



NDInsider

The newsletter of Indiana's

NeuroDiagnostic Institute
and Advanced Treatment Center

Reminders from Dr. Sheward:

Remember that parking for NDI employees is either in the front lot with appropriate tags or in the CHE parking garage. Parking in CHE or residential streets in the area may get your car towed at your expense.

Jeans are for Fridays only. If you have questions about our dress code, review the relevant policy.

Thanks to all staff that have come in early or stayed late to do employee screenings. The parking policy has been amended so that you may park in the front lot with a temporary tag during the days you spend screening employees and visitors.

WELCOME!

NEW EMPLOYEE ORIENTATION DATES

- July 13- 24, 2020
- August 10- 21, 2020
- September 7- 18, 2020



Do the best you can until you know better. Then when you know better, do better.
- Maya Angelou

NDI DASHBOARD

Recruitment News

Be sure to check the website for all open vacancies at workforindiana.in.gov.

NDI Census June 2020

Admissions: Adult- 12 / Youth- 2

Discharges: Adult- 7 / Youth- 3

Current Census: Adult- 35 / Youth- 21

UPCOMING REFRESHER CLASSES: BRIDGE BUILDING AND CPR

To All Staff: Please watch your email for dates to complete your refresher class. Contact your supervisor or Staff Development with any questions.

CPR (Tuesdays)

July 7- 8:00- 12:00
 July 2- 8:00- 12:00

 August 4- 8:00- 12:00
 August 18- 8:00- 12:00

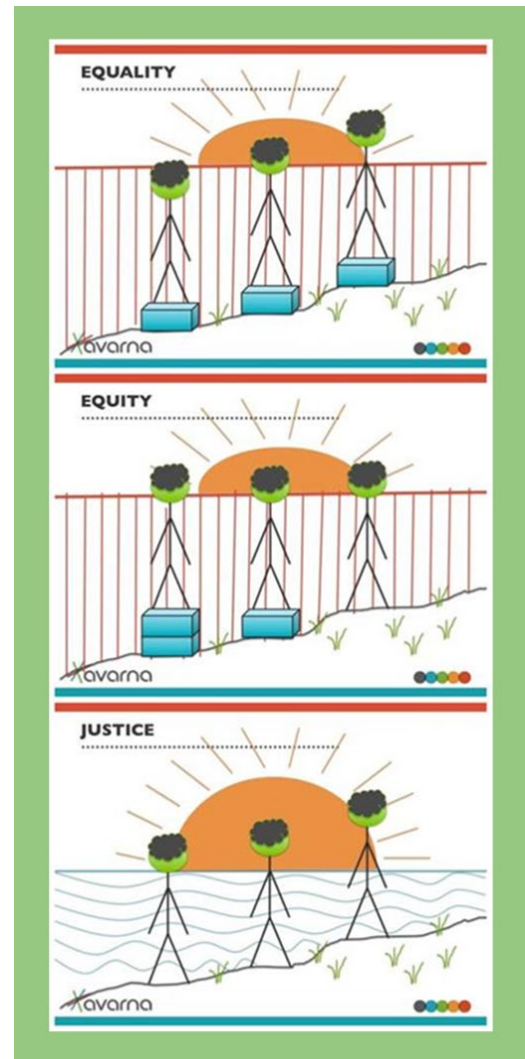
BRIDGE BUILDING (Wednesdays)

