

Division of Mental Health and Addictions.

"People helping people help themselves."

# LSH CARING & SHARING AWARD

# THE SPECTRUM

LOGANSPORT STATE HOSPITAL

Vol. 31, No. 8 August 2021

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L-R: Alexandra Austin,
Rehab. Therapist;
Jeanette Holle,
EMBRACE Vice Chairperson;
AND Dottie Hill,
Rehab. Therapist

# Caring and Sharing Spring Award

Alexandra Austin

&

**Dottie Hill** 

Congratulations Alexandra Austin, RTA, and Dottie Hill, RTA from Larson Treatment Center for being awarded the Caring and Sharing Award; many patients throughout the facility nominated them for this award.

The patients are asked during their community meetings to nominate a staff member they feel possess the following attributes: goes above beyond their job duties; listens to you; is someone you can talk to; is supportive; is helpful; displays professionalism; offers constructive criticism: concerned about you and your treatment; is pleasant and courteous; and is respectful.

Thank you to all the wonderful staff that were nominated for exemplifying the characteristics of the Caring and Sharing Award and for making a difference in patient's lives.

Other successful Nominee's that made the Caring and Sharing Spring list were: (List is given as listed, and may be spelled incorrectly and not in any certain order) Lisa H.; Jamie S.; Pastor Greg; Sonja Stout; Joyce Holland; Dr. Becker; Sue Manalo; Joy Scott; Norma Cas; Jennifer Grandstaff; Mindy Ray; Ronica; Morgana Thomas; Dr. Meadows; Dana Thompson; Shawna Strickland; Coreen S.; Ashley Pollard; Jennifer Davis; Monica Ervin; Kenny Z.; Amber B; & Terri Overpeck.



#### POSITIVE DEVIANTS

Do you consider yourself a deviant? Hopefully you are, at least sometimes because a positive deviant is someone who, by all rights, ought to have a problem but for some reason does not. The positive deviant faces the same challenges as others in the same group yet has found a way to succeed. Why? Most often, there are one or two *vital behaviors* that sets the person (or the group) apart which leads to success despite being in the same condition as others. Here are a couple of examples -

a) A hospital system has noted an increase in infectious disease hand hygiene is identified as a book Influencer by Grenny. The hospital puts Patterson et al. cause. measures in place to improve hand hygiene by modifying training, policy, units to measure hand washing rotation a positive deviant?

speaking up.

crvina. children. Other experience. behavior. It is a small thing with model? Be a positive deviant! big return.

among hospital patients. Poor The above was adapted from the

this question: Are you a positive for details. creating prompts, and auditing deviant? Is your department or shift compliance. One unit stands tell you that I spot positive deviants out among the rest, and it is throughout this hospital. These are Bethany Schoenradt identified that the vital behaviors individuals who are faced with the Superintendent that set that unit apart was that same conditions, the same stress, Logansport State Hospital the team would remind each the same situations yet their outlook

other verbally and it was okay is different, their attitude is different, for anyone to prompt others if their approach to problems is they noticed lack of proper different. They are problem-solvers hand washing hygiene. That and are mission-focused. They do unit was a positive deviant set not gossip. They do not spread apart by the vital behavior of rumors. They work to lift others up. They work hard. They find a way b) A group of flight attendants and put others above self. They were headed to a hotel after are authentic and assertive. They carrying multiple screeching, take action. If you are not a positive out-of-control *deviant*, ask yourself why. How can One flight attendant you become one? What *vital* starting moaning about the behavior is needed? What if you flight are a positive deviant but your attendants began to join in the department or team is not? What conversation. Pretty soon they one or two things can be put in were one-upping each other's place to improve culture and morale tales of woe (sound familiar?). in your circle of influence? If a All but one. One flight attendant whole group of people will not just listened with a puzzled look agree to work together toward that until someone asked her what goal, start with five people, three was up. She said she didn't people or even just you alone. And suffer these same experiences may I be so bold as to ask you to and pointed out some small toys kindly redirect others when needed she keeps in her bag to help and give reminders to be positive? keep the children occupied And most importantly, can I ask you during the flight. This is a vital to set a good example and be a role

desk...

Remember, we have an updated Code of Conduct, be sure to review it in Policy Stat, and a "New **Dress Code** "that is effective September 13<sup>th</sup>. As a reminder, adding I would like to challenge you with you can review both in Policy Stat

I can Thank you,

SPECTRUM **Logansport State Hospital** 1098 S. State Rd. 25 Logansport, Indiana 46947

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## **POLICY UPDATES**

# The following LSH policies were reviewed/updated in July (All Staff are to read all changed Policies)

- A-63 LSH Acceptance of Patient Mail and Packages LSH abbreviation correction.
- C-27 Code Blue/Serious Medical Event Amended to add Serious Medical Event to title and through out policy. Direction on how to call for an ambulance was also added.
- C-38 Sentinel Event / Root Cause Analysis –
   Updated with revised Joint Commission definitions of Sentinel Event, Severe Harm, and Permanent Harm.
- C-45 Critical Tests / Critical Results Updated with new critical lab values established by Medical Staff/Quest.

LSH Policies referenced can be found on the LSH intranet site in PolicyStat by following these steps:

- Go to LSH intranet home page
- Click on "Hospital Policies (PolicyStat)" buttontop center of home page outlined in green
- PolicyStat User Name is your state email address
- Once in PolicyStat, use the search bar to find policies by number, name or key word
- To find FSSA, DMHA, and other SPH policies, click on "change location" in the blue bar at the top of the page

Policies available on PolicyStat are the current and official policies.





# **Updated MASK Guidance for FSSA Employees**

Good afternoon.

I wanted to make you aware of recommendations from SPD on masks at work and working from home. The guidelines are attached but here is a summary:

- All employees (vaccinated and unvaccinated) are encouraged to wear masks in common areas of all state buildings. This is places like conference rooms, elevators, hallways, or other spaces where you would be close to others. This does not apply to our health care settings where masks are required still (e.g., state hospitals)
- You can work from home if you have a child who has to quarantine or isolate at home because of a positive COVID test or school/childcare action. You will be required to provide a doctor's note, school or childcare note.

There are more details in the SPD document and in the mask guidance document above. <u>Please read</u> them.

One thing that has not changed is that *the single* most important thing you can do to protect yourself, your family, and your co-workers is to **get** vaccinated.

If you have questions on the vaccine, its side effects, or on when you need to isolate, or quarantine feel free to reach out to Dr. Finnell in Medicaid (she is a pediatrician) or myself. You can email me at <a href="SecOffice.FSSA@fssa.in.gov">SecOffice.FSSA@fssa.in.gov</a>.

If you have questions about working from home, time off, cleaning requirements, etc., please feel free to reach out to your supervisor or director. For supervisors and directors, if you have questions or need clarification on this feel free to reach out to your business unit, HR manager or our Chief of Staff Michael Gargano.

