



**Special points of interest:**

- **Department Spotlight**
- Infection Control
- Suggestion Box Responses
- Out & About
- What's in a Month
- ECRH Jobs List

*"Time is a versatile performer. It flies, marches on, heals all wounds, runs out, and will tell."*

*Franklin P. Jones*

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**From the Desk of the RHA - Paul Brock**



**Excessive Heat Poses Increased Risks for ECRH**

*Throughout most of this summer, the high temperatures and heat indexes exceeding 100+ have required ECRH to cancel outside activities due to increased risk of heat related illnesses. Exposure to excessive heat is dangerous for all of us and can lead to heatstroke which is considered a medical emergency. Heatstroke occurs when the body's temperature regulating system breaks down and the body is unable to cool itself. Internal body temperatures can rise to levels that may cause irreversible brain damage and death.*

*However, individuals we serve with behavioral health conditions, taking psychotropic medications and/or other certain medications, are at greater risk for heatstroke and heat related illnesses. These medications and substances can interfere with the body's ability to regulate heat and one's awareness that their body temperature is rising.*

*Nearly all psychiatric medications increase the body's sensitivity to the heat or sun. Photosensitivity is the result of drugs combining with proteins in the skin to form substances which react with direct light. Being in the sun for as little as 30 to 60 minutes can cause a variety of allergic skin rashes. Other signs of sensitivity are severe sunburn, nausea and vomiting, flushed or pale skin, and confusion and fainting.*

*Antipsychotics (Neuroleptics), Antidepressants, and Anti-parkinsonians inhibit the body's ability to sweat. Antipsychotics also make the skin more susceptible to sunburn. Lithium causes excessive loss of fluids and can cause the lithium level in your blood to become too high.*

*On these blistering days of summer, it's imperative for those we serve to ensure that they are well hydrated, have access to cooler areas, and to routinely monitor their temperature levels especially for those who may be taking antipsychotics or other medications. Since we have had to frequently implement our Emergency Operations Heat Plan due to heat indexes, it's crucial that each of you take effective methods to prevent heat exhaustion, including drinking plenty of fluids, replacing salt and minerals that may be removed from heavy sweating and staying cool indoors with air-conditioning while monitoring those at high risk.*

*We truly admire your dedication and patience during these scorching days, but it's key that we keep our individuals and ourselves safe throughout the summer through effective prevention and recognition of heat related illnesses. Thank you.*

*Sincerely,  
 Paul Brock*

## New Employees



**Front Row(L-R):** Kadijah Brooks, Program Assistant; Renee Bush, CNA; Nukia Ellzey, HST; Virginia Henson, RN

**Back Row(L-R):** LaCrystal Foster, CNA; Kortrell Clark, HST; ReKandria Davis, CNA; Angel Owens, CNA

**Front Row(L-R):** Chineqwa Small, HST; Estelle Smith, CNA; Lakeya Turner, HST; Tristin Whigham, HST

**Back Row(L-R):** Briana Williams, HST; Justice Williamson, HST; Tim Stock, HST; Sabrina St. Charles, HST



**Front Row(L-R):** Jasmine Griffith, LPN; Shaniqua Green, Clerical Worker; Aaron Gilman, HST; Tara Palmer, RN

**Back Row(L-R):** Vernisha Phillips, CNA; Hawatha Robinson, Program Assistant 2; Sadaisha Shannon, HST; Tamesha Singletary, HST



**(L-R):** Carolyn Herring, HST; Dana Morgan, Recruiter; Maquita Anderson, HR Assistant



# WELCOME!

**HR Partners**

HR is currently conducting FLSA & Holiday audits. The audits are necessary due to a technical issue. We will contact the Leave Keeper/Manager when an audit has been completed with accurate FLSA and Holiday balances. We ask for your patience and understanding during this time. Holidays earned that have passed the 120-day mark will be paid to the employee once an audit has been completed.



**Forms Update**

Form Number	Title of Form	Comment
ADM051	Transportation Service Sheet (Rev. 7/16)	
CLN444	Medications/Treatments Record (Rev. 7/16)	
DD389	Void Record (Rev. 6/16)	

**Please destroy all blank forms on hand when form is revised or becomes obsolete.**

**PLEASE destroy all blank forms with GSSH or old GRHA MH numbers on them!!!**

**Department Spotlight - Risk and Incident Management**

**\*\*\*The ECRH Department Spotlight \*\*\***

**\*A Communication and Hospital Awareness Performance Improvement Initiative\***

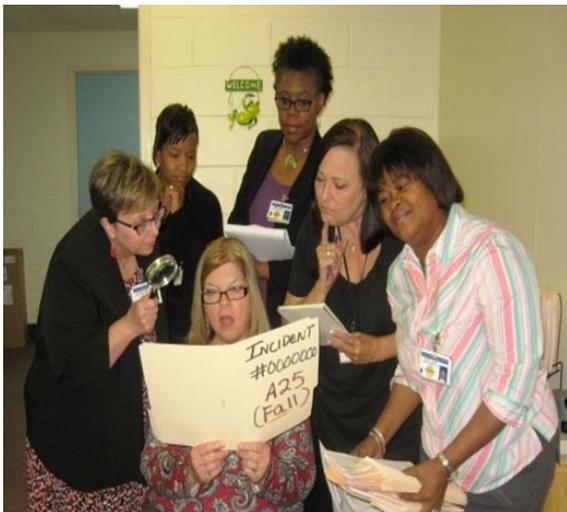
<b>Department Name:</b>	Risk and Incident Management
<b>Department Location:</b>	Building 22, Gracewood Campus
<b>Department Phone #:</b>	706-790-2100
<b>Department Staff Names:</b>	Lynn Burke-Reyes Teresa Crouch Wendy Echols Sarah Fegan Debbie Haynes Diana Jackson

***What is the function of your department?***

The Risk Management and Incident Management departments work together to protect the safety of individuals and employees at ECRH.

