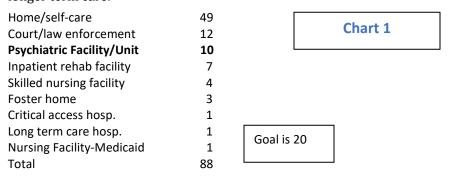


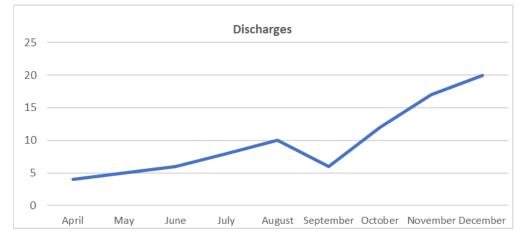
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Superintendent/CMO update

by Jerry Sheward, M.D., NDI Superintendent & CMO of NDI and Indiana SPH Network

I hope everyone made the most of their holiday festivities, and thanks to those who worked shifts and took care of our patients. I want to summarize what we've accomplished as usual, but I also need you to keep reading and absorb some operational issues that need to be addressed. We've admitted 122 individuals since 2/4/2019. We've discharged 88 (see the breakdown in chart 1). As a reminder, the operational goals are 20 admissions/discharges per month based upon operating 133 beds with 95% occupancy with no more than 25% of individuals referred on to the other SPHs for longer term care.





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The NeuroDiagnostic Institute and Advanced Treatment Center, Indiana's newest state psychiatric hospital, delivers advanced evaluation and treatment for patients with the most challenging and complex neuropsychiatric illnesses and moves them more efficiently into the most appropriate treatment settings within the community or state mental health system.

A monthly reflection

Something to think about

"Love, I find is like singing. Everybody can do enough to satisfy themselves, though it may not impress the neighbors as being very much." – Zora Neale Hurston (1891-1960)

Zora Neale Hurston was a folklorist, novelist, short story writer and ethnographer.

Around the NDI

Employee news

We welcome new state employees: Mandy Brooks (BHRA Supervisor), Tiara Crittenden (BHRA), Sharie Daniels (BHRA), Ann Ford (Secretary), Lauren Gay (BHRA), Mackenzie Gray (Nurse), Nathlie Harris (Account Clerk), Lisa Jacobs (Nurse), Derrick King

(BHRA), Cherie Lee-Turner (BHRA), and Marcia Wilson (Account Clerk).

We welcome new agency/contract employees: Tanetra Bonds-Johnson (CNA), Keeley Fischer (CNA), Edilia Montgomery (RN), Cindi Moon (RN), Carine Ndekke (RN), and Dia'Rionna (CNA).

We say farewell to: Joseph Jones (BHRA), McKenna Morris (Secretary), Carmilla Russell (Nurse Supervisor), and Kiana Williams (BHRA).

Good news for your billfold

Governor Eric Holcomb announces pay for performance increase

I am authorizing a pay for performance increase to recognize state employees' work throughout 2019.

Employees who meet expectations will receive a 2 percent raise, employees who exceed expectations will receive a 4 percent raise, and employees rated outstanding will receive a 6 percent raise. The average increase for state employees is expected to be just under three percent.

The changes will become effective in February and be payable the first week of March.

Please accept this as a job well done in 2019 and encouragement for continued success in 2020.

EMC Howard

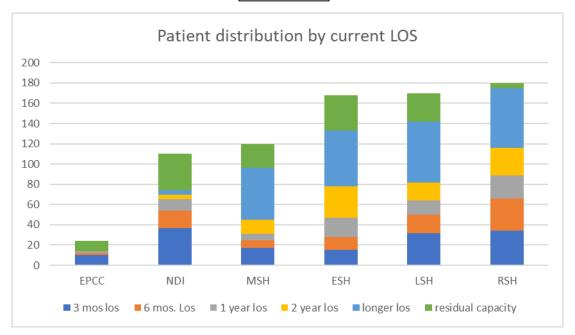
Governor Eric J. Holcomb

Superintendent/CMO update

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We are operating only 110 of the planned 133 beds at this time with full capacity reached before July 2020. This new model is working! See chart 2 for a comparison with the rest of the SPH network.

Chart 2



Our goal is to have nearly all patients fall into the dark blue and orange areas of the graph.