Dan

#### Dan Rusyniak, MD

Secretary, Indiana Family and Social Services Administration 402 W Washington Street, W461 Indianapolis, IN 46204

# Wearing a Mask while Inside in Crowded Rooms is a Thoughtful and Logical Thing To Do Background

The virus that causes COVID-19 easily

- spreads from person to person and in some people thevirus causes severe illness and death.
- Initially, we only had a few ways to protect ourselves from getting sick and prevent spread. Wewore masks, we physically distanced ourself from others, and we washed our hands.
- The arrival of the vaccines was a gamechanger. The three currently available COVID-19 vaccines (i.e., Pfizer, Moderna, and Johnson & Johnson) are all great at preventing severe disease and death.
- As more and more people got vaccinated, CDC said that people who are vaccinated do not needto wear masks indoors.
- July 27<sup>th</sup> 2021 CDC changed this recommendation. Now they advise that during certain conditions even fully vaccinated people should wear masks indoors. The Indiana Department of Health also makes this recommendation.

#### So, what changed?

- The virus changed!
- The way a virus spreads inside of you is by making copies of itself. As it makes copies of itself it often makes some that are not quite perfect copies. Some of these new copies of the virus workeven better than the original. These virus changes are called mutations.
- When mutations result in virus that is easier to spread from person to person, or in a virus thatis getting people sicker, we call the changed virus a variant of interest. The Delta Variant (B.1.617.2) is a variant of interest as it spreads much easier that the original virus.
- While our currently available vaccines are still great at keeping people from getting very sick ordying, they are not as good at preventing someone who is vaccinated from spreading the DeltaVariant to others.
- How do we know this? We know because the CDC is seeing outbreaks of COVID-19 among fully vaccinated individuals. The reason is that the Delta Variant is really good at making a lot of copies of itself. So, people with COVID-19 from the Delta Variant have more virus in the nose and mouth than people with the previous versions of the virus. Vaccinated people get infected with the Delta Variant less often than unvaccinated people, but when they get infected they can also have large amount of virus.

 Almost all the cases we are seeing in Indiana right now are coming from the Delta variant. Cases of COVID-19 are as high as they have been since this time last year.

So, what does all this mean for you at work?

#### Recommendations

- If you are unvaccinated the recommendations have not changed:
  - You should still wear a mask in public and at work
  - b) You should still physically distance yourself from others when in crowded places
  - c) You still need to quarantine if you are a close contact\* with someone who has COVID -19
  - d) You still need to isolate at home is you test positive for COVID-19

If you have not gotten a vaccine the pandemic has not changed for you. You are still at risk of getting sick and of spreading the virus to others.

# 1) If you are fully vaccinated some recommendations have changed

- a) If community spread is high (right now it is high almost everywhere in the state) and you arein a common indoor location, you should now wear a mask.
- b) You still don't need to physically distance yourself from others if wearing a mask.
- c) You still do not need to quarantine if you are close contact\* with someone who has had COVID-19 but you

- should get a COVID-19 test 3-5 days after the close contact. You should alsowear a mask at all times at work for 14 days, or until you receive a negative test result.
- d) You still need to isolate at home if you test positive for COVID-19 (this has not changed) Common questions

If I am fully vaccinated, where do you recommend that I wear a mask?

- In common indoor locations – Places like an elevator, a small conference room, in a car with others, on public transportation, etc.
- Anywhere you want –
   wearing a mask is an
   individual decision and
   you can wear one
   anywherein our agency.
   You may have
   unvaccinated children at
   home, a family member
   who is at risk of severe
   disease if they get
   COVID-19, or you may
   just not want to get sick.

If I am fully vaccinated, do I need to wear a mask outdoors?

In most situations, No.
 The virus spreads less effectively outside.

If I am fully vaccinated, do I need to wear a mask in my office or at my cube?

 In general, No. Being vaccinated greatly reduces your chance of getting COVID-19 even from the Delta Variant. This means that if working quietly alone at your desk you don't need a mask.

Will we have to wear masks forever at work?

 No. Right now it is only recommended to do so while community spread is high. When cases go down in our communities so will need to wear masks indoors.

#### **SUMMARY**

- All COVID-19 vaccines are still effective at preventing severe disease and death.
- The Delta Variant spreads easily so even some vaccinated people will now get and spread COVID-19.
- Because children and a lot of adults are not vaccinated, it is recommended that everyone wearmasks in common indoor locations.
- This is a temporary recommendation only while community spread is high.

\*Someone who was within 6 feet of an infected person a cumulative total of 15 minutes or more over a24-hour period. (Exception: In the K–12 indoor classroom setting only, the close contact definition excludes students who were within 3 to 6 feet of an infected student if both the infected student and the exposed student(s) correctly and consistently wore well-

fitting masks the entire time.)



#### Covid News!

COVID-19 Vaccine: It's our shot, Hoosiers
Learn more or find a vaccination site near you at OurShot.IN.gov.
Save time by making an appointment, but walk-ins are welcome.

Here's a breakdown of how the vaccine is working in Indiana:

#### BEST reasons to get vaccinated

Once you're fully vaccinated (two weeks after the last dose), you can start doing many of the activities you stopped because of the pandemic:

- Gather indoors with fully vaccinated people without wearing a mask or staying 6 feet apart
- Visit friends and family in long-term care facilities in your loved one's room without a mask on; physical contact is OK again
- Students can stay in school because they won't have to quarantine, even if they're a close contact of someone with COVID-19 or



were exposed while participating in sports. You don't have to quarantine if you are exposed to COVID-19 (except in rare cases where congregate living is involved), unless

you have symptoms of COVID-19.

- You're protected and have little chance of being infected so you're less likely to give the virus to others.
- Fully-vaccinated individuals don't need to wear a mask as outlined by the CDC, except in select state government facilities, COVID-19 testing and vaccination sites, and as required by local authorities, and as instructed in healthcare facilities.

#### Vaccine by the numbers



All three vaccines available in Indiana have been studied by experts and are safe and effective. COVID-19 vaccines are successful in preventing severe

illness and death.

- Each of the three vaccines is 99 effective at preventing severe illness and death.
- Unvaccinated Hoosiers make up 99.3% of COVID-19 cases in Indiana.

Know the risks of hospitalization if you are infected with COVID-19:

#### **FULLY** vaccinated



1 in 50,394 YOUR ODDS OF BEING **HOSPITALIZED AFTER BEINGFULLY IMMUNIZED** 

#### NOT vaccinated



YOUR ODDS OF BEING **HOSPITALIZED** WITHOUT VACCINATION (**JAN 18-NOW**)

#### **Experts continue to study** the vaccines



COVID-19 Vaccine: It's our shot, Hoosiers
Learn more or find a vaccination site near you at OurShot.IN.gov.
Save time by making an appointment, but walk-ins are welcome.

A serious reaction to any of the three vaccines is rare. If one does happen, it's reported to the Vaccine Adverse Event Reporting System (VAERS) and studied by medical experts. That's how the risk of rare butserious blood clots with low platelets from Johnson & Johnson vaccine was discovered. It is important tokeep in mind the low risk of this rare adverse event compared to the greater risk of getting COVID-19.

#### Know the risk:

Risk of getting blood clots with low platelets from Johnson & Johnson:

- 1 per million for men of all ages and women 50 and older.
- Seven per million for women ages 18-49

Risk of getting blood clots from a COVID-19 infection:

- 165,000 per million
- The mRNA vaccines like Pfizer and Moderna have not shown any increased risk of clotting.
- What the vaccine doesn't do
- The vaccine won't change your DNA. The vaccine simply teaches our immune system how to make a protein that will trigger an immune response if infected. It doesn't change the make-up of your cell's DNA.

