

From the Crafts Department and Furry Friends ~ Pam Tibbs and Pet Therapy dogs: Barkley; Angel Marie; Tilly Marie; Rose Marie; Ben; Nottie Marie.



"Nottie" -- the next pet therapy dog at Richmond State Hospital

"My little old dog: a heart-beat at my feet."

~ Edith Wharton



"We never miss the music until the sweet voiced bird has flown away."

~ O. Henry



Volunteers help with their hands and give from their hearts.

VOLUNTEER OPPORTUNITIES

There are many opportunities for volunteers at Richmond State Hospital. If you are interested in volunteering in one of the following areas, please give us a call at 765-935-9218. The following list shows some areas of opportunities.

- | | | |
|---|---|---|
| <ol style="list-style-type: none"> 1. Art Murals 2. Flower Gardens 3. History of Hospital 4. Pond Development | <ol style="list-style-type: none"> 5. Patients Interactions and Activities 6. Bicycle Repair 7. Christmas Room 8. Library Services 9. Pastor Care 10. Donations of exercise and aerobics VHS and DVD tapes 11. Donation of birthday cakes 12. Donation of DVD | <ol style="list-style-type: none"> players and CD players 13. Donation of arts and crafts supplies 14. Donation of denim materials for crafts 15. Donation of clean shoe boxes 16. Donations of pictures for Recovery Center (Peer Building) |
|---|---|---|

PICNICS

Visiting their home counties and seeing family and friends at picnics is something patients look forward to at summer picnics. Among sponsors of picnics are Grant/Blackford County Mental Health Association, Randolph County Mental Health Association, East Central Indiana

NAMI, East Lynn Christian Church in Anderson, and Zion Lutheran Church in East Pershing.

Patients talk about the picnics long in advance of attending one, and long after the picnic is over. How much they enjoy these exciting

events! We really appreciate everything that you and your groups have done to provide picnics for patients. If your group or organization would be interested in sponsoring a picnic for our patients, please contact Richmond State Hospital, 765-935-9218.

"Well done is better than well said."
 ~ Benjamin Franklin

MONEY FOR PATIENTS

If you are interested in providing funds for your loved ones while they are residing at Richmond State Hospital, please write a check or money order which can be deposited at our Business Office. These funds may be sent directly to the Business Office for your family member or given

to their social worker. There is a snack area in the 417 and RTC buildings where patients may spend their money. There is also a large canteen area where patients may shop for snacks, gifts, personal hygiene items, postage stamps, phone cards, etc. Some patients go to local stores

and restaurants. Checks and money orders are held for 10 business days. Postal money orders may be cashed immediately. Please do not send cash in the mail or give family members a large amount of cash. This is for their own protection against theft.



BENEFITS OF AAT, ANIMAL ASSISTED THERAPY, PET THERAPY ~ Submitted by Pam Tibbs

Several benefits of AAT, Animal Assisted Therapy, Pet Therapy are listed below.

- ❖ **Empathy**
Identifying with and understanding the feelings and motives of another. It is easier to teach to be empathetic with an animal than with a human.
 - ❖ **Outward Focus**
Help bring individuals out of themselves. Individuals who have mental-illness or self-esteem focus on themselves; animals can help them focus on their environment.
 - ❖ **Nurturing**
Promotes the growth and development of another living thing. Psychologically, when a person nurtures, his/her need to be nurtured is being fulfilled.
 - ❖ **Rapport**
A relationship of mutual trust or a feeling of connection or bonding.
 - ❖ **Acceptance**
A favorable reception for approval. Animals
- have a way of accepting without qualification. They don't care how a person looks or what they say. An animal acceptance is nonjudgmental, forgiving and uncomplicated by the psychological games people often play.
- ❖ **Entertainment**
At a minimum, the presence of an animal can be entertaining. Even people who don't like animals often enjoy watching their antics and reactions. Especially in long-term care facilities, it seems everyone is entertained by animal visits in some way.
 - ❖ **Socialization**
Studies have shown that when dogs come to visit a care facility, there is more laughter and interaction among residents than during any other "therapy" or entertainment time. In an inpatient setting, the presence of animals encourages so-
- cialization in 3 ways: Between patients; between patients and staff; between patients, staff, and family or other visitors
- ❖ **Mental Stimulation:**
Mental stimulation occurs because of increased communication with other people, recalled memories, and the entertainment provided by animals. In situations that are depressing or institutional, the presence of the dogs serves to brighten the atmosphere, increasing amusement, laughter, and play. These positive distractions may help decrease people's feelings of isolation or alienation.
 - ❖ **Physical Contact, Touch**
Much has been written about the correlation between touch and health. Infants who are not touched do not develop healthy relationships with other people and
- often fail to thrive and grow physically. For some people, touch from a person is not acceptable, but the warm, furry touch of a dog is. A touch of a dog is safe, non-threatening, and pleasant. There are a number of programs for people who have been physically or sexually abused in which staff and volunteers are not allowed to touch the patient. In cases like these, an animal to hold, hug, and touch can make a world of difference to patients who would otherwise have no positive, appropriate physical contact.
- ❖ **Physiological Benefits**
The positive effects on the basic functioning of the body. Many people are able to relax when animals are present. Test have shown that the decrease in heart rate and blood pressure can be dramatic.

