

Connections

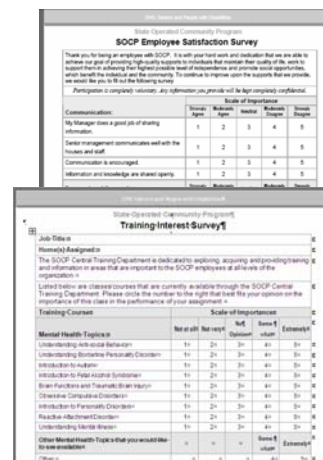
Winter Edition

January 2008

Building on 2008 and planning for 2009 Communicating, Consolidating Contracts and Clarifying Policies

This has been a year of accomplishments, some disappointments and lots of changes. There have been organizational changes, people/personnel changes, changes in performance expectations and environmental changes. January marks the one year anniversary of our move from Bittern Street to Keizer Towne Square. As we begin 2009, I would like to look back and acknowledge the accomplishments and progress we achieved in 2008.

- One of Central Offices' biggest accomplishments have been the consolidation of personal service contractors/vendors used by our group homes to comply with State Contracts. The process began with the launch of the summer pilot project for "Coastwide". As of December, all homes are on-line and billing is coordinated through Central Office. Other contracts being implemented, consolidated and coordinated through Central Office include: Terminix, James Heating, Northcoast Electric, Roger's Machinery and Excel Gloves.
- The process of modifying and upgrading our homes for health and client safety reasons began with: Discovery, Turner, Charles, Oak, Silverton and Russell St. Our appreciation goes out to Kevin Lathrop for supervising and implementing these improvements. Modifications will continue in 2009 at various other homes. Some of the modifications will include: removal of carpets, installation of skid proof floors, padded flat screen tvs, and the purchase of "Glasspec" furniture.
- Second computers were provided to all but 5 homes, with the remaining coming in 2009.
- SOCP began moving forward with updating of our policies, procedures and forms. Our goal: consistency and compliance with licensing and SAIF.
- The SOCP "Connections" Newsletter was restarted in October to share and improve our communications within the homes and central office.
- SOCP is fortunate to have over 650 talented and dedicated employees, all of you, made possible these accomplishments in the past year and we expect to see more in the year ahead.



Two surveys are being circulated and your input as a valued employee and team member is needed. Please fill out and return your "Employee Satisfaction" and "Training Interests" surveys by January 30th.

In closing, I would like to give a "special thanks" to those employees who worked numerous hours/days getting us through the recent winter storm. Your efforts were greatly appreciated. I thank all SOCP employees for your contributions during this past year, and look forward to everything we can accomplish together in the coming year.

SOCP Director: Deanna Bathke

Having trouble knowing what's a "Yes" and what's a "No":

Here are some reminders

YES-YES

Any chemicals in the homes need to be evaluated. Returns to "Coastwide" are possible, IF the product is unopened. Notify "Coastwide" when making your returns and they will apply a credit to our SOCP account.

MSDS's sheets need to be obtained for ALL chemicals kept at the house, no matter their number. If you obtain an MSDS, you must have the chemical in the house. If you have an MSDS sheet (for something no longer in the house) OSHA will assume it is still in use and issue an infraction.

For considering **chemical storage** – remember - ALL chemicals need to be below eye level, preferably as close to the floor as possible. I know this isn't possible for everyone, but do the best you can, and if you have questions, we can talk about it.

Eyewash stations need to be flushed once per week for fifteen (15) minutes, AND each house must have signed documentation. This is an OSHA regulation. Many homes have a sign-off



sheet by the furnace for filter changes. Similar forms are being created and distributed for your convenience. Some houses have talked about putting the sheet in the safety book. Again, this is up to you as long as the sheet is available.

NO-NO

Do not keep staff **medical statements, doctors' notes, SAIF forms**, or anything for staff medical at the house. Once you have notified HR or the Safety Office,

send the information to HR or Richard. If you FAX the information –it is important to follow-up with hardcopies to HR or safety office right away. Failure to get the medical information out of the house is considered a HIPAA violation.