- There is no evidence that COVID-19 vaccines cause fertility problems or problems trying to get pregnant.
  - Although the overall risk of severe illness is low. pregnant people are at an increased risk for severe illness from COVID-19 when compared with non-pregnant people. Additionally. pregnant individuals with COVID-19 might be increased risk of adverse pregnancy outcomes, such as preterm birth, compared with pregnant women without COVID-19.
- The vaccines don't contain a microchip or any other sort of device. It is not a tracking mechanism.
- A COVID-19 vaccine can't make you sick with COVID-19. None of the authorized and recommended COVID-19 vaccines contain the live virus that causes COVID-19.
- After you get a COVID-19 vaccine, you won't test

## positive for COVID-19 on a viral test.

None of the authorized and recommended COVID-19 vaccines cause you to test positive on viral tests, which are used to seeif you have a current infection. If your body develops an immune response to vaccination, you may test positive on some antibody tests. Antibody tests indicate vou had a previous infection and that you may have some protection against the virus.

- The vaccine provides protection even if vou've had COVID-19. The odds of getting COVID-19 again increases with time natural immunity decreases. Variant viruses (such as the B.1.1.7 variant or B.1.1.28 variant) has been reported in several countries. Vaccination can help reduce the chances of both reinfection and infection from a COVID-19 variant strain.
- An allergic reaction to the vaccine is rare. The CDC recommends that people get

vaccinated even if they have a history of severe allergic reactions not related to vaccines or injectable medications—such as food, pet, venom, environmental, or

latex allergies. People with a history of allergies to oral medications or a family history of severe allergic reactions may also get vaccinated. Risk of an anaphylactic reaction has been reported to be 2.5-5 per million. Talk with your healthcare provider.

# Who can get the vaccine?

The Pfizer vaccine is approved and available for anyone age 12 and older. The Moderna and Johnson & Johnson (Janssen) vaccines are approved and available for anyone age 18 and older.

#### Learn more at OurShot.IN.gov.



# Indiana State Government COVID-19 Guidance & Frequently Asked Questions

#### Updated Aug 12, 2021

The following guidance document and corresponding FAQ provide assistance for state employees and managers during the COVID-19pandemic. The information included in this document combines resources from the Indiana Department of Health (IDOH) and the Centers for Disease Control and Prevention (CDC). Additional information and guidance can be found at each of their websites.

This document may be updated frequently as further guidance isavailable and conditions change.

Answers provided in this document may differ for 24/7 operations. Contact your manager and HR representative with additional questions.

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# Section 1: Workplace Prevention Measures

#### What has changed?

According to the Centers for Disease Control and Prevention (CDC), fully vaccinated people canparticipate in many of the activities they did prior to the pandemic (see <a href="When You've Been Fully Vaccinated">When You've Been Fully Vaccinated</a> | CDC).

Fully vaccinated state employees, including contractors and temporary employees:

- No longer need to wear a mask or physically distance when working in most state government buildings or on state government property, except where required by federal, state, local, tribal, or territorial laws, rules, and regulations, including local business and workplace guidance;
- Are encouraged to wear masks inside common areas of all state buildings to maximizeprotection from the Delta variant and prevent the spread.
  - o This includes conference rooms and other confined spaces.
  - o When state employees are in another work setting outside of their normal location, masks are recommended in public areas when there is <u>substantial or</u> high transmission:
- Do not need to quarantine after a known exposure to COVID-19 unless they have

- symptoms. They are required to be tested 3 to 5 days following the exposure and shouldwear a mask in public indoor settings for 14 days <u>or</u> until they received a negative test, whichever occurs first;
- Are not required to complete the daily COVID-19 screenings; and
- May resume domestic travel and are not required to get tested or to self-quarantine following domestic travel.

COVID-19 vaccinations are not required for employees to return to the workplace; however, employees are highly encouraged to be vaccinated. Fully vaccinated state employees, including contractors and temporary employees, no longer need to wear masks or physically distance when working in most state government buildings or on state government property. However, To maximize protection from the Delta variant and prevent possibly spreading it to others, it is recommended you wear a mask in public settings if you live or work in an area of substantial or high transmission.

Masks must be worn by all individuals present inside state government congregate facilities which are the Indiana Department of Correction prisons, the State Hospitals, the Indiana Veterans Home, and the Indiana Law Enforcement Academy. Additionally, masks must be wornby all patients, administrators, and others present at a COVID testing or vaccination site. The specific guidelines are spelled out in Executive Order 21-15.

Being vaccinated is the best protective measure against COVID-19 and allows you to resumenormal workplace and daily activities.

What does "fully vaccinated" mean?

People are considered fully vaccinated:

- Two weeks after their second dose in a two-dose vaccine series, such as Pfizer or Moderna vaccine; OR
- Two weeks after a singledose vaccine, such as Johnson & Johnson (Janssen) vaccine.

If you don't meet these requirements, you are NOT fully vaccinated. If you are not fully vaccinated, keep taking all precautions (How to Protect Yourself & Others | CDC) until you are fully vaccinated, including wearing a mask in the office and socially distancing. You are still required to return to your designated work location if you are not yet fully vaccinated.

## Where and how can I get vaccinated?

More than 1,000 vaccination sites are operational throughout Indiana. A vaccination site map is located at ourshot.in.gov. with at least one vaccination site available in every county. You can select a county from the drop -down menu and then select a site that is convenient for you and register online. You can also call 211 to schedule an appointment: however, appointments are not required—all sites take walk-up requests. You will not be asked for identification, proof of residency, or your social security number. Different sites offer different types of COVID-19 vaccines—Pfizer, Moderna, or Johnson & Johnson—and many sites offer more than one type.

## How well do COVID-19 vaccines work?

COVID-19 vaccines are safe and effective at protecting you from getting sick. When you are fully vaccinated, your chances of

being hospitalized by COVID-19 are 1 in 50,394. When you are not vaccinated, your chances of being hospitalized by COVID are 1 in 525. Unvaccinated Hoosiers now make up the majority of COVID-19 cases in Indiana. All three vaccines are veryeffective at preventing even mild illness.

Many people feel some side effects after getting COVID-19 vaccines, such as pain or swelling where the shot was given, headache, fatigue, chills or low-grade fever, and body aches. Side effects will resolve on their own within a couple of days. This is normal and means that your immune system is working to build immunity. None of these vaccines contain live virus, so noneof these vaccines can give you COVID-19.

# What has been done to enable employees to safely return to work?

The following changes have been made to state worksites to help ensure safety:

- Required Daily Health Self-Screenings for Employees
   Employees should conduct a daily self-assessment before leaving home to come to work.
- Employees with a fever at or above 100.4 degrees
   Fahrenheit should contact theirmanager and stay home.
- Employees with symptoms such as a cough, trouble breathing, new or unusual headache, body aches, new fatigue, sore throat, new or unusual sinus congestion, or new loss of taste or smell should stay home and call their manager and health care provider.
- Additional details on daily health screenings are included below.

Employees who are sick should not come to work.