The Clinical Risk Management process is designed to help prevent incidents of illness or injury to individuals we serve. This process begins at admission, when factors that place that individual at high risk of illness or injury are identified and communicated via the Clinical High Risk Profile. This list is updated at regular intervals, and whenever new risk factors are identified. When risks are identified, treatment teams put protections and guidelines in place to reduce the likelihood that an incident will happen.

The ECRH Incident Management system identifies, classifies, documents, reports, tracks and trends incidents that may have an adverse effect on the safety, care, treatment and rehabilitation of individuals served by the hospital. There is an average of 278 incidents per month at ECRH. The system includes taking immediate steps to ensure the health and safety of individuals, initiating an investigation, tracking corrective action plans, and a multi-level review process, in order to ensure corrective actions are appropriate and effective to prevent recurrence.



**#OopsNowWhat**  
**#ReportAbuse**  
**#UhOhCallIMO**

***What is a success story of your department?***

**During the most recent surveys by CMS and The Joint Commission, there were no negative findings regarding Incident and Risk Management.**

## Department Spotlight - Risk and Incident Management

### *Describe a typical day within your department.....*

The day starts with a review of each incident from the previous day by the Executive Leadership Group. Their primary concern is to determine if there is any indication that an individual was abused, neglected, or exploited during an incident. If so, the incident is referred for outside investigation by the DBHDD Office of Incident Management and Investigations (OIMI), based in Atlanta, and reported to other state agencies, such as Adult Protective Services and GBI. The leadership group also makes recommendations for care and treatment of individuals after an incident.

The Incident Management Analysts enter the information from all the Critical Incident Reports (CIR) received via email into the Risk Incident Management System (RIMS), a standardized database defined and maintained by OIMI. RIMS is used state-wide by DBHDD to document and classify all incidents, provide information on categories of incidents, document review findings and transmit documentation of all critical incidents to OIMI.



There is an additional document, called the Standard Investigative Report (SIR), which needs to be completed and entered into RIMS for incidents on Gracewood. This document triggers an internal investigation of the incident by the individual's treatment team. First, Second and Third Level Reviews are completed for the Augusta Campus incidents.

Once all the incidents are entered into RIMS, the database is used to generate reports that allow ECRH to track trends and identify any systemic issues. These reports are used by various hospital departments, particularly Quality Management and Performance Improvement, to identify problems and measure our progress on goals.

In addition, each incident is reviewed by several staff members to determine the probable cause of the incident and make recommendations about how to avoid it from happening again. On the Augusta campus, the Nurse Manager or her designee, the Recovery Team Facilitator, and the Director of Risk Management all review CIRs in RIMS. On the Gracewood campus, the QIDP and the Interdisciplinary Team (IDT), the Director of Risk Management and a representative for the Executive Leadership team review each SIR in RIMS.

In summary, the typical day in Incident Management includes meetings, obtaining additional details regarding incidents, notifying the authorities when necessary, entering information into the database, and organizing and filing mounds of information into thousands of files.

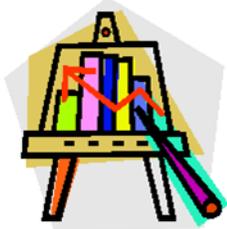
### *What is a unique story about your department?*



Incident Management has thousands of folders on file!!! A manila folder is created for each incident and any documentation related to the incident is filed in the folder. The folders are currently used to provide immediate access to information about incidents for surveyors and auditors. Eventually Incident Management hopes to store most records electronically. Information in the folders include photographs taken by Security, witness statements from staff, minutes of meetings held to discuss each incident, and documents showing what ECRH did to help prevent the incident from happening again. Although the folders for the Gracewood campus are more complete, folders are also kept for incidents that require investigations on the Augusta campus.

**Keep up the great work, Risk and Incident Management!!! You are appreciated!**

## Quality Corner



### NEWS & INFORMATION FROM THE QUALITY MANAGEMENT DEPARTMENT

\*\*Presented by the Falls Prevention Performance Improvement Team\*\*



***Terry Turtle* cares about Fall Prevention... and wants *YOU* to C.A.R.E. too!**

Congratulations to Redbud E-Wing for a 16% decrease and Adult Mental Health (AMH) for a 14% decrease in their falls from May 2016 to June 2016! Keep up the great work!

**C-** Create a safe environment!

**A-** Assess the individuals' risk!

**R-** Reduce the individual's risk!

**E-** Evaluate interventions!



## Pharmacy Notes



### "Pharmacy for Nurses" Class:

ALL nurses are encouraged to attend the  
"Pharmacy for Nurses" class:

Gracewood Campus - Building 103B:

during New Employee Nursing Orientation

August 2, 2016

August 16, 2016

August 31, 2016

1:30pm – 2:30pm

Please contact Casandra Roberts or Adeola Oke  
in the Pharmacy for more information (ext. 2496)