Our current NDI occupancy is only about 72% of current capacity and there are still well over 100 individuals on wait lists to the SPHs, so we need to find ways to increase our pace of admissions as we're currently discharging faster than we're admitting. Christmas and New Year fell such that our ability to admit was impaired, but we're now getting back on track. When we open the 4W unit in March, we'll be adding an additional 13 adult beds, starting with a six or seven census.

We are more richly resourced at NDI, mainly due to our ability to hire professional staff, which some of the other hospitals struggle with. However, I think we're making a case that better resourcing leads to shorter average lengths of stay and improved access. This might be used to extend this intermediate stay treatment model to portions of the other SPHs. Please don't misconstrue these comments. Our sister hospitals care for some of the most difficult and treatmentresistant individuals in the system that our current technologies just can't improve quickly or at all. The goal of NDI is to advance the system collectively. We can't be successful in the long run without our coordinating our efforts with both the central office and the other SPHs. I hope you all understand that I credit each of you with making this model work.

Superintendent/CMO update

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Some operational reminders....

Jeans Fridays means jeans—no sweatpants, leggings and the jeans must not have rips, holes, camos, etc. I must ask that nose rings and other body jewelry be removed if exposed during the work shift. I refer you to PolicyStat for a concise description of what is acceptable and not acceptable. If you're meeting with external agencies, families, or other professionals on a Friday, jeans are not acceptable. Choose your Friday clothes in keeping with your scheduled work requirements that day. No one is going to hurt you if something unexpected comes up that changes your schedule. Just look the part of the professionals you are!

Next is a reminder that our model here uses shared spaces to be used as necessary. Think acute care hospital. Excessive personalization of a space gives the impression that a certain computer or workspace is "yours." Unless you are fortunate enough to have an office, it is not. Such individualism gives off the vibe that something is off limits. Also, a note to physicians and others with assigned laptops: with all the staff and students that are on our units needing Cerner access, please leave the desktop computers to be shared with the rest of staff.

In the coming weeks we will be reviewing the number of students we're currently training and identify the upper limits of what we can handle. We are providing a great training opportunity, which is one of our primary missions, but there are limits to what we can do well.

The next issue concerns Vocera devices. We have "lost" a couple score of these devices since opening. At \$400 a pop, this is a significant expense. We know who last logged onto each device, and some of them haven't been used in over nine months. Please try to remember to clean and replace them in the chargers at the end of the day, and if you've got one hanging around at home or in your car, please bring it back to the hospital. We will be installing a box leading out of the hospital for you to drop them in if you forget, but that doesn't make it available for others right away.

One final announcement: There will be a major update to Cerner sometime in the February/March time frame. I don't know exactly what that will entail, but I didn't want vou to be blind-sided.

Keep the faith. You are making a difference, proven by the statistics above.

It's 2020—time to focus on wellness

by Joshalyn Sutton, HRD

Wellness is a daily commitment, and ActiveHealth will be your partner each step of the way. Get rewarded for your hard work with \$150 in e-gift cards and a 2021 health premium discount!

There are three ways to earn: 1) health assessment: visit http://www.mvactivehealth.com/stateofindiana to complete yours for a \$50 e-gift card; 2) biometric screening: completed biometric screenings are worth a \$100 e-gift card; 3) 2021 premium discount activity:

employees and souses each choose from three separate activity options (activities must be completed by September 30, 2020.

ActiveHealth provides unlimited access to health coaches and a library of health information to help you reach your goals.

If you have any questions, please feel free to contact me or see the Wellness Campaign section on the NDI's Hub page.

State Personnel makes some pay adjustments

Dr. Sheward passes along the good news

The Indiana State Personnel Department will be implementing changes to some job classifications and pay rates. These adjustments will positively affect many, but not all, of our state staff. Affected individuals will receive a letter concerning the change(s).

This is a welcome surprise to us as we did not have any advance notice or direct input into the changes. Having said that, we will continue to advocate for competitive compensation for **all** our employees going forward.

I'm including the information that was sent to me from Britni Saunders, State Personnel director, below.

INSPD continues to assess job classifications, retention, and total compensation across all levels of state government. This review, and subsequent changes, allows us to better understand the impact of a competitive hiring market, and recruitment and retention difficulties. A recent review resulted in changes to certain job classifications and salary ranges that will go into effect on January 26, 2020.