It is critical for all employees to self-monitor, communicate, and take action when symptoms are present. Employees should screen themselves frequently throughout the workday and ata minimum before leaving for a worksite and upon arrival at a worksite.

If you are a close contact of someone who has tested positive for COVID-19, or if you havesymptoms of COVID-19 and are not vaccinated, you should not report to work and contact your supervisor. Employees will use accrued time for any work time missed.

#### 2. <u>Proper Handwashing & Hand</u> Sanitizing

One of the most important steps employees can take to stop the spread of the virus is to wash their hands frequently. Employees should review the CDC's guidance at When andHow to Wash Your Hands | Handwashing | CDC on proper handwashing to ensure their technique is effective. Employees should use hand sanitizer when they cannot wash theirhands with soap and water. Additionally:

- Handwashing signs have been placed in all restrooms.
- Hand sanitizer is located on each floor inside of agency entrances. Employees may bring their own hand sanitizer and additional cleaning supplies, if desired.
- Employees should wash hands regularly throughout the course of the workday.

3. Cleaning and Disinfection Cleaning is being performed in compliance with the latest CDC guidance at <a href="https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html">https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html</a>. Inmost situations, regular cleaning (at least once a day) is enough to sufficiently remove SARS-CoV-2 virus that may be on surfaces.

More frequent cleaning might be needed when the space is occupied by <u>young children</u> and others who may not consistently wear masks, wash hands, or cover coughs and sneezes. Consider the following:

- If someone has been ill or tested positive for COVID-19 in the facility within the last 24 hours, the workplace will be cleaned and disinfected.
- Employees are responsible for regularly cleaning their own personal offices or workspaces (cubicles, etc.).
- Follow routine elevator/ escalator capacity. Unvaccinated individuals must wear masks when using elevators or escalators when they are within six feet of others atall times.
- Mask requirements
   Fully vaccinated employees are not required to wear masks or physically distance in publicplaces, including the Indiana Government Center (IGC) and other state work locations.
- However, to maximize protection from the Delta variant and prevent possibly spreading it to others, state employees, regardless of vaccination status, are encouraged to wear masks inside common areas of all

state buildings. This includes conference rooms and other confined spaces. When state employees are in another work setting outside of their normal location, masks are recommended in public areas when there is <a href="substantial or high">substantial or high</a> transmission.

Employees who are not fully vaccinated are still required to wear masks in public settinas, includina government buildings and properties, and are still required to maintain at least sixfeet of distance from others. Employees are encouraged to use their own personal, reusable masks at work to reduce the use of disposable masks. Although agencies have been provided a supply of disposable masks, they are not recommended as a longterm solution for employees. Cloth masks that can be sanitized after each use or simple surgicalmasks are acceptable.

- 5. Changes at the Indiana
  Government Center
  Each agency has
  established a plan to ensure
  appropriate cleaning and
  social distancing ateach
  government office, such as
  branch offices or other
  operational facilities.
- Certain doors have been left open to facilitate air flow and air exchanges. Building HVAC systems have been adjusted to increase the intake of outside air and to helpwith increased circulation.
- Hand sanitizing stations have been placed in common areas and at public andemployee entry points.

- Signage has been placed on employee and public entry doors advising anyone experiencing symptoms or not feeling well not to enter the building. Signs are available in multiple languages.
- 6. Government facilities not part of the Indiana
  Government Center
  Each agency has established a plan to ensure appropriate cleaning and social distancing ateach government office, such as branch offices or other operational facilities.

1State employees and facilities are required to follow local ordinances that may be morestringent than what has been imposed by the state.

#### 7. Visitors

Visitors who are fully vaccinated do not need to wear masks when visiting state facilities.

 To maximize protection from the Delta variant and prevent possibly spreading it to others, it is recommended visitors wear a mask in public settings when in an area of substantial\_or\_high transmission.

Visitors who are not fully vaccinated should wear masks and always maintain social distancing guidelines. Disposable masks and hand sanitizer are available for visitors.

#### Section 2: Daily Health Self-Screening for Unvaccinated Employees

# How should employees who do not use a computer daily ensure they are conducting thehealth self-screening each day?

Employees should conduct the required health self-assessment before leaving home to come to work each day. Employee health self-assessment posters have been posted at all worksites in multiple locations where employees will see them. Posters have been placed on all worksite entrances and exits, sign-in/clock-in areas, daily briefing locations, nearby restrooms, and any other appropriate areas for posting employee information.

# Are employees required to document their answers to these questions?

No, employees are not required to document their answers; however, if an employee answers "yes" to any of the questions while at their worksite, they should contact their manager to discuss next steps, and call their health care provider. The Anthem NurseLine will provide a freesymptom screening for anyone on an Anthem health insurance plan by dialing 800-337-4770. Additionally, IU Health offers free virtual COVID-19 screenings for Indiana residents, and the CDC offers a self-checker tool at no cost to users.

# Section 3: When an employee is displaying COVID-19 Symptoms

What should employees do if they have symptoms consistent with a known cause, suchas seasonal allergies or asthma? Employees who have symptoms that correspond to a known cause (asthma, chronic sinusitis, allergies, etc.) should proceed to work as normal unless they perceive a change or increase in the severity of their symptoms. Anyone who is unsure or observe a change or increase in severity of their symptoms should stay home and get tested.

# What should employees do when they have symptoms consistent with COVID-19 that arenot associated with a known cause?

Employees who have symptoms that do not correspond to a known cause (asthma, chronic sinusitis, allergies, etc.), even if they are fully vaccinated, must leave the worksite, stay home, and contact their manager, HR, and health care provider. They should get tested for COVID-19 (testing sites available at <a href="https://www.coronavirus.in.gov">www.coronavirus.in.gov</a>) and stay home until their results are available.

Section 4: When an employee is exposed to COVID-19

#### What should employees do if they have been exposed to someone with a confirmed case of COVID-19 in the last 14 days?

Employees who are fully vaccinated, and not symptomatic, do not need to quarantine and cancontinue to work on-site. However, the employee should self-monitor, and be tested 3-5 days after exposure, socially distance, and wear a mask for 14 days or until they receive a negativetest result.

Employees who are not fully vaccinated and who believe they were in close contact with someone who tested positive must notify their manager and HR department. Employees who have been in close contact (less

than six feet of distance for more than 15 minutes total in a day) during the two days prior to the positive person's beginning of symptoms through the timethat person was isolated or in the two days prior to an asymptomatic person's date of collectionof their positive test through the time that person was isolated, should be instructed to quarantine according to the following CDC guidelines. Employees will use accrued leave time for the duration of quarantine.

- 14-day quarantine: CDC continues to recommend quarantine for 14 days and recognizes that any quarantine shorter than 14 days balances reduced burden against asmall possibility of spreading the virus. A full 14-day quarantine has the least risk of spreading the virus.
- 10-day quarantine: A 10day quarantine is an acceptable alternative to a 14-day quarantine. Individuals who remain asymptomatic may discontinue quarantine after day10 without the need for a negative test. It is critical that individuals using this option diligently self-monitor for symptoms, wear a mask at all times (except in personal workspaces and while eating), socially distance, practice effective hand hygiene, and avoid crowds for the full 14 days.
- Individuals may use the seven-day quarantine option with a negative test. The test must be collected on day five or later, and negative results must be received before ending quarantine.

