

West Central Georgia Regional Hospital Regional Reflections

MAY 2016



Since opening in 1974, West Central Georgia Regional Hospital (WCGRH) has stood as a beacon of hope for consumers in need of behavioral healthcare services in the State of Georgia

QUALITY MANAGEMENT

Joint Commission Junction



The Joint Commission has said “farewell” for this survey cycle. Although we did very well, there are still things the hospital must correct in order to be found in compliance with our corrective action plan and receive our **OFFICIAL** accreditation certificate. In an effort to be transparent with all of our staff, we wanted to make sure everyone knew exactly what the hospital was cited on during our Joint Commission Survey and what we are doing to correct it so we can continue to maintain a constant state of survey preparedness and an ongoing environment of high quality, safe patient care.

Direct Findings:

- (1) Two battery powered exit lights had not been tested monthly for a minimum of 30 seconds. To correct this, we performed tests on all battery powered lights and put all on a monthly and annual preventive maintenance.
- (2) The individual automatic transfer switch tests for buildings 6 and 7 did not show each building being tested separately. The monthly generator testing form was revised and has now been separated to clearly show the transfer of the ATS to each separate building (building 6 and building 7)
- (3) Treatment planning:
 - Patient strengths need to be incorporated into the goals and objectives.
 - Care plans not modified to include goals and interventions related to changes in clinical status.
 - Monthly recovery plans did not include revisions of the objectives.
 - In some instances, individuals had met objectives but the objective had not been updated since being met.
 - All objectives need to be reviewed and revised.
 - Individualized active goals need to be made for patients resistant to attending groups.
 - All active groups must be listed on the IRPs.

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Joint Commission Junction

(continued)



- The corrective action for these citations was mandatory training for the treatment teams on the issues listed above as well as ongoing real-time auditing of the IRPs.
- (4) Found two physician orders not followed as written: sliding scale for insulin not given as ordered and order written for an OB/GYN consult but appointment never made. Mandatory education was provided for all nurses to ensure going forward that orders are not missed.
- (5) Found missing entries in the temperature logs on one unit. To correct this, the Unit Managers will conduct weekly audits that will be submitted to the Nurse Executive on a weekly basis and will report findings to the Nurse Executive

Indirect Findings:

- (1) LabCorp Contract: The statewide LabCorp Contract did not include the PI indicators. These indicators were added following our survey.
- (2) Seclusion and Restraint- two records did not have modification to the plan of care following an episode of seclusion and restraint. To correct this, a clinical review form was implemented to include a review of each seclusion and restraint episode. The form will be completed and signed by the treatment team members and will be part of the plan of care in the medical chart. 100% of seclusion and restraint charts will be reviewed daily and reported monthly to ensure they include the clinical review form.
- (3) Battery operated lights need to be installed on generators and we need to test them annually. The batteries have been installed and put on an annual preventive maintenance.
- (4) Fire pump in gymnasium is required to be tested weekly and the supervisory signal is required to be tested quarterly. Testing on the fire pump had already begun shortly prior to the survey and will continue going forward.
- (5) The surveyors found some environmental findings such as a broken grab bar in one of the unit bathrooms, exposed piping on some of the toilets (these two things were corrected during the survey), a roll of plastic bags and a dead bug in cabinet, laundry detergent found not locked up on one of the units and an unattended patient in the laundry room. To correct this, all unit managers/designees will conduct daily environmental rounds using a Shift Safety/ Perimeter Check form and will submit the forms to the Nurse Executive weekly.
- (6) We were cited for not providing therapeutic activities by licensed providers on Sunday. We have now added Sunday groups to our schedule.

West Central GA Regional Hospital

Nursing Conference

PTSD: Neurobiology, Treatment, and Research



Keynote Speaker
Nzinga A. Harrison, M.D.