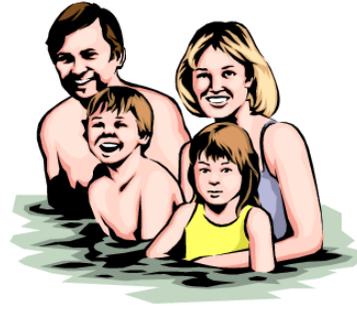
Infection Control - Wash Your Hands

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## Safety Shop

# Swimming Safety Tips



1. Learn to swim well. Learn to tread or float in water over your head for at least 3 minutes.
2. Never swim alone! Take a buddy with you. Keep an eye on them and make sure they keep an eye on you while swimming.
3. The best places to swim are in designated swimming areas.
4. Do not dive into unknown waters or shallow water. Before you dive into any water make sure you know how deep the water is.
5. Know your limits and swimming capabilities.
6. Never pretend to be drowning.
7. Life jackets should be worn while on or around the water.
8. Before you go swimming make sure the area is safe, with a sand or gravel bottom and a gradual slope with no drop-offs.
9. Never venture into deep water on inflatable devices. Don't let these devices be a substitute for swimming ability or life jacket.
10. Be nice to the other people that are swimming with and around you.
11. If there is an electrical storm or lightning in the area stay out of the water.
12. Barefoot on the beach is fun, but watch out for rocks and other objects that might cause painful cuts and bruises.
13. If someone in the water is in trouble you can try and help them by reaching, throwing, or rowing something to them, but never go in the water and try and save them unless you are trained in water saving techniques. Know how to get help if it is needed.

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**HELP ME HELP YOU make ECRH a safe place for our individuals, visitors, and staff. For safety related issues, contact Kenneth Hillman at 790-2400.**

## Suggestion Box Responses

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**Suggestion:** New employee orientation tours – A few years back new employees were loaded on a bus and shown every part of the hospital including the Central Kitchen, laundry, etc... New employees will know the location of popular areas on the grounds. They will not have to waste precious moments of their lunch break asking for directions. It will also help them to know other area locations in case of emergency.

**Response:** This sounds like a very positive thing from the past. However, new employee orientation (NEO) has been changed over the years to cover all the most important aspects as expected by DBHDD. All of the content of NEO has been provided by DBHDD in Atlanta. Because there is so much to cover in NEO there is simply no time in the agenda to do the bus tours any longer. Each department should be assigning a new employee a "buddy" during the first few weeks or longer of a new employee arriving to the unit / living area. Managers should ensure when a new employee arrives to their unit/living area/department they will have a comprehensive orientation to their work environment. This may include the "buddy" touring the new employee to the important locations on their respective campuses.

Response from:

Carletta Johnson, Training Program Administrator

and

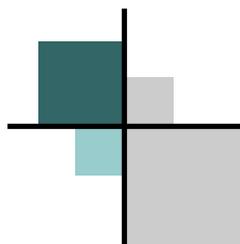
Doug Fine, HR Manager

**Suggestion:** Everybody deserves an opportunity! But hiring teams should try to choose older members. Young people today are sometimes uncaring when it comes to work. Try choosing older members. They can be a little more caring for work.

**Response:** It actually would be unlawful if ECRH sought to hire "older members." Doing this would violate the Civil Rights Act of 1964 and the Age Discrimination in Employment Act. Managers and hiring teams have the duty to hire qualified people that have the knowledge, skills, abilities and attitudes that will make them successful employees. If we hire the most qualified we should have a very diverse mix of women and men, older and younger, of all nationalities and races, etc.

Response from:

Doug Fine, HR Manager



## Language Line Services

ECRH's Language Access Coordinator is Cindy White. The LAC ensures that both language and sensory impairment needs of the consumers and families of East Central Regional Hospital are addressed. Did you know that Spanish is the second most spoken language in the United States? East Central Regional Hospital has two certified staff that speak Spanish. The hospital contracts with Latin American Translators Network, Inc. (LATN) for interpreting services for both language and sensory impairment needs.

If you have a consumer or family that needs interpreting services please notify the Language Access Coordinator, Cindy White, at 706-792-7006 for assistance. After hours, contact the Admitting/Receiving staff at 706-792-7006 so that arrangements can be made for interpreting. You can also e-mail Cindy White at [Cynthia.White@dbhdd.ga.gov](mailto:Cynthia.White@dbhdd.ga.gov).

The Notice of Free Interpretation Services should be posted in all public and consumer areas. Language Line services may be used in emergency cases or when you have an immediate need for interpreting. To access the language line, follow the instructions below:

### **When receiving a call:**

1. Tell the Limited English speaker to please hold.
2. Press the "Tap" button on the phone.
3. Dial 9-1- (866) 874-3972.
4. Enter on the telephone keypad or provide to the representative the 6 digit Client ID below:
  - \* 6-digit Client ID: **5 1 3 3 0 8**
  - \* Press 1 for Spanish
  - \* Press 2 for all other Languages (Speak the name of the language at the prompt) an interpreter will be connected to the call.

*You may press 0 or stay on the line for assistance.*

5. Brief the Interpreter. Summarize what you wish to accomplish and give any special instructions.
6. Press "Tap" button to connect the Limited English speaker.

**When placing a call to a Limited English speaker, begin at Step 2 above.**

### **When a Limited English speaking person is present in the workplace:**

1. Use the Gold Language Identification Card showing the geographical region where you believe the limited speaker may come from. The message underneath each language says: "Point to your language. An Interpreter will be called. The interpreter is provided at no cost to you."
2. Refer to the Quick Reference Guide to access an interpreter through Language Line Services.
3. If unable to identify the language, the representative will help you.

For more information you may visit the Language Line Services website at [www.language.com](http://www.language.com).

# School Starts August 2nd



# Drive Safely

## Occupational Health - Eye Injury



It's common for a speck of dirt to get blown into your eye, for soap to wash into your eye, or for you to accidentally bump your eye. For these types of minor eye injuries, home treatment is usually all that is needed. Some sports and recreational activities increase the risk of eye injuries. Very high-risk sports include boxing, wrestling, and martial arts. High-risk sports include baseball, football, tennis, fencing, and squash. Low-risk sports include swimming and gymnastics (no body contact or use of a ball, bat, or racquet).