  Quarantine must not end before a full seven days.

It is critical that individuals using this option diligently self -monitor for symptoms, wear a mask at all times (except in personal workspaces and while eating), socially distance, practice effective hand hygiene, and avoid crowds for the full 14 days. Close contact criteria will apply regardless of mask use, face shields, or physical barriers, suchas Plexiglas or plastic barriers. If these employees develop symptoms, they should contact their health care provider and get tested for COVID-19.

#### Section 5: When an Employee Tests Positive for COVID-19

Employees who are symptomatic and test positive should selfisolate at home for at least 10 days after the onset of symptoms and 24 hours after resolution of their fever (without the use offever-reducing medications) and improvement of symptoms. If the employee is asymptomatic and tests positive, the employee should self-isolate at home for 10 days after the date of collection of the positive test. Employees will use accrued leave time for the duration of isolation.

Employees are required to immediately report their positive test results to their manager and HRrepresentative. Immediate notice is critical in order to adequately notify impacted employees and help ensure that CDC recommendations are followed.

HR and impacted managers will inform impacted employees of their possible exposure to COVID-19 in the workplace but maintain confidentiality as required by the Americans with Disabilities Act (ADA). Under the

ADA, employers are required to maintain the confidentiality of any medical information they receive, including the name of the affected employee. This requirement allows employers to notify potentially impacted employees and take action appropriately but prevents unnecessary sharing of personal health information with other employees.

Additionally, all state employees should respond to requests for information from the IDOH contact tracers and investigators who gather information about the patient's symptom onset and close contacts in order to prevent further spread of illness.

# When an employee tests positive for COVID-19, please consider these cleaning guidelines:

- If someone who is ill or has tested positive for COVID-19 worked within the last 24 hours, clean and disinfect the spaces they occupied.
- Close off areas used by the employee who tested positive.
- In conjunction with HR, impacted employees will be reassigned to a temporary alternatework location. If an alternate work location is unavailable, your HR representative will work with the Indiana State Personnel Department (INSPD) to determine if any other viable work arrangement exists.
- Open doors and windows and use fans or HVAC (heating, ventilation, and air conditioning) settings to increase air circulation in the area.
- Use products from <u>EPA List</u>
   <u>N</u> according to the
   instructions on the product
   label.
- Wear a mask and gloves while cleaning and disinfecting.
- Focus on the immediate areas occupied by the person who is sick or

- diagnosed with COVID-19 unless they have already been cleaned and disinfected.
- Vacuum the space if needed.
  Use a vacuum equipped with
  high-efficiency particulate air
  (HEPA) filter and bags, if
  available.
  - While vacuuming, temporarily turn off inroom, window-mounted, or on-wallrecirculation heating, ventilation, and air conditioning systems to avoid contamination of HVAC units.
  - Do NOT deactivate central HVAC systems. These systems provide better filtration capabilities and introduce outdoor air into the areas that they serve.
- It is safe to wash dirty laundry from a person who is sick with COVID-19 with otherpeople's items, if needed.
- Ensure safe and correct use and storage of cleaning and disinfectant products, includingstoring such products securely and using PPE needed for the cleaning and disinfection products.
- If more than 24 hours have passed since the person who is sick or diagnosed with COVID-19 has been in the space, cleaning is enough. You may choose to also disinfectdepending on certain conditions or everyday practices required by your facility.
- If more than three days have passed since the person who is sick or diagnosed with COVID-19 has been in the space, no additional cleaning (beyond regular cleaning practices) is needed.
- See CDC guidance at <u>Cleaning and Disinfecting</u> Your Facility | CDC.

# What should employees who are not fully vaccinated do if they test negative for COVID-19?

An employee who is a close contact, who then subsequently tests negative for COVID-19 on day five (5), six (6), or seven (7) of their quarantine, can discontinue their quarantine as long asthey have not developed any symptoms.

Note: If the employee is ill or experiencing symptoms that do not correspond with a known cause (e.g., allergies), they should remain home, consult a health care provider, and get testedfor COVID-19. The employee should remain home until results are available.

# Section 6: Return to Office Plans & Alternate / Remote Work Locations

# Are employees required to return to a designated state work location (e.g., Indiana Government Center) upon notification from agency leadership?

Yes. Many state employees have continued to work at their pre-COVID-19 worksite or have already returned. Beginning June 7, all agency heads, senior staff and supervisors should be intheir pre-pandemic work locations full time. No later than June 21, all non-supervisory employees should report to their pre-pandemic work locations for at least 50 percent of their work week. No later than July 6, all employees should report to their pre-pandemic locations fulltime, and hybrid schedules will end. Employees who had alternate work arrangements before March 2020 may resume or continue those arrangements. All employees who have been working from home as a result of the pandemic are required to return to their state on-site work locations on a full-time basis,

including employees who worked on the Indianapolis campus, or a state facility located in another part of the state.

## Can employees continue working remotely?

No, unless an employee worked remotely or had an alternate work schedule before the pandemic began. Microsoft TEAMS meetings should be limited to those with outside entities. Internal meetings should be conducted in-person to encourage interactions among employees.

#### What should employees do if they have a child who is required to quarantine or isolate athome because of a positive COVID test or school or childcare action?

The employee may work remotely when documented proof from a physician, school corporation, or childcare provider is provided to the agency. The documentation must include the start date of quarantine/isolation and the expected conclusion. The employee must follow guidelines for COVID testing and quarantine/isolation provided by the state Department of Health. In addition, the employee and supervisor must document work hours each day and provide written documentation of work produced while working remotely. The employee must return to the work site the first workday following the conclusion of the quarantine/isolation.

# What if employees are unable to work in the office for a reason related to COVID-19 (health concerns, etc.)? Employees who are unable to return to work for a reason related to COVID-19 may qualify for Family Medical Leave (if related to health issues) or the use of other leave options. For questions regarding leave types, employees should contact their manager and/or HR representative or INSPD's

Employee Relations division at 317-234-7955.

#### What should an employee do if they need a reasonable accommodation under the Americans with Disabilities Act (ADA)?

Agency leadership and HR will work together with the employee to review any accommodation requests.

# What if an employee is unwilling to return to their worksite?

Without any approved accommodation or other exception(s), employees must report to theworksite determined for their position by their agency.

# Section 7: Childcare Resources

Employees who are unable to return to work because of childcare challenges related to COVID-19 should explore the childcare solutions available across Indiana.

Indiana families have two easy, free services to help them find care.

- The FSSA Child Care Finder can assist employees in finding childcare on the way to and from work. This search tool is easy to use and allows families to apply filters to theirnarrow their search by a specific location, age group, or provider type. The FSSA Child Care Finder generates results limited to providers currently licensed or registered with the state of Indiana.
- 2. Families can also call the Brighter Futures Indiana staff at 1-800-299-1627 from Monday-Thursday between 8 a.m.-7 p.m. or Friday between 8 a.m.-5 p.m.

Financial support for childcare is also available.