Do not keep staff **Driving Record Certification** forms, or copies of staff driver's licenses at the house. Both of these must be sent to HR as quickly as possible. Again, if you FAX, OK, but send the hardcopies to HR right away.

Submitted by Q & A Manager: Pat Kettleon

Working together for better outcomes in 2009: a few reminders

Please watch your "Coastwide" ordering habits and plan appropriately to avoid the small last minute orders, as they are NOT cost effective. Central Office is continuing to work out problems in the consolidation of "Coastwide" supply orders and appreciates everyone's cooperation.

- Buy in bulk and remember to utilize the new "VOC Shuttle Supplies Service." They deliver more than office supplies.

Remember to check fire alarms, fire-extinguishers and conduct monthly fire drills, according to our policy. All but 4 SOCP Group Home Evacuation Maps have been completed and posted to the SOCP SafetyNet Page (<http://www.dhs.state.or.us/spd/tools/dd/socp/safetynet.htm>). The additional 4 are expected to be posted by the end of January.

- New for 2009, we are in the process of procuring a "Security Business" contract to provide fire extinguisher service and annual inspections for the sprinkler systems, maglocks, etc.

Clients Personal ID Cards were completed and delivered in October. As a note, DMV also provides personal ID cards for \$16. This offers an opportunity for client outings and DMV will provide reminders when they expire and require renewal. An additional benefit to this service is having photos

in the State Police photo bank. But we also understand that some clients will not be able to use this service, and that is why SOCP has provided ID card too.

Central Office employees: Please note the DHS OIS unit needs our assistance to cut the agency's cost for storage on network servers (I:Drive files). The November OIS Service and Support Newsletter requested all DHS employees remove enough data from their network to fill one CD. Many of us at SOCP Central and in the Group Homes have files we have not used or opened in several years. Please take some time and purge and/or copy files outdated files.

Always check the "Find a Form" site for the most recent forms. Handouts with directions to the "Find a Form" website will be available at the All Managers Meeting.

Submitted by Business Administrator: Elaine Stauffer

Human Resources:

Policies and Procedures updates

New regulations for the **Family and Medical Leave Act** and **Military Leave Act** will become effective January 16, 2009. SOCP Human Resources will train the Site Managers on the new regulations and the Managers will then be expected to train the direct care staff.

The new **Criminal History Check/Drivers License Issue Policy** will become effective December 1, 2008 and will be trained starting on January 1, 2009. The new policy states "All subject individuals shall notify the Department's Office of Human Resources within five days of being arrested, charged, or convicted of any crime."

Remember, once an employee is awarded a position which is out of that employee's house, that employee must remain in the new house for at least ninety (90) days unless the posting open for bid is in a different county than the employee's current worksite.

Submitted by Keith Jeskey



Eliot House nurses: Cathy Monnin, Lori Gruenwald, Sandra Bihn, Pam Greenlaw and Joan Amato.

Nurses are #1 Most Honest and Ethical Profession: For 7 Years Running Honesty and Ethics Survey of 21 various professions. This year's results are in, and for the seventh year in a row...and for the ninth time in ten years ... nurses are ranked number one on the list. A whopping 84% of Americans say nurses' "honesty and ethical standards are either 'high' or 'very high.'"

Many of us have known how amazing nurses are for setting the gold standard for integrity and pride in their work. We would like to recognize our SOCP nurses.

VOC: Seed Balz contract completed early

Steppingstone's completed the 2008 "Seed Balz" contract early and to acknowledge everyone's great efforts, we celebrated with a big Pizza Party. A "Special Thank You" to the GREAT crew at Steppingstones: Dennis Granner, Gordon Lorsung, Ethelyn Viltz, Bryan Dutra and Chris Edwards.

