



## Madison State Hospital

711 Green Road  
Madison, IN 47250  
812-265-2611

*MSH  
MISSION:  
Mending  
the Mind*

*Supporting  
the Spirit*

*Healing  
with Hope*

*VISION:  
Safely deliver  
meaningful,  
quality, and  
compassionate,  
psychiatric care  
to our patients  
and their families.*



Madison State Hospital

Theresa Robinson, MA.  
Staff Development Director  
Director of Marketing

# MSH Bulletin

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## Trauma Informed Care

Trauma-informed care (TIC) is a patient-centered approach to healthcare that calls on health professionals to provide care in a way that prevents re-traumatization of patients and staff. TIC is applied universally regardless of trauma disclosure.

Grounded in an understanding of the impact of trauma on patients and the workforce, TIC is conceptualized as a lens through which policy and practice are reviewed and revised to ensure settings and services are safe and welcoming for both patients and staff. The TIC framework is being implemented in healthcare and should be incorporated in daily practice.

**Healthcare professionals demonstrate TIC in interpersonal interactions when they provide direct and clear communication, empower patients and other staff, and work to create emotional safety for others.**

Principles for a trauma-informed approach:

- Safety (physical and emotional)
- Trustworthiness and transparency
- Empowerment, voice, choice
- Use of peer support
- Cultural, historical, and gender responsiveness

*The healthcare system is populated by trauma survivors, both those providing and receiving care.*

We suggest that staff can begin to ask themselves, and their colleagues, three simple questions as a first step to applying a trauma-informed lens to their practice, as follows:

1. **Safety:** Does this cultivate a sense of safety?
2. **Respect:** Am I, and others, showing respect?
3. **Trust:** Does this build trust?

### Ask Before Touching

For many trauma survivors, inappropriate or unpleasant touch was part of a traumatic experience. Touch, even when appropriate and necessary for providing care, can easily activate a fight, flight, or freeze response.

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Doctors and nurses are often required to touch patients, sometimes in sensitive areas. This may include helping patients sit up in bed, applying their hospital identification band, listening to their lungs, or examining a wound. Any touch can be interpreted as unwanted or threatening and it is important to ask permission to touch someone and obtain verbal consent *before* doing so. Touch may be activating for a patient and may bring up difficult feelings or memories. This may lead to increased anxiety and activation of the stress response which can result in disruptive behaviors and even lead to the patient dissociating. Asking permission before you touch patients gives them a choice and empowers them to have control over their body and physical space.

### **Use Plain Language and Teach Back**

We recommend avoiding medical jargon and using clear, simple language. When using medical language, explain what you are talking about with simple non-medical words. When patients are feeling activated (i.e., using their fight, flight, or freeze system), information processing and learning parts of the brain do not function optimally and it is hard to remember new information.

When providing education, information, or instructions, break the information you share into small chunks and check for understanding. Using clear language and teach back empowers patients with knowledge and understanding about their care. An example of this recommendation might be: After demonstrating how to test blood glucose at home, for a patient newly diagnosed with diabetes, have the patient demonstrate and explain how and when they will perform the test.

Implementation of TIC is much like putting on an oxygen mask in an airplane. You must first put on your own mask before assisting others. If staff do not care for themselves, they will not be able to properly care for patients.

<https://ojin.nursingworld.org/MainMenuCategories/ANAMarketplace/ANAPeriodicals/OJIN/TableofContents/Vol-24-2019/>

## **The MSH Blood Drive is coming soon!**

The bloodmobile will be parked in the North Parking Lot, behind the Powerhouse. To schedule an appointment see the link below, however an appointment is not required.



## **Blood Drive Madison State Hospital**

American Red Cross Bus  
711 Green Road  
Madison, IN 47250

**Tuesday, July 6, 2021  
9:00 a.m. to 2:00 p.m.**

To schedule an appointment go to: <https://www.redcross.org/>



**American  
Red Cross**



**Indiana Family &  
Social Services  
Administration**

FSSA's Office of Early Childhood and Out of School Learning has removed the income restrictions for the **Build Learn Grow Scholarships**.

Initially, a family needed to be at or below 250% of the FPL to qualify. Those restrictions have been removed and a family at any income level can qualify as long as at least one parent works in an essential service. The support amount (the amount that will be paid towards the cost of care) will vary based upon the family's income.