- 1. In May 2021, Build, Learn, Grow launched a scholarship fund to help rebuild early care and education enrollment. The program offers families of essential workers scholarships covering up to 80% of their childcare costs for kids age 0 -12, including summer programming and camps. Initially, a family needed to be at or below 250% of the federalpoverty level to qualify; however, those restrictions were recently removed and a family at any income level can qualify if at least one parent works in an essential service. Families can visit to https:// brighterfuturesindiana.org/ scholarships/ families to complete an application and review programs in Indiana that have already agreed to accept the scholarship.
- 2. Families can visit the <a href="https://brighterfuturesindiana.org/">https://brighterfuturesindiana.org/</a>
  <a href="parents/financial-support">parents/financial-support</a>
  <a href="websiteto">websiteto</a> explore the other financial support</a>
  <a href="mailto:opportunities">opportunities</a> as well as the other early care and education and out-of-school-time programming for Indiana families.

For employees working in or near Indiana Government Center, Day Learning Early Learning Government Center is located on the Indiana Government Center campus. The Center offersdiscounts to state employees. Learn more at their website, , <a href="https://dayearlylearning.org/state-government-center/">https://dayearlylearning.org/state-government-center/</a>.

# Section 8: Self-Care Resources

What resources are available for employees struggling with mental health concerns? Your

mental health is just as important as your physical health, and it's normal to need help processing all the changes in our personal and professional lives. There are many healthy waysto help with this, including:

- Practice mindfulness Don't ignore your feelings. Make time to listen to what you're feeling. Process your thoughts with friends, loved ones, co-workers, or even through apersonal journal.
- Utilize a mental health professional. As a state employee, you and all individuals in yourhousehold receive eight (8) free sessions with a mental health professional through the Anthem Employee Assistance Program (EAP). This is an incredible benefit! Don't underestimate the power of leveraging this free and anonymous resource to help you. Find out more at anthemeap.com (Company Code: State of Indiana) or by calling 800-223-7723.
- Seek other resources to help manage your mental health such as <u>BeWellIndiana.org</u>, a free resource to help all Hoosiers stay connected and maintain their wellbeing.

#### Section 9: COVID-19 Overview

#### What is COVID-19?

Coronavirus disease 2019 (COVID-19) is a viral respiratory illness that can spread from person to person. People with COVID-19 have experienced mild to severe respiratory illness, including fever, cough, and shortness of breath. SARS-CoV-2, the virus that causes COVID-19, is a novel(new) coronavirus. It is not the same as other types of coronaviruses that commonly circulate among people and cause mild illness, like the common cold.

What are symptoms of COVID-19?

Information about COVID-19 symptoms may be found on the CDC's website. Below are severalsymptoms associated with COVID-19.

- Cough
- Shortness of breath or difficulty breathing
- Fever
- Chills
- Muscle pain
- Sore throat
- New loss of taste or smell
- Headache
- Diarrhea

Symptoms may appear two to 14 days after exposure to the virus.

#### How does COVID-19 spread?

The virus that causes COVID-19 spreads mainly from person to person, between people who are in close contact with one another (within six feet for greater than 15 minutes total in a day) through respiratory droplets when an infected person coughs or sneezes. It may be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or possibly their eyes, but this is not the main way the virus spreads. For more information regarding the spread of COVID-19, visit the CDC's website.

# What if employees have general questions about COVID-19?

Employees can contact the IDOH COVID-19 Call Center (open 8 a.m. to 5 p.m., Monday through Saturday) with questions at 877-826-0011. The Anthem NurseLine will provide a free symptom screening for anyone on an Anthem health insurance plan by dialing 800-337-4770. Additionally, IU Health offers free virtual COVID-19 screenings for Indiana residents, and the CDC offers a self-checker tool at no cost to users.

#### LSH Volunteer Calendar

We are announcing a new calendar we will be utilizing for volunteers to select dates and times they are available to work as Special Attendants. With this, you will have the ability to view a whole month and see where the needed dates and times are. Volunteers may elect to work a full shift (12.5 hours), or a portion of a shift.

The following are a few guidelines that we have put in place. These are not all inclusive and are subject to change as needed. We will keep everyone updated on any changes that take place.

- Visit the LSH Intranet page
  - o On the far-left side of the Home screen, Signup Zone is located under People Soft



- Click Signup Zone
  - o Create an Account-Join as a new user
    - Utilize your state e-mail address
    - You might encounter a security warning-continue creating an account
- On the calendar, follow the instructions closely
- · After you sign up, you will receive an e-mail that tells you the date and time you signed up for
- SAS will confirm the date/time volunteered to cover
  - o Once confirmed by SAS, you are placed on the schedule
  - o If you need to cancel your shift do so by 48-hours prior to the beginning of your shift-this must be done by notifying the SASs of the Service Line
- If you must call off, you are required to call in 2 hours prior to your scheduled start time
- Current SA's who want to volunteer for unscheduled overtime are asked to utilize this calendar

## REFERRAL INCENTIVE PROGRAM



# NEW HIRE ASSOCIATE REFERRAL INCENTIVE PROGRAM

Logansport State Hospital is piloting a new hire associate referral program to recruit Special Attendant and Registered Nurse positions to address our current staff shortage at LSH.

#### How the program works

- A current LSH employee refers an individual for new hire to a Special Attendant or RN position.
- LSH employee must give the name of the person referred to Ashley Morrison (amorrison2@spd.in.gov) with Human Resources at the time the applicant applies or before they are hired.
- The referred applicant must also give the name of the referring LSH employee to HR when filling out the application.
- If the applicant is hired, the referring LSH employee will receive a \$25 gas card once the new employee completes new hire orientation.
- The current LSH employee <u>may</u> be eligible for a \$200 spot bonus once the referred employee achieves six months of employment (subject to state of Indiana spot bonus program approval).
- There is no limit to the number of applicants a current LSH employee can refer.



## **August Changes at LSH!**

#### **Position Changes**

Nicholas Knapp to RT4
Zachary Rice to SA

Retirements

Patrick Murray

#### **New Hires**

Natalie Campbell
Hunter O'Connor
Hashmat Mashiana
Stacia Flowers
Megan Metzger
Jonathan Gipson
Lindsey Beall-Nash
Rylee Tharp
Sara Norris
Taylor Lincoln

#### **Farewells**

Jasmine Penny Brittany Strong Danielle Sowards Ryan Murray Jerral Deford Tina Cress Misty Hardy Christopher Delp Nathan Black

#### **Farewells**

Adam Garrison Brian Baber Constantine Howard-Dordoni Della McFarland Kyiah Elmore Faith Murray Brianna Cambe Linda Sharp

### **LONGCLIFF MUSEUM: Art-n-Facts**

# Nearly 30,000 Patients Admitted To Longcliff In 75-year History

<u>Pharos-Tribune and Logansport</u> <u>Press</u>, Logansport, Indiana (Sunday, July 14, 1963, p. 11.)

Almost 30,00 patients have been admitted to Logansport State Hospital since it opened 75 years ago with a capacity of 366, according to the hospital record office.

Although state laws require only that the hospital maintain the medical records of patients for at least 25 years after their discharge from the hospital, Longcliff still has the records of all patients who have been at the institution since it opened.

Records are stored in the basements of two of the hospital buildings. In the record office itself there are filed on open shelves the records of everyone who is a patient now, in addition to all those discharged in the past year and a half.