**All Disciplines
Welcome**

May 12, 2016
9:00AM -1:15PM

Registration starts at 8:30AM

West Central GA Regional Hospital
3000 Schatulga Road
Columbus, GA 31907
Honor Hall, Building 12

The purpose of this activity/session is to enable the learner to apply knowledge of prevalence, neurobiology and evidence-based evaluation of PTSD in order to identify and manage individuals with PTSD in various medical settings.

Registration Deadline is May 9, 2016

Contact Malcolm Booker
@ 706 568-5177
for Registration Information



Culture of safety
It starts with **YOU**

State of Georgia and
Developmental Disabilities

*West Central Georgia
Regional Hospital
3000 Schatulga Road
Columbus, Georgia 31907
(706) 568-5000*



EMPLOYEE NEWS



April 1st.



*Left to Right: Row 1: John Robertson, RHA, Ashley Gonzalez,
Kathleen O'Brien*

Row 2: Trixy Crumbley, Breyana Harris

Web Page
www.wcgrh@dbhdd.ga.gov

State of Georgia and
Developmental Disabilities



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EMPLOYEE NEWS

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April 18th.



*Left to Right: Row 1: John Robertson, RHA, Ebony Arceneaux,
Daphne Carter, Zay-Viana Pickens, Juanita Jackson-Region 6*

Row 2: Gregory Pullen, Arnold Leonard, Uriel Joseph, Sharon Hamilton

State of Georgia and
Developmental Disabilities

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EMPLOYEE NEWS



April 18th.

Web Page
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*Left to Right: Row 1: John Robertson, RHA, DeMia Rosser,
Donnazhelle Encalade-Region 6, Jeannine Lumpkin, Ahsaki Cruz
Row 2: Kentton Battle, Craig Johnson, Tamisha Hamilton,
Wykanda Harris, Robert Clay Not pictured: Eleanor Beason*

News From Human Resources

FAITHFUL SERVICE AWARDS

30 Years

Jimmy Medley

10 Years

Samuel Page

5 Years

Funke Coker
Stephanie Blackmon
Jennifer Abernathy-Smith

THANK YOU FOR YOUR CONTINUED SERVICE TO OUR HOSPITAL AND THE STATE OF GEORGIA

Human Resources Monthly

May 3rd. Manager Approval by Noon
Please reconcile and move FSLA to OT Premium
May 13th. Pay Day
May 17th. Manager Approval by Noon
Please reconcile and move FSLA to OT Premium
May 31st. Pay Day

Manager Approval Subject o Changing

Orientation is on May 2nd. and May 16th. In HR from 1:00-5:00 PM

Did You Know? E-Performance:

Every employee has access to their e-performance documents thru their self-service which is located at www.team.ga.gov. Your employee I.D. and Social Security or password created will allow you entry. If you have forgotten your password or do not remember your questions—Call 1-888-896-7771. All employees who have an I.D. issued to them when hired have access to all of their personal information and the ability to make any necessary changes without having to come to H.R. However, H.R. is always available if you need assistance or have trouble with the site.

HAVE YOU ACCESSED YOUR SELF-SERVICE INFORMATION LATELY?

Any Questions please do not hesitate to call Human Resources (706) 568-2260

Goodbye and Farewell

Jane Albrecht	Brian Fisher	Willie Jones
Therese Arreola	Christie Howard	Valerie Lake
Fernard Brown	Anthony Jackson	Isaiah Lester
Kenneth Cribb	Therman Jackson	Jessica Simmons
Thuy Dougherty	Marckdaline Johnson	Cyd Thurman
Cathyann Vaughn	Karcen Wolfgang	

Human Resources Department

HR Representatives:

Peri Johnson, Human Resources Manager
Sandra Brown, Employee Relations Specialist
Vonceil Plump, Personnel Tech II
Paul Fahnestock, Recruiter
Shannon Hearn, Recruiting Tech
Pat Altman, Benefits and Worker’s Comp
Michele Trowers, Leave/Payroll Specialist
Ivonna McCoy, Program Associate

Suggestions or Questions:

Any questions? Please contact HR at (706) 568-2260

If you have any ideas or topics you would like to see featured in the Human Resources section, please submit them to the Human Resources Department

**Monday, May 30th. Memorial Day (State Holiday)
(HR WILL BE CLOSED)**



Staff Development & Training

Here is our “**Block**” **Schedule for Annual Updates** in May !
 You will attend according to your Safety Care date, and must attend the entire block. You will then be current for the next year!
 Unit PA's will register Unit Staff.