Due the severe winter weather at Christmas, we were unable to hold our annual Christmas Party or vote for our favorite Christmas Decorations. Keep your ideas and we'll plan for an even better 2009 party and contest. We will begin planning our Summer (June) Picnic, watch for the "Spring Connections Newsletter" for more details.

Submitted by Sandy Rowell, VDSM

Training: Recovery International Group

The SOCP Recovery International Group started in November of 2006 with a group of individuals that live within the State Operated Community Program. Special recognition goes to our members celebrating their 1 and 2 year anniversaries of



Top: Patrick Chapple, Matt Ballad, Donna Arnold King, Carol Harris. Bottom: Marshall Bowen, Amber Lord and Brain Hanna.

being a part of RI. 2-year members are Amber, Carol, Marshall and Matt and 1 year members are Brian, Donna, Patrick, Rebekka and Lee.

What is Recovery International? Recovery International is a self-help mental health program developed by Dr. Abraham A. Low in 1937. Over the years RI groups have expanded to world-wide and remain the self help groups that Dr. Low envisioned. Dr. Low wrote, “Recovery stands for simplicity. Its systems of instruction and training are meant to enable individuals to practice self-help.” The SOCP Recovery Intl. group has been given recognition internationally as being the only RI group designed to address the needs of the Developmentally Disabled population.

What is the RI Self-Help Method? The RI self-help method uses cognitive-behavioral principles & techniques. It consists of practical tools that identify and manage negative thoughts, feelings, beliefs and behavioral habits. What is unique about RI are that meetings are peer-led by specially trained leaders, are free and offer reassurance, understanding, acceptance, fellowship and encouragement.

What happens at a Recovery Intl. meeting? All RI groups have the same highly structured format.

- 1) **Welcome,**
- 2) **Example period:** Share the instances in which we used the Recovery Method in our everyday lives,
- 3) **Further spotting and question**

period where we delve further into our examples of Recovery Practice, and

- 4) **Mutual aid** – a time to enjoy our successes. One of the key concepts of the Self-Help Method is “Endorsement”, in which self-praise for any effort is given for the energy that a member is putting forth, not just for the results.

If you are interested in learning more about Recovery International contact Deanna.F.Ziemer@state.or.us or 503-378-5952 ext. 256.

2008 SOCP Training Unit Stats

Employees clocked 19,376 hours in one or more sessions listed below.

Class type:	Sessions offered	Number attending
New Employees Orientation	24	109
Oregon Intervention System	43	451
American Heartsaver First Aid	40	434
Medication Admin. Refresher	44	341

Submitted by Training Manager: Deanna Zeimer

BVS Report: What's a Paraphilia?

Is it the extra parachute that sky-divers hope they never have to deploy if their main parachute doesn't work? No, not even close. A paraphilia is a broad category of sexual disorders listed in the DSM-IV (remember the DSM is the Diagnostic and Statistical Manual of Mental Disorders). There are 9 paraphilias listed in the DSM including exhibitionism, fetishism, frotteurism, pedophilia, sexual masochism, sexual sadism, transvestic fetishism, and paraphilia not otherwise specified. Let's take a closer look at a couple of these that are more commonly seen in our client population.