Direct blows to the eye can damage the skin and other tissues around the eye, the eyeball, or the bones of the eye socket. Blows to the eye often cause bruising around the eye (black eye) or cuts to the eyelid. If a blow to the eye or a cut to the eyelid occurred during an accident, be sure to check for injuries to the eyeball itself and for other injuries, especially to the head or face. Concern about an eye injury may cause you to miss other injuries that need attention.

Burns to the eye may be caused by chemicals, fumes, hot air or steam, sunlight, tanning lamps, electric hair curlers or dryers, or welding equipment. Bursts of flames or flash fires from stoves or explosives can also burn the face and eyes. Chemical burns can occur if a solid chemical, liquid chemical, or chemical fumes get into the eye. Many substances will not cause damage if they are flushed out of the eye quickly. Acids (such as bleach or battery acid) and alkali substances (such as oven cleansers or fertilizers) can damage the eye. It may take 24 hours after the burn to determine the seriousness of an eye burn. Chemical fumes and vapors can also irritate the eyes. Flash burns to the cornea can occur from a source of radiation like the sun or lights. Bright sunlight (especially when the sun is reflecting off snow or water) can burn your eyes if you don't wear sunglasses that filter out ultraviolet (UV) light. Eyes that are not protected by a mask can be burned by exposure to the high-intensity light of a welder's equipment (torch or arc). The eyes also may be injured by other bright lights, such as from tanning booths or sunlamps.

A foreign object in the eye, such as dirt, an eyelash, a contact lens, or makeup, can cause eye symptoms. Objects may scratch the surface of the eye (cornea) or become stuck on the eye. If the cornea is scratched, it can be hard to tell whether the object has been removed, because a scratched cornea may feel painful and as though something is still in the eye. Most corneal scratches are minor and heal on their own in 1 or 2 days. Small or sharp objects traveling at high speeds can cause serious injury to many parts of the eyeball. Objects flying from a lawn mower, grinding wheel, or any tool may strike the eye and possibly puncture the eyeball. Injury may cause bleeding between the iris and cornea (hyphema), a change in the size or shape of the pupil, or damage to the structures inside the eyeball. These objects may be deep in the eye and may require medical treatment. In the case of a car air bag inflating, all three types of eye injuries can occur. The force of impact can cause a blow to the eye, foreign objects may enter the eye, and chemicals in the air bag can burn the eye.

Eye injuries can be prevented by using protective eyewear. Wear safety glasses, goggles, or face shields when working with power tools or chemicals or when doing any activity that might cause an object or substance to get into your eyes. Some professions, such as health care and construction, may require workers to use protective eyewear to reduce the risk of foreign objects or substances or body fluids getting in the eyes.

After an eye injury, you need to watch for vision changes and symptoms of an infection. Most minor eye injuries can be treated at home.

Call your doctor or seek immediate medical care if: You have new or worse eye pain, your vision gets worse, your eyes have new or worse sensitivity to light, you have symptoms of an eye infection (pus or thick discharge coming from the eye), redness or swelling around the eye, and/or fever.

Watch closely for changes in your health, and be sure to contact your doctor if your eyes are not getting better or they get worse.

## Training at a Glance - August

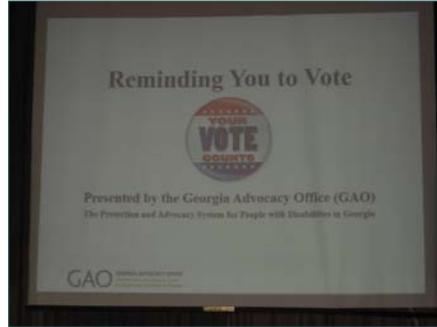
Class	Date	Time	Place
NEO Principles of Recovery	8/1/2016	10:00 a.m.-11:00 a.m.	BLDG 103-D E&R
Updated Seizure Management	8/1/2016	8:00 a.m.-9:30 a.m. 10:00 a.m.-11:30 a.m.	BLDG 99F
CPRC	8/1/2016	12:30 p.m.-4:30 p.m.	BLDG 103-C ROOM C-23
Updated Safety Care Level #2	8/1/2016 8/2/2016	8:00 a.m.-4:30 p.m. 8:00 a.m.-11:00 a.m.	BLDG 99L
NEO Infection Control and Prevention+ Handwashing	8/2/2016	9:00 a.m.-10:30 a.m.	BLDG 103-D E&R
Ostomy DD Training	8/2/2016	8:00 a.m.-12:00 p.m.	BLDG 103-C Lab
Updated PNS End User	8/2/2016	1:00 p.m.-2:00 p.m. 2:00 p.m.-3:00 p.m. 3:00 p.m.-4:00 p.m.	BLDG 103-C Lab
DD-Incident Management Annual	8/2/2016	8:00 a.m.-10:00 a.m. 10:00 a.m.-12:00 p.m.	BLDG 103-C ROOM C-23
EMR Nursing	8/2/2016	8:00 a.m.-1:30 p.m.	BLDG 103-C Room C-18
NEO Safety Care Level #1	8/3/2016	8:00 a.m.-12:00 p.m.	BLDG 99F
NEO Safety Care Level #2	8/3/2016 8/4/2016	8:00 a.m.-4:30 p.m. 8:00 a.m.-4:30 p.m.	BLDG 99L
First Aid	8/3/2016	8:00 a.m.-12:00 p.m.	BLDG 103-C ROOM C-23
CPRA	8/3/2016	1:00 p.m.-4:30 p.m.	BLDG 103-C ROOM C-23
Updated PNS Professional	8/3/2016	8:00 a.m.-10:00 a.m. 10:00 a.m.-12:00 p.m.	BLDG 103-C Lab
MH-Incident Management Annual	8/3/2016	8:00 a.m.-9:30 a.m. 10:00 a.m.-11:30 a.m.	BLDG 103-D E&R
Infection Control and Prevention+ Handwashing	8/3/2016	1:00 p.m.-2:30 p.m. 3:00 p.m.-4:30 p.m.	BLDG 103-D E&R
CPRA	8/4/2016	8:00 a.m.-11:30 a.m.	BLDG 103-C ROOM C-23
First Aid	8/4/2016	12:30 p.m.-4:30 p.m.	BLDG 103-C ROOM C-23
Updated PNS End User	8/4/2016	8:00 a.m.-9:00 a.m. 9:00 a.m.-10:00 a.m. 10:00 a.m.-11:00 a.m. 11:00 a.m.-12:00 p.m.	BLDG 103-D E&R
Drivers Improvement (Defensive Driving)	8/5/2016	8:00 a.m.-2:30 p.m.	BLDG 103-D E&R
Updated PNS Professional	8/5/2016	9:00 a.m.-11:00 a.m.	BLDG 103-C Lab
Updated Safety Care Level #1	8/5/2016	8:00 a.m.-11:30 a.m.	BLDG 99F
NEO PBS Training	8/5/2016	8:00 a.m.-12:00 p.m.	BLDG 99L
NEO CPRA	8/8/2016	8:00 a.m.-11:30 a.m.	BLDG 103-C Room C-23
NEO CPRC	8/8/2016	8:00 a.m.-12:00 p.m.	BLDG 103-C Lab