Block 1:

Tues, May 3 : 8:00-10:00 Infection Control and Incident Management
 10:00-12:00 Seizure
 1:00-3:00 PNS
 Wed, May 4: 8:00 CPR and First Aid
 Thurs, May 5: 8:00 Safety Care Recert

Block 2:

Mon, May 23: 8:00 Safety Care Recert
 Tues, May 24: 8:00-10:00 Infection Control and Incident Management
 10:00-12:00 Seizure
 1:00-3:00 PNS
 Wed, May 25: 8:00 CPR and First Aid

Safety Care Initial Dates: May 5-6-9 and 19-20-23

Positive Behavior Supports (PBS): Thursday, May 19: 8:00-5:00



Staff Development & Training (continued)

Don't forget your e-learning!

You can login by going to:

www.MyLearning.DbhddUniversity.com

Bowel Management 101 and 201 have been replaced by:
DBHDD Bowel Management 2015 Initial HST-FST-CNA
DBHDD Bowel Management 2015 Initial Training RNs-LPNs
DBHDD Bowel Management 2015 Physician Initial

RNs are also being assigned:

Tobacco Use Treatment Practical Counseling Read and Sign

If you have not already done so, please make sure to complete these read and signs:

Emergency Management Program and Operations Plan Read and Sign

Fire Safety Program and Fire Safety Management Read and Sign

This new Annual Online training should have been completed by now:
Safety Program and Safety Management Plans in DBHDD Hospitals Annual

And don't forget your Annual online classes:

WCGRH –HIPAA and Client Rights

MERS Annual SIP

ATTENTION FST & NURSING STAFF MEMBERS:



The **2016 FST and Nurse Annual Competency** dates have been scheduled. Please make note of these dates and times and make sure to attend this **MANDATORY** training event.

No need to pre-register- WALK IN!

FST ANNUAL COMPETENCY

Date: May 17 & May 18

Time: 7:00a.m.-6:00p.m.

Location: Honor Hall- small side

NURSE ANNUAL COMPETENCY

Date: June 1 & June 2

Time: 7:00a.m.-6:00p.m.

Location: Honor Hall- small side



We successfully completed our week-long Wellness Recovery Action Planning (WRAP) training last week, March 28 – April 1, 2016. We had 18 participants representing all 5 state hospitals and three Advanced Level Facilitator Trainers to conduct the training.

We could not have had the incredible experience we did without so many people we all agree need to be recognized:

The **RHA's of each hospital** for seeing the value of WRAP in their facilities;

The **statewide Quality Management** department represented by **Evelyn Harris**, who has championed this cause from the beginning and been a huge part in planning each training;

The **PSR Statewide committee**, led by **Tracy Butts** from Central State Hospital, for their continued support in identifying staff to participate in the training and supporting WRAP in the PSR malls;

The **statewide Training department**, led by **Dr. Donna Johnson**, for their assistance in planning and coordination of this event and for Dr. Johnson personally taking time to come and be “on the ground” with me to iron out last minute details!;

West Central Georgia Regional Hospital staff:

Aisha Hill in the Business Office, who pulled off miracle after miracle with ordering our materials and helping the trainees secure hotel rooms among other things! She was recognized specifically by the group as a shining star for us during this process!

The **Staff Development and Training Department at West Central**, led by **Meg Sturdevant** and supported by **Carrie Ann Pizarro** and **Crystal Robins**. These three specifically were there with us the entire week to help us with everything from coffee disasters to food ordering to room set up, certificates, and emotional support!! Cannot thank them enough!