- **Exhibitionism** involves the exposure of one's genitals to a stranger. The offender typically derives sexual arousal from this behavior and doesn't pay attention to or denies the offensive nature of this behavior and the impact to the victim. Having an intellectual disability may also add to the process of not understanding the offensiveness of this behavior. Treatment for individuals who expose themselves includes trying to recondition arousal patterns away from exposing and toward adult consensual intimate behavior as well as sensitizing them to the impact on the victim.
- **Frotteurism** is the act of touching or rubbing up against a non-consenting person. Individuals who exhibit this behavior use this contact to stimulate sexual arousal. Many experience mental fantasies of sexual behavior during the act of Frottage. The data indicates that this behavior typically begins during adolescence. Treatment for these offenders also includes reconditioning their arousal patterns.
- **Voyeurism** involves the act of observing unsuspecting individuals, usually strangers, in the process of disrobing. The act of "peeping" gains them sexual excitement and arousal. The onset of this behavior usually occurs before age 15 and can continue and strengthen into adulthood if not treated.
- **Finally, Pedophilia** involves sexual activity with a prepubescent child (*a child younger than 13 years of age*). Technically a "Pedophile" must be 16 years of age or older. Most pedophiles have a measured and self-reported arousal to prepubescent children while some do not, they offend as an expression of power and control rather than sexual arousal. In both cases, treatment is very challenging and involves extensive work to recondition arousal away from minors and to address the impact to the victims. The recidivism (*re-offense*) rate for those individuals with pedophilia who target males is roughly twice that for those who target females.

Submitted by Clinical Service Manager, Bradley Heath, MA

Condolences:

Our condolences go out to the Silverton Group Home in their loss. Lynette Harris a HTT2 in the Silverton home had been employed by SOCP since 2004.

HR: SOCP Anniversaries

4th Quarter Awards

5 Years	10 Years	15 Years	20 Years	25 Years
Sanasi Fadiya Sue Riddell Ronald Slater Amy Berkeley-Otto	Suzanne Shadrick Manu Ruth Kamanda Naomi Michael Angie Rowland Gennie Lieder	Evelyn Cleveland Jamie Fears	Mea Allen Larry Burbank	Linda Dye

1st Quarter Awards

5 Years	10 Years	20 Years		25 Years
Matthew Frazier	Deborah Jackman	Mea Allen	Joyce Johnson	Pat Kettleon
Jennifer Ingalls Hill	Joan Amato	Susan Short	Sylvia Garcia	
Chandel Schnicker		Susan Vittone	Phillip Peneku	30 Years
Jeri Lynn Allen	15 Years	Victoria Belgard	Carolyn Todd	Marcella Johnson
Carol Kading	Todd Hartje	Diana Gross	Jadwiga Zielinski	
Mitzi Lemon	Linda Barce	Star Thorson		

Safety Manager: How to Handle and Accident

Imagine you're involved in an accident, and it looks like another person suffered damages or injuries because of what happened. You quickly report it to your manager—as you should! The manager passes the information on to the Safety Office. A few days later a friendly attorney or an insurance adjuster calls you at home to ask “just a few quick questions” about the accident. He says he needs to finish up a report and your answers will help. The questions seem pretty basic and straightforward, so you answer them as best as you can. The next week you receive some medical bills from a doctor's office for treatment given to the citizen. This is all very confusing to you. So you set the bills aside and figure the doctor's office has it all wrong and is billing the wrong party.

What's Wrong ... with this picture?

First, everyone feels bad if they're in an accident. It certainly helps to talk it over with someone - even if it's just to figure out why or what happened. We suggest you talk things over with your manager or with the Safety Office. You should never talk directly with a citizen, who will likely someday turn it into a claim. When people are under stress they usually hear what they want to hear at the time. Or if it's you and you're under stress or feeling bad about what happened, you might say something that you don't intend to say. You don't want a claimant misquoting you later or saying you admitted you were at fault. Also, never talk with a claimant if they have an attorney. For that matter, you shouldn't talk to an attorney either, even if they're “friendly”.

Secondly, send everything that deals with an accident or a claim to the Safety Office. Don't take it upon yourself to “make things better.” You could make things worse, even if you have good intentions. If you get something in the mail, even if by mistake, send it directly to the Safety Office. If a lawsuit is filed, you need to send everything to the Safety Office.

Lastly, if an accident happens or you get involved in a “situation”, don't isolate yourself or think that you can “make it go away”. Your manager and the Safety Office are there to help you.

The next “Connections” newsletter is scheduled for April 2009. Articles need to be submitted by March 15th for consideration. Send your story ideas to:

Elaine.m.stauffer@state.or.us