## Training at a Glance - August

Class	Date	Time	Place
NEO First Aid	8/8/2016	12:30 p.m.-4:30 p.m.	BLDG 103-C Room C-23
Updated PNS End User	8/8/2016	8:00 a.m.-9:00 a.m. 9:00 a.m.-10:00 a.m. 10:00 a.m.-11:00 a.m.	BLDG 103-D E&R
Updated Seizure Management	8/8/2016	1:00 p.m.-2:30 p.m. 3:00 p.m.-4:30 p.m.	BLDG 103-D E&R
Updated Safety Care Level #2	8/8/2016 8/9/2016	8:00 a.m.-4:30 p.m. 8:00 a.m.-11:00 a.m.	BLDG 99L
NEO Medical Emergency Response System	8/9/2016	8:00 a.m.-12:00 p.m.	BLDG 103-C Room C-23
NEO Seizure Management	8/9/2016	12:30 p.m.-2:30 p.m.	BLDG 103-D E&R
Updated PNS Professional	8/9/2016	1:00 p.m.-3:00 p.m. 3:00 p.m.-5:00 p.m.	BLDG 103-C Lab
CPRC	8/9/2016	8:00 a.m.-12:00 p.m.	BLDG 103-C Lab
Updated Safety Care Level #2	8/9/2016 8/10/2016	1:30 p.m.-4:30 p.m. 8:00 a.m.-4:30 p.m.	BLDG 99L
NEO Observation of Individual to Ensure Safety	8/10/2016	8:00 a.m.-10:30 a.m.	BLDG 103-D E&R
NEO Seclusion and Restraint	8/10/2016	1:30 p.m.-4:30 p.m.	BLDG 103-D E&R
Infection Control and Prevention+ Handwashing	8/10/2016	8:00 a.m.-9:30 a.m. 10:00 a.m.-11:30 a.m.	BLDG 103-C Room C-23
MH-Incident Management Annual	8/10/2016	1:00 p.m.-2:30 p.m. 3:00 p.m.-4:30 p.m.	BLDG 103-C Room C-23
NEO Therapeutic Incentive Program	8/11/2016	8:30 a.m.-10:00 a.m.	BLDG 103-D E&R
CPRA	8/11/2016	8:00 a.m.-11:30 a.m.	BLDG 103-C ROOM C-23
First Aid	8/11/2016	12:30 p.m.-4:30 p.m.	BLDG 103-C ROOM C-23
Updated Safety Care Level #1	8/11/2016	8:00 a.m.-11:30 a.m.	BLDG 99F
Safety Care Level #2	8/11/2016 8/12/2016	8:00 a.m.-4:30 p.m. 8:00 a.m.-4:30 p.m.	BLDG 99L
NEO PNS End User	8/12/2016	12:30 p.m.-4:30 p.m.	BLDG 103-D E&R
NEO PNS Professional	8/12/2016	8:00 a.m.-12:00 p.m.	BLDG 103-C Lab
DD-Incident Management Annual	8/12/2016	8:00 a.m.-10:00 a.m. 10:00 a.m.-12:00 p.m.	BLDG 99F
Updated Safety Care Level #2 (weekend)	8/13/2016 8/14/2016	8:00 a.m.-4:30 p.m. 8:00 a.m.-11:00 a.m.	BLDG 99L
Drivers Improvement (Defensive Driving)	8/15/2016	8:00 a.m.-2:30 p.m.	BLDG 103-D E&R
Updated Seizure Management	8/15/2016	1:00 p.m.-2:30 p.m. 3:00 p.m.-4:30 p.m.	BLDG 103-C Room C-23
Updated Safety Care Level #2	8/15/2016 8/16/2016	8:00 a.m.-4:30 p.m. 8:00 a.m.-11:00 a.m.	BLDG 99L

Out & About

# Voter Registration



Contractors have been busy working on our steam pipes.



Daryl Rowe checks on the tomato crop



One way to cool off during this heat wave is to utilize the Augusta Campus pool.



Gracewood Rec staff recently held a Motown to the Movies show in the Auditorium.



Central kitchen is keeping us fed with some fried chicken.



Thunderstorms took down this pecan tree in front of the Archives building.

