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NEW ORGANIZATIONAL STRUCTURE UNVEILED

BY ADAM MOORE

While many staff members at Mississippi State Hospital have participated in Rapid Improvement Events since the implementation of lean methodology, one RIE early this year had many members of the hospital's administration together for one single purpose.

They gathered in January, and continued to meet several times in the subsequent weeks, to discuss an overhaul of the hospital's organizational structure – no easy feat considering the service delivery organization affects every facet of clinical services at the hospital.

After several sessions, leaders across the hospital have backed a new vision for the organizational structure of the hospital. This vision overhauls the unit management system as it has been, clarifying roles and responsibilities and also confirming who is accountable for key decisions and tasks within the unit. Clinical Director Dr. Robert Maddux visited units across the hospital to introduce the new system.

"All of our programs out here on the different units are multi-disciplinary," Dr. Maddux said. "We've got professional clinical staff of different disciplines working together in programs, and any time you've got a situation like that, you have to have someone perceived as a leader of that program by all the different disciplines."

"The new organizational structure, which emerged from the RIE, identifies and positions the service chief to serve the clinical team in that leadership role."

At the outset of the Rapid Improvement Event – a multi-day examination of a specific area or problem that includes team members from multiple disciplines – the team members began by looking at the several issues they were planning on addressing.

There were three specific problems they were facing. The first is that multiple lines of supervision in the unit management system could create conflicts between clinical and administrative decisions. The second was that reporting relationships were sometimes unclear, which added to confusion. The final problem was that the unclear line between clinical and administrative deci-

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"THIS STRUCTURE IS CONSISTENT WITH OUR VALUES, AND WE BELIEVE IT WILL EMPOWER US TO ACHIEVE OUR VISION AND MISSION."



MISSISSIPPI STATE HOSPITAL

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MISSION

To help the individuals we serve achieve mental wellness by encouraging hope, ensuring safety, and supporting recovery.

VISION

Mental wellness in every life, in every home, and in every community.

OUR GOALS

- 1. Implement person-centered and recovery-oriented treatment and care.
2. Improve safety and quality.
3. Increase the use of evidence-based or best practices.
4. Maximize efficient and effective use of human, fiscal, and material resources.

CORE VALUES

Respect - Relationships - Accountability - Teamwork - Diversity

MEMBER OF

Mississippi Department of Mental Health American Hospital Association Mississippi Hospital Association Southern States Psychiatric Hospital Association

ACCREDITED BY

The Joint Commission

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sions did not clearly show who was accountable for service provision.

So what's the answer? Rapid Improvement Event team members developed a new organizational structure we believe will be the best to deliver effective service for our patients at Mississippi State Hospital, Dr. Maddux said. This structure is consistent with our values, and we believe it will empower us to achieve our vision and mission.

Dr. Maddux and others on the RIE team decided on three major changes for this new unit structure. The first is that the service chief is now the leader of a unit who sets expectations for the clinical programs within their services. Secondly, the unit directors will now be known as service administrators, and they report directly to the service chiefs. The third major change involves the clinical discipline service directors, who are accountable to design and deliver the clinical services to meet the expectations of the service chiefs.

In these new roles, the service administrators will do everything the unit director did with two exceptions: they will no longer provide administrative supervision of clinical discipline supervisors, and they no longer have responsibility for fidelity to the global schedule.

Service administrators do have three major areas of responsibility. They will be driving the implementation of the Lean Daily Management System (LDMS) and performance improvement, they will maintain a clean and safe environment on their units, and they will monitor and report on regulatory compliance issues.

Dr. Maddux noted that the implementation of LDMS will be a big change. It will include measuring

performance and outcomes, as well as other aspects of the system, such as monitoring and maintaining the primary visual display boards.

That means all the staff members could walk into this room and see how they've been doing over the past three months, in terms of patient outcomes, Dr. Maddux said. You're not going to have to take a class in statistics to be able to understand it. You can come in and see a display that shows how sick patients were when they came in, and another that shows how well they were when they left. That is just one example that will be based on the clinical outcomes we'll be measuring.

