

HEALTH CARE 1991

New Program Helps Patients Hang On By Keeping Them Involved

Joe* was teetering precariously on the scaffolding of life, stressed and shaken by the pressures of joblessness and a family in turmoil. He was one step away from losing his dangerous balancing act and falling into a hospital bed, perhaps even a jail cell.

Instead, he found the stability of the adult psychiatric day hospital, a new component of Portland Adventist Medical Center's behavioral medicine division.

The program offers intensive psychiatric services to help people to return to or enhance their functioning at home, on the job and within the community. Patients spend their days participating in a wide range of therapeutic programs, then return home in the evening to practice their new skills.

Although many patients in the program are former inpatients seeking a transitional setting to help them ease their return to the community, one of the program's primary benefits may be keeping patients from needing hospitalization at all. Besides being significantly less costly than inpatient care, the day hospital is often a more appropriate therapeutic environment for many patients.

"The day hospital program reinforces the research that says patients make better progress when it's possible to keep them in their natural environment," says Barbara Brady, the program's coordinator.

"Normal daily functioning skills tend to atrophy if you remove people from what they might perceive as pressures--things like work and parenting--but which are actually more like invitations to normalcy," says Brady.

A normal life was all Joe ever asked for. Then, in a serious industrial accident, he fell off a ladder and watched his life tumble down around him.

At the time he connected with Portland Adventist, Joe had been out of work for a year and a half, and his family was on the verge of falling apart. He was severely depressed (a trait he shared with most patients in the program), and his explosive disorder symptoms had caused several run-ins with the police.

"He came here in a pretty bad emotional state," Brady says. "He had incredible family stress; he was tense

and hostile. He wasn't sleeping and he was drinking 14 to 15 cups of coffee a day. There's no way he ever would have agreed to hospitalization. He felt that was just too great a loss of freedom."

Joe is a typical representative of the group of patients best suited for the environment of the day hospital program, Brady says.

"Our typical patient is the person you run into in the grocery store," says Brady. "Some of our patients are suffering from a disorder that they've had for life. But most of them are dealing with something that is more acute. They may have been functioning okay for a long time, but then some situation happens--family stress, a job loss, the death of a loved one--that for the first time puts them in the position of being unable to cope."

It was a combination of those situations that brought Joe to Portland Adventist. Once accepted into the day hospital program, Joe entered into a contract with the staff and set goals for what he wanted to achieve.

"It's really important that our patients feel they have a contractual relationship with us, that this is not a place where you come to just have your day structured and to examine what happened when you were a child," Brady says. "While patients do deepen their understanding of childhood events, that isn't in itself a direct and effective way of getting you back to being a contributing, functioning member of society."

Joe's goals were to repair his family life and get back to work, and the day hospital staff set to work designing a plan for Joe. The multidisciplinary members of Joe's therapy team included a clinical social worker as clinical care coordinator (this can also be a clinical nurse specialist).

The coordinator met with Joe individually and with his family, and coordinated the services of nurses, mental health therapists, occupation therapists, psychologist, clergy and the many other professionals and resources available to him.

While medications helped control

Joe's anxiety and depression, the day hospital team began to address Joe's problems related to a learning disability that had been uncovered during an in-depth psychological assessment.

"He'd had it for probably 30 years and no one had picked it up," says Brady. "He was having some auditory and communication problems related to most of his life. But no one had found it before and said, 'You're not stupid or crazy, you have a learning disorder.'"

Joe attended the program five days a week early in his therapy. In individual and group sessions he learned coping and assertiveness skills and relaxation techniques. As his progress continued, his visits were gradually decreased.

Joe's wife and daughter actively participated in his therapy. Family involvement in therapy is strongly encouraged, Brady says.

"Besides their participation in therapy, the family becomes a sort of hospital in the home," she says. "They work as partners with our staff to observe how the patient is functioning and progressing when at home."

While therapy plans are individual-

ized, some common tenets underscore each patient's treatment. "One of them is 'No man is an island,'" Brady says. "We have no desire to work with a patient in isolation, without having contact with society. That's why the day hospital concept is so effective."

"A second tenet is 'Work is therapy.' Everyone needs a sense of worth and a feeling that he or she is productive. Much of what we do is centered on getting patients back into their work setting or involved in other productive activities."

Day hospital staff worked with Worker's Compensation personnel to assist Joe in his vocational rehabilitation. A rehabilitation counselor helped him address the psycho-social implications of being unable to work.

Joe has made significant progress toward fulfilling his goal of returning to work, and the family's relationship is well on the way to recovery. Joe may have stumbled and fallen into the day hospital program. But when he stepped out for the last time, it was onto solid ground.

* "Joe" is a pseudonym.

Women's HealthSource

A support group for women who have delivered babies by cesarean section meets monthly at Good Samaritan. This group helps women deal with the wide range of emotions following a cesarean birth. There is no fee but pre-registration is required.

The "PMS Information Night" will be held September 18, 7 p.m. at Good Samaritan Hospital & Medical Center,

1015 NW 22nd Avenue. This program will help participants identify symptoms and focus on self-help strategies. Cost for the class is \$5 and pre-registration is required.

For more information on these or other programs, or to pre-register, please call the Women's HealthSource at Good Samaritan, (503) 229-8081.

Cholesterol Screening

Cholesterol screenings will be offered by St. Vincent Hospital and Medical Center in July.

The screening will be held on Wednesday, July 31 from 8:30 to 10:00 A.M. at the Hospital's Health and Lifestyle Center, located in the Tanasbourne Medical Plaza, 1885 NW 185th Ave., Aloha.

Participants can learn their total cholesterol level, their ideal level, and ways to lower cholesterol through diet and exercise. Cost is \$7.

No appointment is necessary. For more information, contact St. Vincent Health and Lifestyle Center 645-4864.

Gentle Dental Day...Everyday

Gentle Dental has expanded their annual Gentle Dental Day program to better serve needy individuals who care about their dental health, but lack the financial means to afford dental treatments.

Gentle Dental is pleased to offer Gentle Dental Day...Everyday, a program designed to increase the capacity for delivering consistent and comprehensive care to persons with limited financial resources.

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