The **Food Service staff, led by Kim Long**. She and her staff worked with us early on to plan menus, have ample snacks and refreshments and even provided us with lunch deliveries, making the day run 100 times smoother! Thanks for supporting us with healthy options and choices that reinforced what we were trying to encourage through our training!

And of course to our **leadership team at West Central**, who supported this initiative and wanted to host this event for the state. They were wonderful hosts and they made a very positive impression on the attendees from other hospitals. The staff from West Central who attended the training were great representatives for the hospital and did an excellent job making the others feel welcome.

I personally want to thank my co-facilitators, **Lorna Lindo** from Atlanta, and **Barry Jones** from Augusta. I had the privilege of training these two incredible people at our very first WRAP facilitator training almost 4 years ago and to see the level of skill and professionalism and passion these two bring to WRAP is overwhelming!! They were exceptional partners in this journey and I am proud now to call them both friends!

I also have to say that each and every participant that attended this training gave their hearts to this work. The changes we saw from Monday to Friday were unbelievable and we are so pleased to see such passionate, excited, wellness/recovery focused staff at each hospital. This was an exceptional group of people and I am so grateful to have gotten to spend a week learning from them!!

We hope to speak to hospital leadership soon on a statewide level to share with you some of the feedback from the participants as well as some ideas for next steps to sustain WRAP as a powerful tool for wellness recovery and self-direction in care. If you have any questions or concerns, please feel free to contact me, Lorna, or Barry, and we're more than happy to speak with you further.

Heather Smith
Case Expeditor, Region 6

A BIG



to the *Staff Development and Training* department and all
WCGRH employees who have helped us complete over

6,500

training hours* so far this year!

WCGRH- KEEP UP THE GREAT WORK!!!

Remember to complete all of your annual training, e-learning, and
other classes as they are assigned.

*Training hours= Number of classes x Length of time x Number of students

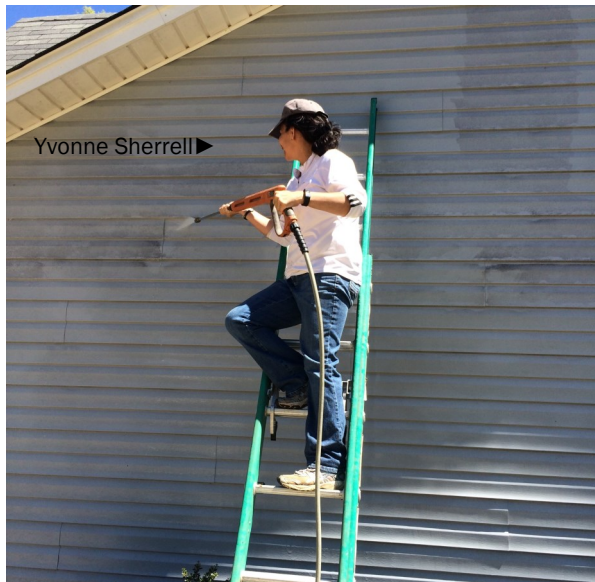
Meg Sturdevant, Director
Staff Development & Training

May Birthdays



1 Andra Shipp
 1 Ranae Tolbert
 2 Anthony Daniels
 2 Leanora Harkless
 3 Gwendolyn Brazell
 3 Sasha Martin
 3 Oladayo Oludimimu
 3 Ingeborg Harris
 4 Lashonda Grant
 4 Dorinda Grimes
 5 Sherronna Turner
 5 Mitchell Singletary
 5 Timothy Tate
 7 April Glover
 7 Ashley Gonzalez
 8 Litisha Harris
 8 Knejie Webster
 9 Tammy Dimsdale
 9 Tanya Hardaway
 9 Angela Jenkins
 10 Darrien Lewis
 10 Lakesha Rivers