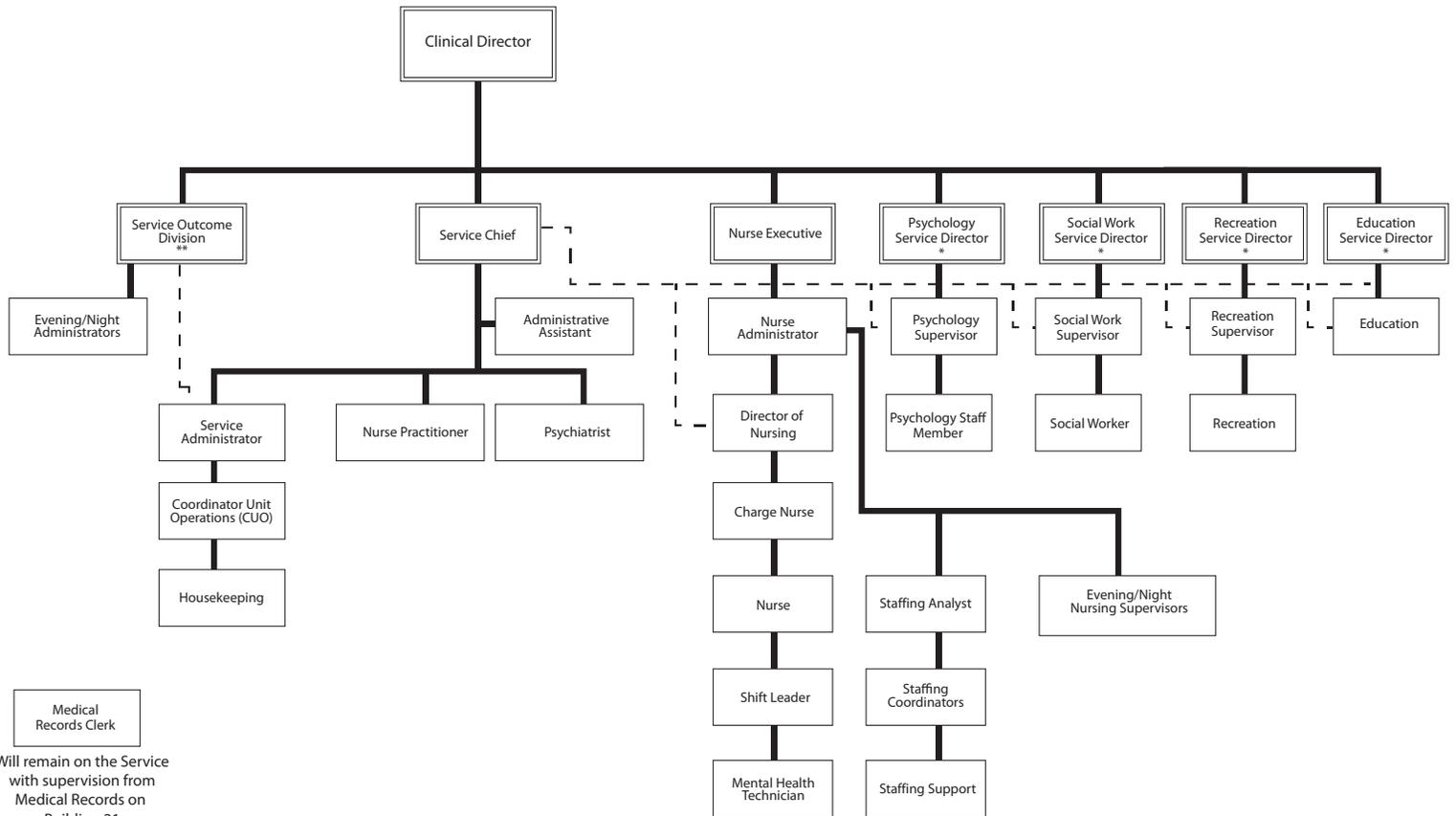
THAT WAY, WE'LL HAVE STAFF WHO KNOW THE PATIENTS BETTER, KNOW THE BUILDINGS BETTER, AND WILL BE ABLE TO DELIVER A MORE RELIABLE, HIGH QUALITY OF CARE,