## August Birthdays

August 1	Otis L. Clemmons Robbie Mae Moore Normand Alfred Tremblay	August 11	Laquilla J. Streetman Nancy L. Haysman
August 2	Catherine Louise Bruce Carol A. Callahan Jennifer R. Clinkscale Amanda Stroud Hayes Terri Elizabeth Lawless Terri Amanda May April Niema Louise Brisbon Julie A. Prescott	August 12	Rosa L. Lee Vanesia S. Parker
August 3	Carlos L. Cruz Virginia M. Henson Rosella Sales Shereka S. Singleton	August 13	Charlie C. Desamito Melissa L. Nunnally Kimberly Dawn Willingham
August 4	Anna J. Ebenroth Demerital McNeil	August 14	Shaniqua C. Green Rafael Gutierrez Victoria Middleton Anthony Rodriquez Walker
August 5	Germaine L. Bolton Sean M. Eubanks	August 16	Lawrence M. Bacote Corray N. Bryant Valesha Dogan Rogers Herman Williams, Jr.
August 6	Holley Louise Hill Murphy Anita Kainth Tierrea Shermaine Watts	August 17	Cecil C. Hunter
August 7	Lynn L. Burke-Reyes Veronica N. Jordan	August 18	Patricia A. Bussey
August 8	Bobbie L. Clifford Doris L. Geter-Edwards Charles E. Turner Sheeere S. White James B. Wright Camille S. Hughes	August 19	Kendra C. Fairchild Jasmine B. Lambert Michael L. Wiley
August 9	Barbara Ann Autry Selena M. Hatcher Lukendra J. Jones Elizabeth E. Sneed	August 20	Antonio L. Brooks Tonniett V. Evans Jasneth M. James Melvin Williams
August 10	Latisha C. Mays Enthia Lirina Robinson	August 21	Christine C. Hall Wayne E. Jackson Uyunta T. Kelly Janeshia S. Wesbey
August 11	Trineequa L. Gilbert Rudolph Lewis Graham I. Pereira	August 22	Latoya N. Cooper Chaquen C. McCord
		August 23	Harold C. Green Betty Jean Merriweather
		August 24	Katherine L. Carr Heather M. Goddard Ananda Prija Pathirja
		August 25	Jacqueline Elise Garrett Sridhar Gowda Christopher D. Hawes Temai B. Thames

### More August Birthdays

August 26	Henrietta Lavern Lewis-White
August 27	Matthew Taylor Agerton Anita Suzette Dubose
August 28	Annette Jenkins T.J. Miles Kelly Christopher Morfaw Cathy Jane Pratt Crystal R. Polite
August 29	Antonia M. Branch Phylisia Jean-Baptiste J. Emmanuel K. Lagman Phyllis Ann Okafor
August 30	Monica S. Cole Regina L. Harden Lisa K. Kuglar Debra L. Reynolds Whitney Wells Street
August 31	Atterol A. Harris Catina Heggs Kristy D. Oliver Latasha Y. Roberts Tracy K. Sabb Sabrina V. Sherrod Pamela D. Williams Medalyn Catrice Brown

**HAPPY Birthdays!**



**Don't forget your PPD!**

### ECRH Incident Management Hotline Procedure

The purpose of this Hotline is to establish an alternate means of reporting incidents in a timely manner. The Hotline is to be utilized by any employee, contractor, family member, visitor and volunteer that may feel uncomfortable reporting an incident or allegation of abuse, exploitation or neglect in person. This is an **alternate** reporting system and by no means replaces the current protocol outlined in the Incident Management Policy.

Hotline Number:

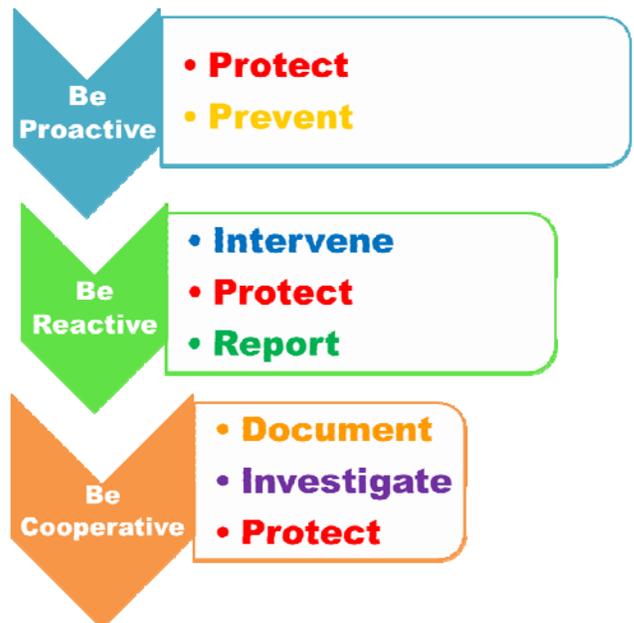
(706) 945-7150



**PRIDE IN PLACE - It Starts with Me**

"If you change the way you look at things, the things you look at change." - Wayne Dyer

### Our Role in Protecting Our Individuals from Harm



## What's in a Month?

### August is...

National Golf Month  
 Back to School Month  
 Admit You're Happy Month  
 Family Fun Month  
 National Catfish Month

National Eye Exam Month  
 Peach Month  
 Romance Awareness Month  
 Water Quality Month  
 National Picnic Month