WHEN LONGCLIFF opened in 1888, there were no employees whose sole responsibility was patient medical records. From the reports made at that time, apparently the medical record was done by work the superintendent with assistance of a clerk, whose duty it was to type letters, medical and administrative, and, no doubt, generally assist the superintendent in any task requested.

Eleven years after the opening of the hospital, for the first time, an assistant clerk was employed. The clerical work had reached proportions that made it



RECORD OFFICE CHIEF –
Mrs. Marjorie Maugans
Morrow, for the past nine
years in charge of
maintaining the medical
records of patients at the
Logansport State
Hospital, goes over
figures on types of
illness, causes of death
and other vital statistics.
(Staff Photo)

necessary to have two people to get the work done.

Of the first 309 patients admitted in the first four months of operation, 151—over half—were diagnosed as having chronic mania and 59 with secondary dementia.

At the turn of the century we see chronic and acute mania melancholia and general paresis heading the list of mental illnesses causing admission to Logansport State hospital. From acute mania there was a good chance of recovery, from

melancholia and chronic mania, a fair chance and from general paresis—no hope.

Studies done between 1910 and 1920 showed that syphilis, the cause of general paresis, was treatable with fever therapy. The treatment of syphilis has been so effective that it now accounts for less than one per cent of the hospital's admissions.

On July 14, 1920, the first record clerk was hired. At this time Dr. Dodds, the superintendent wrote, "A new and thorough system of case histories and filing was inaugurated. A practical system of obtaining continuous clinical notes on every patient was put into effect. Very complete records are made in all cases."

Mrs. Lola Besse was record clerk and stenographer until 1938—18 years. She and her staff of from one to three people also directed the patients' choir, managed patients' picnics, played in the orchestra, did playground work, and other tasks.

WHEN IN 1934, the Occupational Therapy Department was arranged, the clerical employees were allowed to turn their energies toward record work almost completely. As the hospital capacity increased, there was of course, much more clerical work to be done.

By 1938, after 50 years of operation, the hospital admitted 50 patients with mental disorders due to syphilis, 74 due to senility and arteriosclerosis, and 87 due to dementia praecox (Schizophrenia)—28 per cent of the 311 first admissions in that year.

In 1962, after 74 years of operation, the hospital admitted

487 patients or 34 per cent for treatment of alcoholism; 284 or 20 per cent, for schizophrenic reactions (dementia praecox); and six, or only four-tenths of one per cent, for treatment of a mental disorder caused by syphilis (1,409 Total).

It is interesting to note that in Superintendent 1924. Dodds "There wrote. is a notable increase in the tendency to shunt senile cases off to a state hospital. There are still insane people in the jails in this district, a condition much to be deplored but one we are powerless to help as we have crowded all the beds here that we can find room for."

In 1888, to be admitted to a state hospital it was necessary for a mentally ill person to be committed by the court. After 1919 it was possible for a person to be admitted upon his own voluntary application for care and treatment provided he agreed to abide by the established rules and regulations and to give 10 days notice in writing of his desire to withdraw.

THE NEXT CHANGE in law governing the admission to a state mental hospital was in 1949 when any person adjudged a criminal sexual psychopath was to be sent to a mental hospital instead of prison. In 1953 the alcoholic person was permitted to ask the court to send him to a mental hospital for the treatment of alcoholism.

The first voluntary patient was admitted to Longcliff in 1928, and in 1962 there were 494 voluntary admissions.

In the late 1950's the law regarding temporary commitment was passed—making it possible to commit a person needing the facilities of the mental hospitals

for a period not to exceed 90 days.

In 1962 there were 573 patients admitted to Logansport on temporary commitment, and only 84 on regular commitment.

The advantage in the temporary commitment is principally to the acutely ill patient, who recovers in a relatively short time and does not lose his civil rights on this commitment.

THE TEMPORARY commitment can be credited with the increase in admissions and discharges, and the decrease in length of time spent in the hospital. Due to the increased knowledge of the general public in the area of mental illness, people, as a rule, are sent to the hospital on temporary commitment before they reach the chronic stage and are, therefore, more treatable.

Even though the number of admissions had increased – more than doubled – in the past 10 years, the average daily census has gradually decreased about 300. This is due to the shorter length of stay, which, in turn, due to the increased activity of the entire staff of the hospital and earlier admissions.

As an example of the value of records, there was in 1914 and 1915 a eugenics study made of 15 patients who were then in the hospital. The families and family histories of these patients were investigated, recorded, and a very complete study made by a specialist in the field. She contacted over 1,000 relatives, in the study of 15 patients—this would have been impossible without records. If they had not begun to keep records at the very beginning of this hospital, we would not know today that our treatment is more effective, that more people are admitted and discharged.

AT THE PRESENT time a disease index is maintained in the

record office, in which is recorded the name of each disease and all persons with each disease. This index shows us that the diseases cause admission principally the same—with the changed in terminology—with the exception of general paresis, which has declined almost out of existence. The dipsomania of 1888 and the alcoholism of today are good examples to illustrate difference in admission policies and treatment. The dipsomaniac had to be committed so his drinking habits probably caused him to be really "down and out" before he was admitted to the hospital; the alcoholic can "sign himself in" before permanent damage is done, in many cases.

In 1954 for the first time a medical record librarian was employed. Because the amount of daily work has continued to increase in this nine-year period, the record office has moved twice—once in 1956 and again in 1962.

IN 1954 THE CHANGE was alphabetical made from to from numerical and cabinet drawers to open-shelf filing. A second filing clerk was employed at that time in an effort to more nearly keep up to date with the vast amount of papers involved in compiling a medical record for each patient. In this nine-year period, the number of admissions has more than doubled while the number of leaves or temporary absences has quintupled.

When a patient is admitted, the admissions clerk in the record office starts the medical record with identifying information obtained either from commitment paper or from the patient himself. Within two to four weeks the patient has a diagnosis established, after having had numerous laboratory, X-ray and mental examinations made. Each diagnosis is recorded in the patient's record and reported to the statistics office at the State Department of Mental Health.

# Wellness Wellness



# Wisdom Committee



# 4 Stress-Relieving Activities for Labor Day Weekend to Help You Feel Refreshed

August 27, 2020/in Health and Wellness /by ARC Benefit Solutions

This year, Labor Day weekend will look a lot different than it has in the past. Though you may not be traveling right now, you can still use this time to step away from the daily grind or get caught up on the tasks you don't have time for throughout the week. Here are four ideas for ways to spend your Labor Day weekend...

#### Take a Break from Technology

These days, it's easy to find yourself scrolling more often than you otherwise would. With the amount of news that is released daily, it's no wonder we are feeling more fatigued than ever. Use the three-day weekend to set down your phone, close your laptop, turn off the television, and clear your head. Stepping away from the noise of the internet will

give you the time and space to regroup and keep your mind in check.

#### Mix Up Your Routine

By this time of the year, you're likely running on autopilot. You've been stuck in the same at-home routines for months now and things are starting to feel a little stale. Over Labor Day weekend, mix up your usual routine with out -of-the-box activities, like a family movie marathon, a trip to the park, a game night, etc. Breaking away from your routine will help you feel fresh when you get back to the daily grind.