The clinical discipline service directors, meanwhile, will monitor the fidelity of the clinical disciplines to the clinical program of the service. They will be accountable for compliance with regulatory standards.

There will be another level of supervision the service chiefs will provide to the clinical discipline supervisors on their service, Dr. Maddux said. The details of that supervision are in the process of being worked out, and will be defined through a Lean tool for evaluating performance, but it's not going to be complicated.

Another group of staff members also affected by this change will be the mental health technicians. They're the frontline employees who work with MSH patients each and every

Psychiatric Services Organization Chart



Will remain on the Service with supervision from Medical Records on Building 21

* Dotted line represents authority of Service Chief over Clinical program

** Dotted line represents resource support for Service Administrators from Service Outcome Division.

Mississippi State Hospital
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day. Once this new organization is implemented, their line of supervision will be entirely within nursing services.

While this reorganization represents a new beginning, there will likely be other changes coming in the future. For instance, scheduling is one area that may change. Directors of nursing, charge nurses, and the staffing analyst could all work together to

determine schedules so all of those areas have input. If possible, staffing could also move to a closed system, where staff members are not pulled from one building to another.

“That way, we’ll have staff who know the patients better, know the buildings better, and will be able to deliver a more reliable, high quality of care,” Dr. Maddux said.

When this new organization was first unveiled in February, Dr. Maddux noted that many people across the campus had been working on developing it since the beginning of the year.

“I want to thank everyone who has worked on this,” he said. “It’s been a very lengthy and painstaking process, but it’s also been an extremely important one.”

HOSPITAL'S SMALLEST EMPLOYEE HELPS PATIENTS COPE IN A BIG WAY

BY TIM DURR

He may be one of the smallest employees on the MSH campus, but he has one of the biggest hearts when it comes to connecting with patients.

Lenny, a 3-year-old French Bulldog, currently serves as a Canine Psychotherapy Adjunct for the Whitfield Psychological Services Clinic. This process involves an animal attending individual and group sessions with a psychologist, counselor or other mental health professional trained in the intervention area as well as animal assistance. In Lenny's case, he attends individual and group sessions with his owner, MSH Psychological Services employee Dr. Jamie Rathert.

"Lenny is there for the clients in an evolving, adaptable role to build rapport, offer comfort, model present mindedness, lower anxiety, increase participation and reduce physiological stressors associated with inpatient admission," she said. "He has served in grief group, individual therapy, interview sessions, and will begin a new group in April for Building 84 patients.

Dr. Rathert said Lenny offers a supportive role and interventions are largely determined by the patients, unless a specific mindfulness training technique is being utilized.

"The most powerful experiences working with Lenny have been observing his keen sense of compassion towards the clients in grief group and individual therapy," Dr. Rathert said. "He has a sixth sense for when someone needs encouragement to speak or some comfort. Group members have teared up watching Lenny work with one of their peers."



Lenny, a French bulldog who is providing animal assisted therapy, even has his own MSH name badge.

Rathert said sometimes patients will respond to Lenny when they will not respond to a person.

"He helps me to connect with individual patients who have had difficulty connecting in traditional talk therapy or experience overwhelming anxiety in group situations," she said.

"He has an uncanny knack for bridging the gap between clients that are mistakenly thought of as difficult, distant, resistant, or hard to reach. He adapts to what they need more

often than I imagined he could."