11 Thomas Lindgren
 13 Cecelia Dixie
 14 Catherine Boyer
 15 Vashay Poole
 16 Tameika Williams
 17 Angela Cantrell
 17 Charles Collins
 18 Brianna Freeman
 19 Shannon Hearn
 19 Debra Clark
 20 Ulrica Lawson
 20 Rickey Upshaw
 22 Murray Riggins III
 23 Latasha Lopes
 25 Ali Fakhri
 26 Ashton Reagin
 26 Gail Huddleston
 27 Ricky Jackson
 28 Eric Simpson
 29 Tianna Hutchins
 31 Tammil Walker



Yvonne Sherrell ▶

In the left and right pictures you will see the results of teamwork and heart as revealed at the Columbus Community Integration Homes (CIH). The CIHs are an integral part of West Central Georgia Regional Hospital's (WCGRH) step-down and reintegration process. When individuals come to reside at one of the two Columbus CIHs, they are given the chance to recover skills they may have lost over long periods



◀ Abede Tesfa

of incarceration and hospitalization, and provided with opportunities to develop new skills, as well. CIH staff helps residents with various things; such as learning to cook nutritious and tasty meals for themselves and their peers, develop and document work skills for future employment searches, develop deeper insight and improved coping strategies to their mental illnesses. The CIH also helps residents better manage their finances, prioritize needs over wants, and discover work and career aspirations as allowed by the Court system. Staff also assists residents in learning the importance of keeping both themselves and their surroundings clean and orderly, and also helps them to declutter their lives by getting rid of old clothes and items that they no longer use or need. Some activities specific to the upcoming season include creative gardening projects as voluntarily directed by our Nurse, healthy cooking classes, outdoor wellness activities, lawn manicuring activities, among others. CIH staff works very closely with residents on a daily basis in order to help them effectively reintegrate into the community and prepare for a life of increasing independence as they plan for a life beyond DBHDD.

When they first received notice that a representative from the Commissioner's office would be coming to visit, the CIH Team immediately began to assess what they would need in order to make the best possible presentation. Yvonne Sherrell, the Forensic Program Manager and indispensable part of the CIH Team, worked hard with the Team to complete some structural work early and when the Team Leader fell ill, Ms. Sherrell and the rest of the Team pulled together to get everything else complete. The whole Team, including but not limited to Cynthia James (Program Assistant) Latavia Heard (Behavior Specialist), Theo Lenore (Nurse) and Direct Care staff like Tanico Jackson, Lakesha Rivers, Mario Murrell and Glenn Morgan, all worked extremely hard in order to make the Commissioner's visit a very pleasant one. As is evidenced in the attached images, their efforts paid off wonderfully. The Commissioner left with a favorable impression of the Homes and the work that our CIH staff does to help residents reintegrate into the community.

Article Written by: Abede Tesfa



CIH STAFF

Seated Left to Right: Anika Lawson, Tanico Jackson, Theodora Lenore, Kristi Wilborn, Cythelyn Sanders, Latasha Copes, Olayiwola (Alfred) Daimeon

Standing Left to Right: Latavia Heard, Cynthia James, Daimeon Turner, Mario Murrell, Letricia Marshall,



Norovirus—a.k.a. the vomiting bug

Cruises are great vacations, offering millions of people exciting travel adventures. However, they can have a bad reputation with reports of illness outbreaks on them. Generally when you hear those reports, you're hearing about norovirus, also known as the vomiting bug.

What is norovirus?

Norovirus is a serious gastrointestinal illness that causes inflammation of the stomach and/or intestines. This inflammation then leads to nausea, vomiting, diarrhea, and abdominal pain. Norovirus is extremely contagious (easy to spread) and will ruin your fun.

Norovirus is the leading cause of illness and outbreaks related to food in the United States. It generally happens when food service workers who have the virus touch food without washing their hands well or at all. It can also spread by sharing food or utensils with someone who has norovirus. You can get norovirus if you touch a surface that was touched by a person with norovirus and then touch your mouth.

How does norovirus spread?

Norovirus can spread from person-to-person, from contaminated surfaces, and from contaminated food or water. It causes approximately 20 million illnesses each year. Symptoms start between 12 to 48 hours after being exposed and can last anywhere from one to three days. Dehydration is a big concern for people with norovirus, especially in the elderly and the very young, and a main reason for people being hospitalized. People are most contagious when they are actively sick and for the first few days after getting over the illness.