### And...

<p><b><u>August 1</u></b> National Raspberry Cream Pie Day</p> <p><b><u>August 2</u></b> National Ice Cream Sandwich Day</p> <p><b><u>August 3</u></b> National Watermelon Day</p> <p><b><u>August 4</u></b> US Coast Guard Day</p> <p><b><u>August 5</u></b> Sister's Day</p> <p><b><u>August 6</u></b> Work Like a Dog Day</p> <p><b><u>August 7</u></b> National Mustard Day</p> <p><b><u>August 8</u></b> Wiggle Your Toes Day</p> <p><b><u>August 9</u></b> National Lighthouse Day</p> <p><b><u>August 10</u></b> International Forgiveness Day</p> <p><b><u>August 11</u></b> Friendship Day</p> <p><b><u>August 12</u></b> Sneak Some Zucchini onto Your Neighbor's Porch Day</p> <p><b><u>August 13</u></b> Book Lover's Day</p> <p><b><u>August 14</u></b> Lazy Day</p> <p><b><u>August 15</u></b> National S'mores Day</p> <p><b><u>August 16</u></b> Presidential Joke Day</p> <p><b><u>August 17</u></b> Son and Daughter Day</p> <p><b><u>August 18</u></b> Middle Child's Day</p> <p><b><u>August 19</u></b></p>	<p>Left Handers Day</p> <p><b><u>August 20</u></b> VJ Day</p> <p><b><u>August 21</u></b> National Creamsicle Day</p> <p><b><u>August 22</u></b> Relaxation Day</p> <p><b><u>August 23</u></b> Assumption Day</p> <p><b><u>August 24</u></b> National Tell a Joke Day</p> <p><b><u>August 25</u></b> National Thriftshop Day</p> <p><b><u>August 26</u></b> Bad Poetry Day</p> <p><b><u>August 27</u></b> National Aviation Day</p> <p><b><u>August 28</u></b> National Radio Day</p> <p><b><u>August 29</u></b> Hawaii Day</p> <p><b><u>August 30</u></b> National Spumoni Day</p> <p><b><u>August 31</u></b> Senior Citizen's Day</p> <p>Be an Angel Day</p> <p>National Tooth Fairy Day</p> <p>Ride the Wind Day</p> <p>Sam Spade Day</p> <p>Vesuvius Day</p> <p>Kiss and Make Up Day</p>	<p><b><u>August 32</u></b> Women's Equality Day</p> <p><b><u>August 33</u></b> National Dog Day</p> <p><b><u>August 34</u></b> Just Because Day</p> <p><b><u>August 35</u></b> Global Forgiveness Day</p> <p><b><u>August 36</u></b> Race Your Mouse Day</p> <p><b><u>August 37</u></b> More Herbs, Less Salt Day</p> <p><b><u>August 38</u></b> Frankenstein Day</p> <p><b><u>August 39</u></b> Toasted Marshmallow Day</p> <p><b><u>August 40</u></b> National Trail Mix Day</p>
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East Central Regional



Paul Brock Regional Hospital Administrator
Matt McCue Interim Associate Regional Hospital Administrator, Gracewood
Dr. Vicky Spratlin Clinical Director
Mickie Collins Chief Operating Officer
Augusta Campus 3405 Mike Padgett Highway Augusta, Georgia 30906 Gracewood Campus 100 Myrtle Boulevard Gracewood, Georgia 30812
Harold "Skip" Earnest Editor/Photographer Kristen Burdett Publisher
<p><b>NOTICE</b></p> <p>Items for publication must be submitted in written form. The upcoming issue's deadline is August 8, 2016. All articles and notices submitted for publication in the East Central Regional Hospital Bulletin are subject to editorial discretion. Please contact the Bulletin editor if you have questions regarding editorial decisions.</p>

**Our Mission**

The mission of East Central Regional Hospital is to provide safe, competent and compassionate services to persons with mental illness and/or developmental disabilities.

**Our Vision**

The vision of our Facility is to be a center of excellence in the provision of comprehensive, responsive and compassionate care for consumers and their families.

**Our Values**

East Central Regional Hospital is caring and therefore, responsive to our consumers, their families, stakeholders and our employees through commitment to our core values:

- I**ntegrity
- C**ommunication & Collaboration
- A**ccountability
- R**ecognition through Relationships
- E**mpowerment through Excellence



Accredited  
by  
The Joint Commission

**Campus Marquees**

Deadline for submission of  
**SEPTEMBER MESSAGES**  
**August 24, 2016**

Submit information to Skip Earnest  
Gracewood Campus  
Extension 2102

**(Information must be submitted on or before the indicated date to be placed on Marquees for the following month.)**

**DBHDD Vision and Mission**

**Vision**  
Easy access to high-quality care that leads to a life of recovery and independence for the people we serve



**Mission**  
Leading an accountable and effective continuum of care to support Georgians with behavioral health challenges, and intellectual and developmental disabilities in a dynamic health care environment

**Gracewood Post Office**

**Window Hours**

M-F 10:00 am-12:30 pm

1:30 pm-4:30 pm

Sat 9:00 am-10:45 am



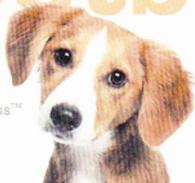
**Visit the Gracewood Post Office today and ask Frank Deas about renting a Post Office Box!**

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corn snakes	forever usa pets	mice	forever usa pets

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*Loan programs subject to change without notice.*



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# ECRH Jobs List

For further information regarding these positions, please go to the DBHDD webpage at [www.dbhddjobs.com](http://www.dbhddjobs.com).