Family Income Qualification	Scholarship Amount
127% of FPL or below	Family qualifies for CCDF funding
128-250% of FPL	80% of tuition
251-400% of FPL	60% of tuition
Above 400% of FPL	20% of tuition

Families can still go to <https://brighterfuturesindiana.org/scholarships/families> for more information.

# New Option on MSH Homepage!

**We value you and your feedback**  
If you have questions about MSH or other feedback:  
Ask superintendent, Alicia Isaacs.

[Ask Alicia Isaacs](#)

**We want to hear your questions**  
If you have questions about COVID-19 or other feedback:  
Ask medical director, Dr. Zinner.

[Ask Dr. Zinner](#)

**We care about your input**  
If you have questions about nursing or other feedback:  
Ask director of nursing, Dirk Turner.

[Ask Dirk Turner](#)

**Archived Q&A**   [Superintendent](#)   [Medical Director](#)   [Director of Nursing](#)

IT has developed a new anonymous communication platform that nursing staff can use to ask questions, make suggestions, and offer solutions to issues specific to the **Nursing Department**.

On the MSH Homepage, nursing staff can now anonymously send questions or comments to Dirk Turner, ADON as shown above.

Please send your questions and comments to the appropriate department leader.

For example:

- **Dr. Zinner**— should get questions about unit set-up, improvement of treatment team processes, COVID questions, treatment ideas in general, etc.
- **Dirk Turner**— should get questions about nursing processes, policies, shift issues, etc.
- **Alicia Isaacs**— should get questions about state-level decisions, overall hospital work environment improvement, policy questions, etc.

**We want your input, and we want to hear your questions.  
Thank you for using this new communication format.**



# MSH Nursing Appreciation Week!!! Continued...



These are the second half of MSH Nursing Appreciation Week photos for Weiner Wednesday, Theatre Thursday, and Fruity Friday!



*Thank you! Thank you!*  
**THANK YOU!**  
*Thank you! Thank you!*





## “B” Shift also celebrated MSH Nursing Appreciation Week!

Evening Nursing and BHRA supervisors joined with Night Nursing and BHRA supervisors to honor and show appreciation to “B” Shift Nursing Personnel.

Treats were all delivered to the units and there were 9 “Healthcare Hero” drawings for cash prizes.

**Monday Night:** You are all that and a bag of chips night. Coke, chips and ice cream bars, were on the menu. The Healthcare Hero was Matt Marsh, BHRA.

**Tuesday Night:** was Taco Tuesday with salsa/chips and cookies. The Healthcare Hero was Susan Varley, BHRA.

**Wednesday Night:** Anyway you slice it night, Pizza! The Healthcare Hero was Rita Brown, BHRA.

**Thursday Night:** You are the top of the bun night, White Castle sliders were the treat. The Healthcare Hero was Savannah Bushong, BHRA.

**Freaky Friday:** Popcorn, candy bars and YOUR pick of any other treats left from the week. The Healthcare Hero was Jonathon Simmonds, BHRA.

The four winners of the “major drawings” were: **Mary Amos, BHRA; Jessica Hendrix, BHRA; Abigail Pearson, BHRA; and Susan Varley, BHRA.**

This was a great team effort by Lora Ferneau, RN; Tom Fetterhoff, RN; Bonnie Griffith, BHRA; Anita Hamilton, RN; David Lewis, RN; Charlotte Moullaun, BHRA; Alice Powell, BHRA; Andrea Mangold, RN & Karen Shelley, RN. They want to thank Dirk Turner, ADON for his donation, and again to **ALL “B” shift nursing personnel... Thank you for YOUR commitment!**



## Questions about your taxable income \$\$\$ ?

On your paystub... you have your

- 1). **Gross Earnings,**
- 2). **Less Deferred Compensation** which is **Hoosier START** and your **YTD employee contribution,**
- 3). **Less Tax saver Benefits** which is (Cafeteria 125 Plan) - YTD total of employee health insurance = Medical, Dental, Vision, and HSA employee contribution.
- 4). **Taxable Earnings** – The amount your federal and state withholdings are based on.



TAXABLE INCOME		
	Federal	State
Gross Earnings	27302.04	27302.04
Non Taxable Earnings		
Deferred Compensation	1051.04	1051.04
Taxsaver Benefits (Cafeteria 125 Plan)	1026.96	1026.96
<b>Taxable Earnings</b>	<b>25224.04</b>	<b>25224.04</b>