Why is norovirus so contagious?

It can be in your feces (poop) before you start feeling sick, and it can stay for two weeks or longer after you're feeling better. Combine that with people not doing a great job of washing their hands and you have big potential for spreading this virus. Norovirus can spread quickly in closed places such as daycares, nursing homes, schools, and yes, cruise ships. There is no treatment specifically for norovirus. The best thing to do if you think you've got norovirus is to contact your doctor, treat the symptoms, stay hydrated, and stay home.

Infection Prevention and You

How can you protect yourself from norovirus?

Wash your hands frequently, avoid sharing food and utensils with someone who is ill, and keep yourself healthy! Wash your hands before you start preparing food. Wash fruits and vegetables well. Cook food thoroughly. Wash your linens after you've been sick and if they get contaminated with vomit or feces. Clean surfaces—especially those in the bathroom—with a chlorine bleach solution (5–25 tablespoons of household bleach [5.25%] per gallon of water). If you don't have access to a sink, use alcohol-based hand sanitizer to clean your hands.

So the next time you're on a cruise ship (or in a daycare, school, nursing home, etc.) and you see hand sanitizer or hand washing stations, use them! They are there to help you protect yourself from norovirus and lots of other icky germs.

Additional resources

APIC consumer alert—Norovirus <http://apic.org/For-Consumers/Monthly-alerts-for-consumers/Article?id=norovirus-how-you-can-stay-safe>

APIC—Clean your hands often <http://consumers.site.apic.org/infection-prevention-basics/wash-your-hands-often/>

CDC—Have You Ever Heard of Norovirus? https://www.youtube.com/watch?v=Ey_OV_-pBeo

CDC—Norovirus <http://www.cdc.gov/norovirus/about/index.html>

CDC—Norovirus: Food Handlers <http://www.cdc.gov/norovirus/food-handlers/work-with-food.html>

CDC—Handwashing: Clean hands Save Lives <http://www.cdc.gov/handwashing/>

CDC—Tips for Healthy Cruising <http://www.cdc.gov/nceh/vsp/pub/CruisingTips/healthycruising.htm>

Attention All Employees

Reminder! Annual Tuberculosis Screening

All WCGRH employees must complete the Georgia State Hospital Employee Health Screening Form **during the month of their birthday**

TB screening is required during each employee's Birthday month

Tuberculosis screening is conducted in Nursing Services, Building 1, Room 25

Skin Tests are given on Monday, Tuesday and Wednesday

Please follow these guidelines for completing the
Annual Employee Health Screening:

- If you have the skin test performed off campus, you still must return the results to Nursing Services and complete the Employee Health Screening Form.
- If you have another job also requiring PPD Testing, we will provide you with a copy of your results.
- If you have had a positive skin test in the past, you are still required to complete the Employee Health Screening Form.

Please Note: If Annual Tuberculosis is not completed within your birth month, Employee cannot work until the screening is completed.

Questions? Please contact Nursing Services at (706) 568-5109





1. Mindful Eating For Healthy Weight: Letting Go of Complicated Rules and Restrictions

- ▶ Eating Behaviors are a tangle of decisions: The moment you decide NOT to do something, (not to eat something) the mind begins to create an endless list of reasons why to do it.
- ▶ Mindful eating helps shine a spotlight of awareness onto a specific part of the meal helping you identify the many opportunities to change as they are happening.
- ▶ What underlying problems are you facing?...Are you rushed, busy, bored or overeating because it tastes good? Not aware of the difference between the absence of hunger vs feeling stuffed?