- [Activity Therapy Leader - ECRH Camellia Unit - 69154](#)
- [Activity Therapy Leader - Treatment Mall - 199661](#)
- [Assistant Maintenance Director - Plant Operations - 68940](#)
- [Automotive Mechanic - ECRH Plant Operations - 70743](#)
- [Behavioral Health Counselor \(Forensic Treatment Team\) - 196207](#)
- [Behavioral Health Counselor - \(AMH Treatment Teams\) - 69858](#)
- [Behavioral Health Counselor - AMH Treatment Team FT Days - 196208](#)
- [Behavioral Health Counselor - Community Integration Home - 194840](#)
- [Behavioral Health Counselor 3 - MH/DD Team Leader - 69222](#)
- [Benefits and Leave Specialist - ECRH Human Resources](#)
- [Carpenter - 76890](#)
- [Client Support Worker \(Houseparent\) - 192146](#)
- [Client Support Worker - Houseparent - 181459](#)
- [Client Support Worker - Houseparent - 181467](#)
- [Clinical Dietitian - AMH Treatment Team - 70120](#)
- [CNA - ECRH SNF - FT 3rd Shift - 69639](#)
- [CNA 1 \(Certified Nursing Assistant\) - ECRH Gracewood](#)
- [CNA 2 \(Lead\) - 2nd shift - Gracewood Campus](#)
- [CNA 2 \(Lead\) - 3rd shift - Gracewood Campus](#)
- [Corporal - ECRH Hospital Security - 70799](#)
- [Dental Assistant 2 - ECRH - 68888](#)
- [Dental Worker - ECRH - 69076](#)
- [Dentist - Gracewood Campus 7:30am - 4:00pm](#)
- [Director of Clinical Information Systems](#)
- [Electrician](#)
- [Food Service Operation Worker - ECRH](#)
- [Health Service Technician - General Mental Health 2nd Shift - 200362](#)
- [Health Service Technician - General Mental Health 3rd Shift - 76569](#)
- [Health Service Technician 1 - Adult Mental Health - 1st Shift](#)
- [Health Service Technician 1 - Adult Mental Health - 2nd Shift](#)
- [Health Service Technician 1 - Forensic Inpatient 1 - 69391](#)
- [Health Service Technician 1 - General Mental Health 1st Shift - 194967](#)
- [Health Service Technician 2 - Forensic Inpatient 1 - 76522](#)
- [Health Service Technician 2 Lead - Gracewood Camellia - 69493](#)
- [Health Services Technician 1 - 1st shift - Gracewood Campus](#)
- [Health Services Technician 1 - 2nd shift - Gracewood Campus](#)
- [Health Services Technician 1 - 3rd shift - Gracewood Campus](#)
- [Health Services Technician 1 - 3rd shift - Gracewood Campus](#)
- [Health Services Technician 2 \(Lead\) - 2nd shift - Gracewood Campus](#)
- [Health Services Technician 2 \(Lead\) - 3rd shift - Gracewood Campus](#)
- [Housekeeper - ECRH](#)
- [HVAC Repair Technician - ECRH Plant Operations - 70740](#)
- [Instructor 1 - Intermediate Care Facility/MR Treatment Mall - 69061](#)
- [Laundry Worker - 69935](#)
- [LPN - Gen Mental Hlth](#)
- [LPN - Hourly - ECRH Camellia](#)
- [LPN - Infection Control - ECRH 8am-5pm](#)
- [Maintenance Worker - Plant Operations](#)
- [Maintenance Worker Part-time Hourly - Plant Operations/Groundskeeping](#)
- [Maintenance Worker Part-time Hourly - Plant Operations/Groundskeeping](#)
- [Mechanic Foreman - ECRH Plant Operations - 70748](#)
- [Nurse Manager \(Inpatient\) - Redbud Nursing - 69863](#)
- [Nurse Manager - Inpatient \(ECRH - Redbud\)](#)
- [Painter](#)
- [Park Manager \(Historic Site\) - ECRH Plant Operations - 70807](#)
- [Pharmacy Tech - Full-time Days - 69048](#)
- [Pharmacy Tech - Full-time Days - 76663](#)
- [Plumber - ECRH Plant Operations - 70755](#)
- [Program Assistant \(1st shift\) - ECRH GMH - 198535](#)
- [Program Assistant - Communications \(Switchboard\) - 68835](#)
- [Program Assistant - ECRH - Redbud - 69437](#)
- [Program Assistant - ECRH Plant Operations - 70791](#)
- [Program Associate - Augusta Campus PSR Treatment Mall - 74119](#)
- [Quality Management Specialist - 195162](#)
- [Recovery Team Facilitator \(Behav Hlth Couns\) - ECRH AMH Treatment Teams - 200900](#)
- [Registered Nurse - FT 2nd Shift - Camellia SNF - 69491](#)
- [Registered Nurse - GMH Part-time Hourly - 77005](#)
- [Registered Nurse - Part-time Hourly - 70282](#)
- [Registered Nurse - Part-time Hourly 2nd Shift - AMH -163327](#)
- [Respiratory Therapist - Camellia PT Evenings - 171112](#)
- [Respiratory Therapist Lead - Camellia - 204943](#)
- [Service Director / RN](#)
- [Shift Supervisor - ECRH Forensics - 3rd shift - 198731](#)
- [Shift Supervisor - ECRH General Mental Health - 3rd shift - 198729](#)
- [Skilled Utility Worker ECRH Plant Oper - Carpentry/Upholstery - 76913](#)
- [Social Work Auditor - ECRH Quality Mgmt - 197542](#)
- [Social Worker \(Licensed\) Wknd PRN - Mental Hlth Team/Soc Work - ECRH](#)
- [Social Worker, Licensed - 198540](#)
- [Social Worker, NonLicensed 2 - ECRH DD Services - 69508](#)
- [Steam Plant Operator](#)
- [Support Services Worker Part time 29hrs - Warehouse - 205694](#)
- [Training Coordinator 2 - ECRH HR Development - 76422](#)
- [Treatment Mall Coordinator - ECRH](#)