#### **Spend Time Outdoors**

Camping, hiking, going on bike rides, and enjoying your time in the sun are great ways to refresh over a long weekend. Spending time in nature and away from the hustle and bustle of the day to day can be restorative and will leave you feeling ready to get back into your normal routine.

## Knock Off Some Items on Your To Do List

Sometimes the best way to spend your three-day weekend is

to get caught up on the tasks that you, otherwise, would not have time for. We all have a long to do list of tasks that we are constantly pushing to the side because we don't have the time to complete them. Take some time to write out every small task that has been on your mind lately and cross off as many as you can. Whether that be changing the light bulb in the hallway or sending an email to your health insurance agent with a question about your coverage, now is a great time to get those small tasks accomplished.

#### https://

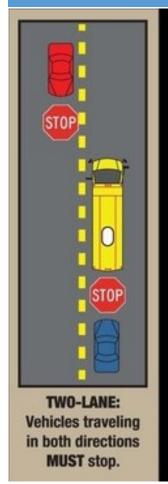
www.arcbenefitsolutions.com/ health-and-wellness/4-stressrelieving-activities-for-labor-day-

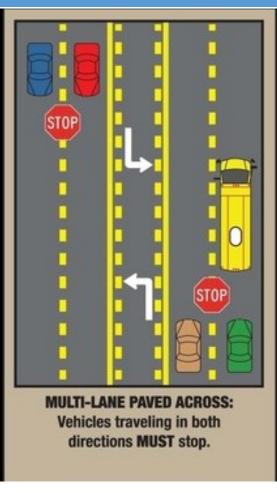


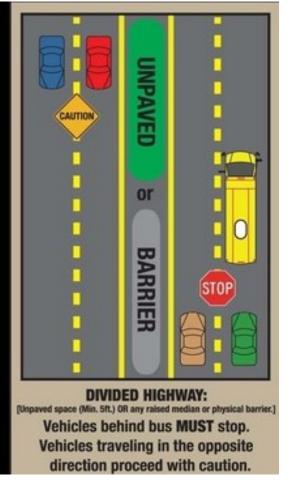
The Wellness Committee consists of:

Diana Anderson, Mike Busch, Vicki Campbell, Mary Clem, Maureen Guimont, Kris Keeler, Darrin Monroe, Julie Stapleton, Lucia Ward and Kenneth Zawadzki.

## Focus on Back-to-School Safety







# Focus on Back-to-School Safety

As the summer break comes to an end, students across Indiana are starting their return to school. With that return to school, the Indiana State Police would remind all motorists to be focused on traffic safety during morning and afternoon commutes.

Motorists should be prepared to experience an increased amount of school bus traffic and children walking to and from their bus stops and schools during the early morning and midafternoon hours. Plan your commutes accordingly to allow for extended travel time during these periods. Special attention should be given to the posted reduced School Zone speed

limits, and for school buses regularly stopping to load or unload students. Children are often unpredictable and may dart out in front of traffic unexpectedly!

Indiana traffic law requires motorists to the operate in a safe and responsible manner when approaching a stopped school bus that has its red lights flashing and stop arm extended.

- When approaching a school bus from any direction, which is stopped and has its red lights flashing and stop arm extended, motorists are required to **STOP**, even on multiple lane highways where there is no barrier or median separating lanes of traffic.
- Motorists on a highway that is divided by a barrier, such as cable barrier, concrete wall, or grassy

median, are required to stop only if they are traveling in the same direction as the school bus.

• Always be prepared to stop for a school bus and watch for children. Children are unpredictable. Not only is disregarding a school bus stop arm dangerous, but it is also a serious offense.

The Indiana State Police is committed to the safety of our children by keeping Indiana's roadways safe through education and enforcement patrols. Please join us by doing your part to make travel on our Indiana roadways safer for all Hoosier students throughout the school year.





# Pat Murray's Retirement!

Some of the Maintenance Crew got together and took a picture with Pat Murray wishing him a Happy Retirement after 35 years of service.

Enjoy Pat!

...Thank you Pat!

## **Culinary Corner**

# CHEESY ZUCCHINI BREADSTICKS

https://iamhomesteader.com/cheesy-zucchini-breadsticks/

#### **INGREDIENTS:**

- 2 large zucchinis, grated (about 4 cups) and well-drained
- 1/2 small white or yellow onion, grated and drained of liquid
- 1 teaspoon garlic minced
- 1/2 cup mozzarella cheese, shredded
- **2 large eggs beaten**
- 2 cups all-purpose flour
- 1 teaspoon kosher salt
- 1/2 teaspoon freshly ground black pepper

#### **Topping:**

- 1 cup mozzarella cheese, shredded
- 1/4 cup parmesan cheese, grated
- 1/4 teaspoon Italian seasoning
- 1/2 teaspoon parsley finely chopped for garnish

Prep Time 10 minutes

Cook Time 35 minutes

**Total Time** 45 minutes

Servings 8

Calories 274 kcal



#### Instructions

- 1. Preheat the oven to 450°F and line an 11x17-inch baking sheet lined with parchment paper.
- 2. Rinse the zucchini under lukewarm water. Trim off one of the ends off the zucchini and shred on a grater. (I keep one end on to make sure I don't get too close to my fingers when grating.)
- 3. Remove excess water from zucchini by wrapping it in a clean dish towel and tightly squeezing. You want to make sure to get as much moisture out of the zucchini as you can.
- 4. Add the drained zucchini to a large mixing bowl.
- 5. Add the grated & drained onion, garlic, 1/2 cup mozzarella cheese, eggs, flour, salt, and pepper. Mix well.
- 6. Use a spatula to spread out the zucchini mixture onto the lined baking sheet. It should be an even layered rectangle. The layer should be very thin. If it gets thicker than 1/2 inch it will take much longer to bake and get crispy.
- 7. Bake for 25 minutes, or until the edges are golden brown.
- 8. Remove the zucchini from the oven and lower the oven temperature to 425°F.
- 9.Flip the zucchini breadsticks over. To flip the zucchini, use a spatula to loosen up the edges. Place another piece of

parchment paper over the top of the zucchini, as well as another 11x17-inch pan. Using hot pads, hold the edges of the pans tightly together and carefully flip over the zucchini. (You could also use a couple of spatulas to flip the zucchini over onto the same baking sheet.)

- 10. Top the zucchini with a cup of shredded mozzarella cheese, parmesan cheese, and Italian seasoning.
- 11. Bake an additional 8-10 minutes, or until the cheese is melted.
- 12. Garnish with fresh parsley and cut the bread into strips. Serve warm with a marinara sauce for dipping.

## WHO AM I?

Can you guess the two employees pictured below? If you can, call Darrin Monroe at #3803 or e-mail Darrin at darrin.monroe@fssa.in.gov by September 24, 2021.

Employees with correct answers will have their name put into a drawing, sponsored by the EMBRACE Committee, for a chance to win a free five-dollar gift certificate.





**Rick Gibbs** 

Congratulations to Melissa Stewart for guessing Rick Gibbs that was pictured as the last "Who Am I?".

If you have a picture of an employee and would love to have a little fun with it call Darrin Monroe at #3803 or email Darrin at darrin.monroe@fssa.in.gov