July 1- 8:30- 12:00
 July 22- 8:30- 12:00
 July 29- 8:30- 12:00

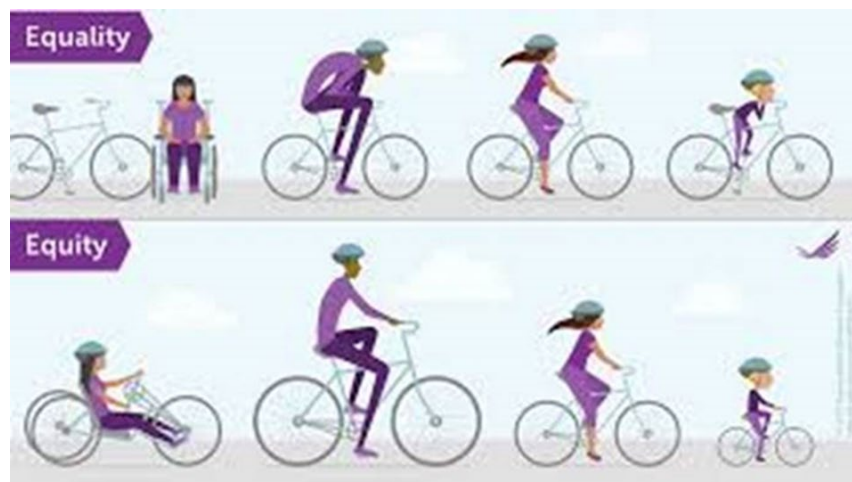
 August 5- 8:30- 12:00
 August 19- 8:30- 4:30 (FULL DAY)
 August 26- 8:30- 4:30 (FULL DAY)

BROKEN PIECES: Equity

Excerpt taken from Broken Pieces, Dr. Jennifer Sullivan 6/12/2020: I want to remind us that inherent to the word equity is the understanding that individual people, groups or populations need different types of help and potentially the kind of help that lets others who are doing just fine fend for themselves for a bit. The Black Lives Matter movement is this concept in action. First of all, the ground is sloped. This reminds us that we are not all on equal starting foundations when we talk about equity. The system is the fence and that is the main focus here - boxes are helpful to temporize the problem, but changing the fence is the MOST effective. The blend of equity and justice gets us where we want to go. Our mission statement now reflects our focus on system change.



Another graphic comes from the Robert Wood Johnson Foundation and illustrates that when we change our system, we still must make sure that we haven't inadvertently made lives harder and created more suffering.



STAFF SPOTLIGHT

Michele has been employed with the State of Indiana for almost three years. She has worked in many positions for nursing services both at Larue Carter Memorial Hospital and NDI. Michele embraces each new role and responsibility with careful consideration to process, detail, communication, and a “get it done” attitude. Michele’s flexibility is commendable! Her passion for nursing and patient care is evident by her interactions with her peer group, direct-care nursing team, interdisciplinary team, and her patients. She is a strong patient advocate!

Michele’s passion and creativity are visually evident throughout the 2W unit. Signage on 2W is colorful, creative, welcoming, and whimsical! Michele is always seeking new activities for her patients. Michele provides small, patient group activities that are stimulating and unique; the most recent group addressed tactile and visual experiences with moisture, temperature, and color.

Michele is also known for her myriad of colored paper, drawing materials, label maker, and various office supplies. We often joke with Michele that she was an art teacher or a kindergarten teacher in another life! And rumor has it that she always has candy for her staff for quick sweet treats.



EVENT TIMELINE

Michele Wood

July 2017:

Hired as Nurse 4 on Unit 3C at Larue Carter Memorial hospital

2017 Activities

*Interim UD on Unit 2A at Larue Carter Memorial Hospital
Member of taskforce addressing NDI staffing patterns
Cerner trainer and Super User*

March 2019:

*Conducted NDI tours
Prepared 2W for opening and instrumental in moving LCH 2A patients to 2W at NDI*

2019 Activities

2018 Activities

August 2018:

Promoted to 3E Unit Director

November 2018:

Closed Unit 3E and relocated patients to other LCH units in preparation for NDI move.

Nov – Dec 2018:

*Interviewed candidates for vacant nursing positions at LCH
Rotated into 12.5hour weekend supervisor position to assist ADON's with their weekend rotation schedule*

2020 Activities

March 2020:

Closed 2E & 2W and moved patients to 4W as Interim 4W UD

April 2020: *Reopened 2W as quarantine unit*

May 2020:

Closed 2W & Reopened 2E as quarantine unit

June 2020:

*Closed 2E & reopened 2W for admissions again
Started 4th round of quarantine admissions*

CERTIFICATES OF EXCELLENCE

June 2020



Congratulations to the following employees for their leadership. We appreciate and value your hard work to make NDI the best it can be.