2 SMART 2 START

Richmond State Hospital is providing schools a unique opportunity to gain a clearer understanding of the negative effects illicit drugs and alcohol could have in their student's lives. The RSH Substance Abuse Prevention Program, 2 Smart 2 Start, is designed to

provide a strong message to not use or abuse drugs or alcohol.

The Professional Practice Director of Substance Abuse, Sheila Williamson, and the counseling staff are committed to teaching youth how to stay drug/alcohol free.

This is accomplished through handouts, visual aids, panel discussions and presentations.

Don't miss an opportunity for your students to attend this informative, educational prevention program. Call 765-935-9388.



Sheila C. Williamson, MA, LMHC, CADAAC, CLEC, Professional Practice Director for Substance Abuse Counselors

CANTEEN/CLOTHING STORE/THRIFT STORE

The basement of the auditorium has taken on a new look. The hospital is in the process of combining the canteen, thrift store, and clothing store giving the area a shopping mall look. The consolidation is meant to better utilize staff and give our patients and family a

more convenient way to obtain personal items.

Construction began several weeks ago and includes more metal fencing, shelving and dressing rooms. The new "mall" is scheduled to open on April 6. In addition to con-

structing the new mall, we are giving the entire area a freshening up. Look for reconditioning of pool tables, new arcade games and new and refurbished furniture in the near future. We hope everyone finds the area more inviting and fun.

PEER SPECIALISTS OPEN RECOVERY CENTER

The peer specialists started a Recovery Center in the Peer Specialist building. Around 60 people visited during the open house held December 19. This is a place where patients

may visit. The center includes a crafts center, library, visiting room, and a coffee shop. The coffee shop is operated by patients with the supervision of peer specialists. The cof-

fee shop, inside the Recovery Center, had 40 patients at its grand opening. The coffee shop is opened from 1:00 p.m. to 4:00 p.m. on Saturdays.



BASKETBALL TOURNAMENT

Jeff Butler (RSH) and John Clampitt (LaRue) started sports tournaments between state hospitals 34 or 35 years ago. These tournaments still take place. Teresa Morrow and Ron Deane, Rehab Therapists, are busy with patients in preparation for the upcoming Basketball Tournament. Our patients look forward to these games held throughout the year with patients from LaRue Carter and Logansport. These are great times when patients compete with patients in softball, volleyball, and basketball. The sportsmanship, competition, and overall good times are fantastic. We wish all the players a great year!





*Gretchen Gibbs, NP
Director of Nursing*

“I AM A NURSE...”

By Gretchen Gibbs, Director of Nursing

I am a nurse. I can remember the first time I actually said that. It was in 1980, after my pinning at the ceremony for graduation from nursing school. I’ve had a lot of time to reflect on what it means to be a nurse, and I have to say that as I have grown in the profession, the meaning for me has changed through the years. I have always associated nursing with words like caring, compassion, understanding, and knowledge. Sometimes I associate nursing with tasks to perform, assessments to be done, blood pressures to be taken, and medications to be given. Sometimes nursing involves the use of instruments and machines, gauges and thermometers, computers and pumps. Nurses provide care for upset patients, gravely or terminally ill patients, patients who are asleep, patients who are unable to speak, or patients who just need to talk to someone. Nurses are advocates for patients whose needs are difficult to meet and who need someone to speak on their behalf.

I chose to be a psychiatric nurse. I may be biased, but I think psychiatric nurses are extra special. We are often caregivers for individuals who have lost their self-control, who perhaps are at their most vulnerable, and who have become isolated and desperate. It’s our job to reach out to them, to throw them a life-line, to bring them back to a reality-centered viewpoint that will allow them to experience a fullness of life that has been denied them because of the symptoms of their illness. Our relationships with our patients are longer-lasting, and they are often deeper and more personal than other nurses experience with their patients. Those relationships are often difficult to establish, which makes them all the more meaningful and important.

patient’s state of mind or degree of emotional suffering. We realize that healing and recovery from psychiatric illness takes time and is often difficult to see and measure. Those of us who have been in the profession for a while develop skills and knowledge that help us assess patients’ needs and that guide our interventions and treatment. But it’s something we learn with time and experience, not necessarily just from books or computers. We learn from our relationships with our patients, just as they learn from us. I think that’s why psychiatric nurses, and other psychiatric caregivers, are so special...we recognize that the most important instrument we can offer our patients to promote recovery and healing is ourselves and our relationships with them.

Psychiatric nurses don’t have a lot of machines to use in caring for patients. We don’t have a lot of tests that tell us much about our pa-

When you’re a nurse you know that every day you will touch a life or a life will touch yours.

~ Author Unknown



Richmond State Hospital is operated by the State of Indiana and is a Division of Mental Health and Addiction.