Pay range minimums and maximums will be increased for all clerical, maintenance, security, and PAT 6 classifications.

Employees whose current pay is below the new pay range minimum for their classification will receive an increase up to the new minimum. Please be aware that this may create salary compression among employees within a classification.

Only employees in impacted classifications will receive a letter outlining the change(s): 1) their classification remains the same, but there is a salary change; 2) their classification changes, but there is no salary change; 3) their classification and salary are changing.

These changes are effective January 26 and will be reflected on the February 19, 2020, paycheck. Any changes will be made prior to the application of any pay for performance (P4P) increase and would be in addition to those P4P increases.

INSPD will continue to assess other portions of the state's pay plan throughout the year.

ActiveHealth onsite coaching visits begin

A note from Joshalyn Sutton, HRD

ActiveHealth onsite face-to-face health coaching for 2020 began at NDI on January 22!

Our onsite coach, Sara, will be here again on Wednesday, February 26, from 9 a.m. to 3 p.m. The meetings will be held in the administrative conference room (W111). If you are interested in signing up to meet with her for 20 minutes at her next visit, there is a sign-up sheet outside my office (W120) to the left on the desk. Please keep in mind that **these** appointments are only for state employees who are enrolled in state medical benefits for 2020.

Home sweet home

A note from Assistant Superintendent Patti Clift

It's hard to believe, but it's been almost a year since we moved into our new home here at NDI. So, it seems fitting that we review some housekeeping rules to keep our new home looking new.

Here are the guidelines we used a year ago as we prepared for our move. So, as a friendly reminder....

Guidelines for offices and/or dedicated workspaces: 1) 1-2 drawers for personal items—pens, office supplies, etc., and files (depends on space and number of file cabinets within your work space); for additional needed file space, consider scanning; 2) desks should remain clean and uncluttered; 3) 2 personal items may be placed on a desk; 4) 2 items may be placed on walls by facility teams—individual staff members cannot place items on walls or windows.

Guidelines for touchdown space (shared workspace):

1) office should be mobile—within a backpack; 2) storage area will be assigned by leadership—unit directors and service line managers; 3) no personal items on desks or walls; 4) office supplies will be available in a central area in each team station. To allow for optimal use of shared space and computers, please be mindful that others need to use this space and resources. Unit directors and service line managers are responsible to manage the shared workspace.

Guidelines for reception areas and public staff areas:

1) no paper signs on walls or cubicle walls; 2) desks should remain clean and clutter-free; 3) office and clerical supplies should be stored in a drawer or a neat, safe area on the desk.

Is it a cold or the flu?

Clues from Infectionist Preventionist Caroline Smeltzer, RN

What is the difference between a cold and the flu? Flu and the common cold are both respiratory illnesses, but they are caused by different viruses. Because these two types of illnesses have similar symptoms, it can be difficult to tell the difference between them based on symptoms alone. In general, flu is worse than the common cold, and symptoms are more intense. Colds are usually milder than flu. People with colds are more likely to have a runny or stuffy nose. Colds generally do not result in serious health problems such as pneumonia,

bacterial infections, or hospitalizations. Flu can have very serious associated complications. Special tests that usually must be done within the first few days of illness can tell if a person has the flu.

What are the symptoms of the flu versus the symptoms of a cold?

The symptoms of flu can include fever or feeling feverish/chills, cough, sore throat, runny or stuffy nose, muscle or body aches, headaches, and fatigue (tiredness). Cold symptoms are usually milder than the symptoms of the flu. People with colds are more likely to have a

runny or stuffy nose. Colds generally do not result in serious health problems.

See the next page for a chart with cold/flu comparisons.

Content source: Centers for Disease Control and Prevention, National Center for Immunization and Respiratory Diseases.



SIGNS AND SYMPTOMS	COLD	FLU
Symptom onset	Gradual	Abrupt
Fever	Rare	Usual
Aches	Slight	Usual
Chills	Uncommon	Fairly common
Fatigue, weakness	Sometimes	Usual
Sneezing	Common	Sometimes
Chest discomfort, cough	Mild to moderate	Common
Stuffy nose	Common	Sometimes
Sore throat	Common	Sometimes
Headache	Rare	Common





#FIGHT FLU