2. Mindful Eating:

- ▶ Eating is a process of six steps:
 - **Non-eating phase** – you are free of thoughts and actions involving food and eating
 - **The Preparation Phase**- preparing a meal of snack or deciding on a meal in a restaurant-
- Deciding what to eat and how much**
- **The Pause**-creates the mood and outcome for the action
- you can choose to eat everything or pause reflecting on your goal during the meal and stop eating when comfortably full- not stuffed

⇒

3. Think of “Hunger” As A Guest at the Meal *Who Eases Out the Door* with Every Bite

- ▶ **At The Meal Phase**- As you begin eating, notice that “Hunger” quickly begins to fade with each mouthful and is easing its way out the door. Eating slowly and Being mindful of this you could decide to stop eating sooner, consuming less calories.
- ▶ Another guest called **Sensory-Specific Satiety** is joining **Hunger** and wants to satisfy your senses but doesn’t care about whether Hunger is still present. So you may keep eating or eat additional foods if available.

Healthy Eating (Continued)

- ▶ Preparation and planning can help here, having decided on two or three vegetables instead of several high carb food items can make a difference in your calorie intake, your level of comfort after the meal, and feelings of being well on the way to accomplishing your goal.



VERSUS

- ▶ High Carb, High fat leads to full, bloated, tired feeling



shutterstock · 105945179

Including more vegetables than high fat meats and carbohydrates leaves one feeling energetic and comfortable after a meal.

4. Mindful Eating: cont.

Letting Go of Complicated Rules and Restrictions

- ▶ Imagine hunger as the sound that grows more faint with each bite you take.
 - ▶ You may notice that physical hunger ends sooner than psychological hunger. Slowing down and taking smaller bites can help you become more aware if the desire to keep eating is driven by physical or psychological hunger.
- **End of Meal Phase** – Finding a comfortable level of fullness. Think of fullness as a guest you want to make comfortable- not uncomfortable. It is a reflective time to think “Are you comfortable now?” Would another bite make you more comfortable?
 - **Clean up phase** -This is much like the non-eating phase however food is around and there are a lot of environmental cues to eat if you are not focused on your current experience of contentment and additional eating which can make you uncomfortable opening the door to guilt and frustration.



West Central Georgia Regional Hospital & Department of Behavioral Health and Developmental Disabilities



Values: Dedication, Integrity, Excellence, Knowledge Accountability, Collaboration, Safety, Innovation, Respect

Mission Statement: Commitment to safe, person-centered, and dignified therapeutic interventions that will guide and encourage individuals during their recovery.

Vision Statement: To be a leader in the innovative and holistic treatment of each individual served for a life of recovery and independence.

Goals:

- To provide a safe environment for our individuals and staff.
- To provide active recovery-oriented treatment
- To provide a successful discharge for all individuals
- To maintain or improve the quality of care and services while using fiscal responsibility to maintain a strong financial foundation.

Regional Reflections is published monthly. The mission of the newsletter is to provide a forum to educate and inform its readership on issues in behavioral health, strengthen teamwork, and archive hospital events and activities.

Regional Reflections staff welcomes items including articles, article ideas, news items, letters and photos submitted for publication. However, all items are subject to editorial discretion and will be printed on a "space available" basis. Please contact the editor if you have any questions or concerns regarding the newsletter. Thank you for your support.



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Sara Moran, Editor
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WCGRH is an equal Opportunity employer



WCGRH Foundation, Inc. is a tax-exempt, non-profit organization established in 1993 under Internal Revenue Code 501(c)(3), 509(a), and 170(b)(1)(A)(vi) by individuals interesting in enhancing the services and programs provided for the clients and staff of WCGRH.

Your tax deductible gift supports the Hospital's mission as stated above.
 Website: <http://dbhdd.georgia.gov/wcgrh-foundation>



Accredited by the Joint Commission

Fraud Abuse Hotline: To report concerns regarding fraud and/or abuse, call the WCGRH Compliance Hotline at (706) 569-3082 or the Office of Inspector General Corporate Compliance Hotline at 1-800-447-8477. You may e-mail questions or concerns to WCGRH Compliance Office@dbhdd.ga.gov or call The WCGRH Compliance Officer, Felicia Hardaway at (706) 568-2471



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