Traditionally pets have been involved in therapeutic settings for two purposes - to boost mood and improve morale. They are also utilized for specific interventions targeted towards sensory integration issues, communication difficulties and social skills training, Dr. Rathert said.

However, as a canine psychotherapy adjunct, Lenny assists with previously established therapeutic practices and offers a supportive role to build rapport and decrease anxiety.

Rathert said Animal Assisted Psychotherapy has been most recently studied within substance dependence treatment programs. Patients who participate in groups where a dog is present and available for petting, comfort, and general presence have increased therapeutic alliance, participate more, and experience other positive treatment outcomes.

"We already know that petting a dog lowers cortisol levels, blood pressure, heart rate, and visiting with a dog has been found to reduce anxiety and boost mood in a number of inpatient psychiatric populations," she said.

"The next logical step is to involve dogs in previously established therapies, canine assistants in previously established process therapy groups, individual sessions, and mindfulness educational sessions."

13TH ANNUAL FARMER JIM NEAL GOLF CLASSIC IS APRIL 11

BY ADAM MOORE

Friends of Mississippi State Hospital is gearing up for its signature event of the year, the Farmer Jim Neal Golf Classic.

The 13th annual event will be Friday, April 11 at Whisper Lake Country Club in Madison. Anyone who would like to tee off in support of Friends of MSH is welcome to register for the tournament and help support the volunteer organization, which dedicates itself to raising funds and promoting awareness for Mississippi State Hospital.

The charity event is named in honor of “Farmer” Jim Neal, a former legislator and a radio personality in Jackson who was popular across the state. On the airwaves for decades, he was a strong advocate of community service, volunteer work and charity. That spirit of service carries on in this golf tournament, which is the largest fundraiser of the year for Friends of Mississippi State Hospital.

“We’re so excited to have this time of year with us again as we prepare for this tournament,” Friends of MSH Vice President Bridget Lowery said. “It’s a great day of friends and fellowship for everybody, and we would like to invite anyone and everyone to take part in it with us.

“This tournament means a lot for the Friends organization, and we’re thrilled and fortunate to have the support of a community that understands the needs of those individuals served through Mississippi State Hospital. That’s what makes this tournament special.”

During his career, Farmer Jim Neal was an enthusiastic supporter and champion for Friends of MSH,

and he sincerely cared for the patients and residents at Mississippi State Hospital and Jaquith Nursing Home. He passed away in 2006, but the golf tournament named in his honor continues on with the support of his family.

There will be two tee times for the tournament, a morning flight at 8 a.m. and an afternoon flight at 1 p.m. The individual player’s fee is \$125, and there are several levels of sponsorship available, ranging from \$250 to more than \$1,000. Title sponsors for this year’s tournament are BankPlus and Valley, and Birdie Sponsors are Mississippi Hospital Association and Ergon.

The following sponsorships are available:

- Tee Sponsor – a contribution of \$250. Sponsor receives a tee sign at the tee box.
- Beverage Cart Sponsor – a contribution of \$350. Sponsor receives a company sign on all beverage carts.
- Par Sponsor – a contribution of \$650. Sponsor receives one team (4 players)/2 mulligans per member; a tee sign at the tee box; and recognition at the tournament and in the program.
- Golf Cart Sponsor – a contribution of \$1,000. Sponsor receives one team (4 players)/2 mulligans per member; a tee sign at the tee box; and recognition at the tournament and in the program.
- Birdie Sponsor – a contribution of \$2,000. Sponsor receives two teams (8 players)/2 mulligans per player; a booth display; a tee sign at the tee box; and recognition at the tournament and in the program.
- Eagle Sponsor – a contribution of \$3,500. Sponsor receives two teams (8 players)/2 mulligans per player; a



booth display; recognition in MSH’s anti-stigma campaign booklet (5,000 circulation); a company/individual vinyl banner; a banner on MSH’s website; and recognition at the tournament and in the program.

Winners will be recognized at the end of the tournament, and prizes will also be awarded to winners of longest drive and closest-to-the-hole competitions. One lucky person will receive the chance to shoot for \$1 million.