05/22/2020	Tim Gaalema	06/12/2020	JoEllen King
06/02/2020	Caitlin Montgomery	06/12/2020	Carolyn Smeltzer
06/04/2020	Tiara Crittenden	06/12/2020	Lisa Passarelli
06/05/2020	Mary Moody	06/18/2020	Michele Wood
06/05/2020	Krista Seeds	06/18/2020	Marc Gordon
06/07/2020	Brandon Spratt	06/18/2020	Ann Ford
06/08/2020	Sabrina DeVol	06/19/2020	Emily Gaskins
06/08/2020	Olivia Plunkett	06/23/2020	Nicole Mazanowski
06/12/2020	Melissa Brewster	06/24/2020	Mackenzie Gray
06/12/2020	Crystal Robinson	06/24/2020	Hayley Self
06/12/2020	Giovanna Gallagher	06/24/2020	Elaine Braden

HAPPY BIRTHDAY

Sarah Beard- 6/1

Casey Kehlenbrink- 6/2

Raven Vaughn- 6/2

Justissa Elion-Epon- 6/4

Stella Ilemobayo- 6/5

Tara Laureano- 6/5

Rufus Jallah- 6/6

Aimee Mortemore- 6/6

Miriam Katema- 6/9

Keith Terrell- 6/9

Brittany Paradiso- 6/18

Misty Zimmerman- 6/18

Melissa Brewster- 6/20

Carolyn Smeltzer- 6/20

Stephen Neal- 6/21

Chiamaka Emele- 6/27

Veronica Owens- 6/27

Edith Miramontes- 6/28

Lynda Korenstra- 6/30

From the Desk of the Superintendent

June 1, 2020

We are all humans, but we are not to be color-blind. What we need to be is color-cognizant, color-respectful, and color-inclusive. I became a psychiatrist because I was more curious about the inner lives of my patients rather than the inner workings of their gallbladders. In the same way, how can NDI become a place where diversity is celebrated and not merely tolerated? A few weeks ago, I wrote about how NDI was very *good*, but not yet *great*. I think that I need to add celebration of diversity to the list of things which must be done to become a great organization. The problem is that I am probably the last person to understand how to accomplish this end. I see what should be done, but not how to get there. I ask that you help me. Tell me what you would value. Tell me your stories; we all need to hear them.

June 4, 2020

Continuing a message of empathy from a fellow NDI Staff member:

"When my boys began learning how to drive at the age of 16, I was saddened and devastated, that I had to teach them about the dangers of the police and what behaviors to and not to display if ever pulled over. My heart aches and I am fearful for them almost daily. Thankfully, police brutality has not been an issue in the city we live in, however, they travel with friends to other places and I worry. I know that I cannot live in fear and I do not want them to either, but it's a sad reality for me and my family. It's so scary because even if we as African-Americans follow the commands of an officer, we could potentially be beaten or even killed. I am sickened to see time and time again how white males, armed white males are disarmed and arrested by the police. Even those who actually attack or shoot at them still live to tell the story, but people of color, my people do not. We lose our lives over candy, what's presumed to be a counterfeit bill or just because we don't look like we belong. Why? For simply being an "unacceptable" shade, that God made..."

June 9, 2020

It has been an unprecedented two weeks of demonstrations, and hopefully, change in our country. My original message—however awkwardly worded—did allow for the beginning of a dialogue here at NDI. I appreciate all who took the time to message me, tell their stories, and help me to learn where to go from here. I thought that by treating everyone by the same standards, without discrimination, I was doing enough. I see now that it hasn't been enough and that this isn't the kind of leader I need to be. Translating intention into concrete action is my personal challenge.