For more information about sponsorships or to register to play, contact Sheila Shows at 601-351-8377. Everyone is welcome to join in supporting Friends of Mississippi State Hospital by playing in this tournament.

MSH STUDENTS LEARN DANGERS OF SUBSTANCE ABUSE, AND A STORY OF HOPE

BY TIM DURR

“I should have died.” Those were the words of 25-year-old Stacy Leggett of Pearl as she recounted her struggle with substance abuse during a drug awareness program for students at MSH’s Lakeside School.

“I could have died multiple times but God had his hands on me,” Stacy said. “He took something really bad and brought something good out of it.”

Stacy and her stepmother Jay-Tea Leggett recently shared their story with the adolescents at Lakeside. It could be a harrowing tale at times, but it was ultimately one of hope and recovery. Stacy now actually works at the Pearl Police Department, but there was a time when she was more likely to be brought in by officers rather than working beside them. She shared her story with the intention of preventing other young people from following similar paths to the one she went down.

Stacy said she grew up in an environment where her mother and stepfather abused drugs. At age 8, the police department raided their home and arrested her mother and stepfather for drugs. It was then she went to live with her father and stepmother.

Attempting to cope with all she had gone through when living with her mother, Stacy began to make bad decisions.

“I started hanging out with older people, acting out in school, and dressing differently,” Stacy said. “At

14, I started smoking weed and taking pills. I wasn’t concerned about school. I set out to get attention, and I got attention – but not the kind I needed.”

Stacy said things began to get worse when she began dating a young man during her junior year in high school. He began to influence her to do things she shouldn’t have done. Their rocky relationship continued until after she graduated in 2006. Stacy said one night they were going to a Halloween party and on the way



Stacy and Jay-Tea

decided to steal some liquor from a liquor store.

“We got drunk and started arguing and then it became physical – hitting,” she said. “He then said he was going to kill himself.”

She was devastated when he actually followed through.

“I was 18-years-old and I was bro-

ken after that. I died with him. That’s when my drug addition escalated. I quit caring about anything.”

Stacy said she then left home and her life really began spiraling out of control.

“I started going from place to place, from this guy to that guy, from this drug to that drug looking for healing,” she said.

By this time, Jay-Tea said she and Stacy’s father were obviously very concerned.

“I felt too out of control,” Jay-Tea said. “I kept praying for God to change her.”

Things took a turn for the worse when Stacy got high with a friend and the two decided to go riding. The friend missed a curve and the car slammed into a utility pole. Stacy did not have her seatbelt on and her face crashed into the windshield. To graphically illustrate her point that drugs can destroy a person’s life, Stacy showed pictures of herself after the crash.

Jay-Tea said Stacy’s face was so unrecognizable that she and her husband told the nurse the person they were looking at was not their daughter.

“There is one reason I didn’t die, and that’s because God didn’t let me,” Stacy said. “He had mercy on me, mercy I didn’t deserve.”

Despite the near death experience, Stacy said her struggles continued.

“I stayed sober 3 or 4 weeks and went right back out there,” she said. “All I wanted to do was to get high. I didn’t have any goals. I didn’t think about tomorrow.”

Stacy said she finally realized that no matter how high you get, the feeling fades away and then you’re disappointed. She decided she needed help and began to pray.

“I said God, you have to do something. I’ve lost my will to live. I am completely dead inside,” she said.

Stacy said she enrolled in a year-long program which started her on her journey to sobriety.

“Slowly but surely, I changed,” she said. “It was a blessing to be sober.”

Stacy said she regrets what she put her family through.

“At 14, 15, 16, I thought this is my life and I’m going to do what I want to do,” she said. “But it was breaking my father’s and stepmother’s hearts. Now it hurts my heart to know that I was hurting them.”

Stacy said she is now working for the Pearl Police Department and is attending college. She is a criminal justice major.

“God used my stupidity to get me where I am today,” she said.

Stacy was invited to MSH by Lakeside School teacher Teresa McNeese. “Our young people needed to hear this,” McNeese said. “They seemed to really listen and pay close attention.”

AUTHOR JANE KIRKPATRICK INSPIRES AT EMPLOYEE OF THE YEAR PROGRAM

BY TIM DURR



Kevin Coleman

Marcia Hardge

John Crain

Valentine’s Day is a special day in the hearts of many, but February 14 was special for several Mississippi State Hospital employees this year for another reason.

Three MSH staff members, one from each of the hospital’s three service areas, were named the 2013 Em-

ployees of the Year on that day. Marcia Hardge was named Employee of the Year for Clinical Service, Kevin Coleman was named Employee of the Year for Direct Care Service, and John Crain was the 2013 Support Services Employee of the Year.

“Mississippi State Hospital is very

fortunate to have a great team of staff working to meet the needs of our patients, residents, and the individuals we serve in the community,” MSH Director Bo Chastain said. “Each and every one of them deserves recognition for the hard work and dedication they provide throughout the year.”

Marcia Hardge is a charge nurse on Building 63. She has worked at the hospital for more than seven years. Kevin Coleman has worked at MSH for almost 18 years. He works on the Male Receiving Unit. Crain has worked at Mississippi State Hospital for almost 25 years, and he works in the Environmental Services Department.

All three were nominated by their fellow employees, who noted on their nominations the qualities that made Hardge, Coleman, and Crain such outstanding people to work with. The nominations carried high praise for the three Employees of the Year.

Hardge was described as someone who embodies the core values and consistently exhibits a positive attitude on the job. Her coworkers said she always goes the extra mile to make sure patients are well cared for and their needs are met.

“This person exemplifies what an employee should strive to be,” her nomination form said.

Coleman was described as someone who is essential to the unit and always respectful of staff and patients. His coworkers said he doesn’t complain even when things get very tough, and he knows the importance of teamwork.

“He portrays an attitude that shows the true spirit of a dedicated MSH employee,” his coworkers said in nominating him.

Crain’s coworkers said he was known for his exceptional intelligence and as someone who works to learn as much as he can. They said there is no doubt his assigned tasks will be done in a professional manner.

“The devotion and work ethic of this

person is so contagious that other staff now follow his lead,” Crain’s nomination form said.

MSH Director Bo Chastain said he spoke on behalf of the hospital’s leadership in truly appreciating the hard work these three employees and their coworkers across the hospital do every day.

“Their hard work and dedication is noticed and appreciated,” he said.

Before the presentations of the 2013 Employees of the Year, audience members were inspired by keynote speaker and bestselling author Jane Kirkpatrick, who talked about using power to make a difference in a person’s life. Kirkpatrick chronicled the life of Dorothea Dix, an early reformer for the mentally ill. Dix was instrumental in opening hospitals to serve the mentally ill across the country, including a facility in Jackson that would eventually move on to become Mississippi State Hospital at Whitfield.

She noted the passion Dix had for serving the mentally ill, and her openness to new ideas, such as providing a facility specifically to give

the mentally ill a safe place to be treated. She also engaged all kinds of people she encountered, from patients and private citizens to state and national lawmakers.

“Those moments when you are interacting with the patients and you are hearing their stories, and giving them what they need at that moment, that is the greatest gift that they can ever receive,” Kirkpatrick said.

Kirkpatrick said she once asked a group of first and second graders to define the word power. Most gave answers such as being rich brought about power, but one answer stood out.

“A second grader said, powerful is when you want to quit but you keep going,” Kirkpatrick said. “I think that’s the best definition yet of power. And that’s what we are here to work with on behalf of our patients. To help them find that power in themselves. To let them know that even though they may want to quit because of what life has presented to them that must they keep going.”



Jane Kirkpatrick and MSH Director Bo Chastain