June 19, 2020

In the last 18 months we have closed a hospital, opened a new hospital, implemented a new electronic health record, endured both Joint Commission and CMS surveys, a visit from the vice-president, as well as having admitted and discharged a great number of patients.

In response to COVID, we have transferred a large number of patients to other State hospitals, turned 20 percent of the beds into general medical units, currently turning them back into psychiatric beds, and scheduled more admissions than ever before, all while maintaining quarantine status! If anyone should ask, the State of Indiana has sowed its money's worth with NDI. You are all the best in my book.

Healing Depends on Believing in Change

By Teresa Strout, Ph.D., HSPP

At the NDI we are moving from “What’s wrong with you?” outdated thinking to a “What happened, how can I help?” trauma-informed care perspective. As part of this shift the belief that change can occur is important for both staff and patients. An important psychological theory connected with change beliefs is Self-efficacy Theory, developed and validated by Albert Bandura. Self-efficacy is defined as an individual's belief in his or her capacity to perform behaviors necessary to produce specific performance attainments (Bandura, 1977, 1986, 1997). Simply put it is a personal judgment of capacity, confidence, and belief that she or he can deal with situations and reach goals. So how does self-efficacy develop? Research shows that mastery, social modeling, social persuasion, and physiology (emotions/moods) are all important aspects. An example of mastery is when a patient is able to see herself actually perform a step (skill) that leads toward the goal which increases the likelihood of taking the next step. Further, when the patient has adequate mood stabilization (physiological state), has a competent role model demonstrating the steps of success (social modeling by staff or peers), and has verbal/visual encouragement within a supportive environment (social persuasion) then goal attainment is more likely. As a psychologist, I like to use Biofeedback as a tool to increase a patient’s self-efficacy while also promoting a physiological relaxed state that biologically competes with anxiety, anger, and distress. Biofeedback requires connecting sensors to the patient to detect specific bodily signals that are sent to a computer program for displaying in understandable visuals such as pictures or graphs. The purpose of biofeedback is for the patient to understand the status of her body then attempt to change it through the use of psychologist-led techniques while watching the visual display change. As you can see, this is an application of self-efficacy principles. The effects on a patient can be quite amazing. However, biofeedback is only one strategy for building self-efficacy of our patients. I am sure you can think of other ways as you provide your care.

Bandura, A. (1977). Self-efficacy: Toward a unifying theory of behavioral change. *Psychological Review*, 84(2), 191-215.

Bandura, A. (1986). *Social foundations of thought and action: A social cognitive theory*. Englewood Cliffs, NJ: Prentice-Hall.

Bandura, A. (1997). *Self-Efficacy: The exercise of control*. New York, NY: W. H. Freeman.



Introducing a New Timekeeping System!

The State of Indiana is excited to announce the selection of Kronos Workforce Central as our new timekeeping system! We have partnered with Kronos, the world leader in workforce management software, to make it easier for you to focus on your job, not how to track hours! This system will work in step with PeopleSoft to ensure we will have a simplistic and streamlined process for employees to track time. No more time clocks - you will be using your personal mobile device and limited kiosks for users without smart phones.

Kronos Timekeeping has important benefits just for you!



“This is an exciting and important initiative that will allow us to continually revisit and modernize the way we manage our internal processes. By bringing us in line with the latest technology, we are another step closer to becoming a workforce that is enabled by automated, smart and user-friendly technology which will leave more time for us to all focus on the things that matter in our agency.

So much is possible for those who work hard, champion new efforts and challenge themselves to be their very best. I look forward to working with you all on this journey.”

Scott Blake, Director Administrative Services



Fast

Provides a fast and simple way to clock in and out by simply swiping your ID badge!



Accurate

Forget having to go back and remember when you clocked in. As long as you swiped your card, that information is already recorded and stored on your timecard!



Personalized

Your application is personalized to your role so you'll only see the features you need in this new easy to navigate application!

Have any questions? Contact FSSAPayroll.fssa@fssa.in.gov