

Friends & Family Guidebook



Friends and Family Guidebook
Revised May 2025

Oregon State Hospital – Salem Campus

2600 Center St. NE Salem, OR 97301

Reception: 503-945-2800

Toll free: 800-544-7078

Website: www.oregon.gov/oha/OSH

Oregon State Hospital – Junction City Campus

29398 Recovery Way Junction City, OR 97448

Reception: 541-465-2554

Toll free: 877-851-7330

Website: www.oregon.gov/oha/OSH

Oregon State Hospital – Ombuds and Family Services

Main line: 503-947-8109

Note: This is a voicemail only line, we will return your call as quickly as possible.

email: OSH.OmbudsandFamilyServices@odhsoha.oregon.gov

Website: www.oshfriends.com

Follow us on Facebook:

facebook.com/oregonstatehospital

Oregon State Hospital

Mission

Our mission is to provide therapeutic, evidence based, patient centered treatment focusing on recovery and community reintegration, all in a safe environment.

Vision

We are a psychiatric hospital that inspires hope, promotes safety, and supports recovery for all.

What recovery means

OSH recognizes recovery as a process of change through which individuals improve their health and wellness, live self-directed lives, and strive to reach their full potential. Recovery is built on self-determination and access to evidence-based clinical treatment and recovery support services for all.

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Main Entrance - Junction City Campus

Welcome

Dear Family and Friends,

Having a friend or family member admitted to Oregon State Hospital can be a challenging time. It is normal to feel confused, scared, sad and even relieved.

We expect you may have questions and concerns. The hospital's Ombuds and Family Services Office is here to help. Our office will do its best to encourage and support you throughout your friend or family member's hospitalization.

At Oregon State Hospital, we welcome and encourage patients' friends and family to visit and be involved. Your relationship with and knowledge of your friend or family member is important and unique. For many patients, the active involvement and support of family and friends is an essential part of their recovery process.

We hope that this guidebook will answer many of your questions and help you become more familiar with how the hospital works. Also, be sure to visit our website, at www.oshfriends.com, for information, additional resources, news and updates about the hospital. If you don't find what you're looking for, please contact us at the email and phone numbers listed on the inside front cover.

Thank you,

OSH Ombuds and Family Services Team



West Plaza - Peter Courtney Salem Campus

OSH Ombuds and Family Services

Family services

The OSH Ombuds and Family Services Office is here to provide patient's friends and family with information about the hospital. We understand for many this can be a confusing and scary time. OSH policies and procedures can be overwhelming for families and are different than community-based services and programs such as community hospitals or jails. This guidebook has been designed to answer many of your questions, however, we encourage you to contact our office to help clarify your questions or address your concerns.

Friends and Family Day

In the spring and fall, OSH hosts a "Friends and Family Day" at the Junction City and Salem campuses. Patients and their friends and family can enjoy a meal at no cost, learn more about the hospital, meet hospital staff and participate in recreational activities.

Activities may include:

- Lunch
- Hospital tours
- Community organization information booths
- OSH department information booths
- Leadership staff meet and greets
- Patient art show
- Games and other recreational activities
- Live music

Activities during each event and location may vary. Events may be cancelled or postponed for safety reasons or if the hospital is under medical restrictions because of communicable disease.

Family orientation

We understand that having a friend or family member admitted to OSH can be confusing and overwhelming. You may be worried about your friend or family member, or you may not know what to expect or how things work at the hospital. Our Family Orientation Video might help.

This orientation addresses the common questions asked by friends and family members about OSH. Information includes:

- A "day in the life" at OSH.
- Admission types and treatment team overview.
- Visitation process.
- Family involvement.
- Communicating with a friend or family member at OSH.
- Resources for families.

You can find this video by aiming your camera phone at the QR

code to the right or at www.youtube.com/watch?v=QZRKIWTbn80.



Please see the inside front cover of this book for our contact information. Don't forget to follow us on Facebook or visit www.oshfriends.com for OSH announcements about visitation or friends and family events.

OSH Ombuds

An ombuds is a neutral intermediary between OSH and a patient's family or friends. As the ombuds for the hospital, we investigate complaints about the hospital.

Our office works across disciplines and divisions within OSH and the Oregon Health Authority. We work to get answers and identify the best possible resolutions.

An ombud's conclusions must be fair, reasonable, and firmly grounded in fact. Ombuds make recommendations to hospital leadership for corrective action, as appropriate. OSH leadership supports and values the role of the Ombuds Office and seriously considers all recommendations for improvement.

How to file a complaint:

The OSH Ombuds Office has staff on both the Salem and Junction City campuses.

To make a verbal complaint, please contact us at:

- 503-947-8109

To make a written complaint:

- Email OSH.OmbudsandFamilyServices@odhsoha.oregon.gov for an electronic complaint form
- Visit www.OSHfriends.com to access the complaint form online

Complaint forms are located:

- At Reception, upon request

Request a mailed copy by calling:

- 503-947-8109

How to submit completed forms:

- Drop off at OSH reception, in person
 - **Salem:** Reception lobby drop box labeled "Comment cards and complaint forms"
 - **Junction City:** Reception desk
- Email: OSH.OmbudsandFamilyServices@odhsoha.oregon.gov
- Mail to:
 - OSH Ombuds and Family Services
2600 Center Street NE
Salem, OR 97301

How will the ombuds handle my complaint?

Each complaint will be screened to determine if it falls within the scope of the OSH Ombuds Office. We will review issues that are within scope for follow up and possible investigation. We will not review issues that fall outside the scope of what this office can do. We will notify you of this decision.

During an investigation, ombuds must remain impartial and maintain confidentiality. We cannot share documents with you that we gather and review for the investigation.

The amount of time we need to reach a decision will vary from case to case, depending on the complexity of the complaint.

After an investigation, the ombuds will inform you of their conclusion or recommendations, and, if appropriate, any action OSH has or plans to take.

Introduction to OSH

Oregon State Hospital (OSH) provides patient-centered psychiatric treatment for adults from throughout the state who need hospital-level care. The hospital's primary goal is to help people recover from their illness and return to the community. Services include psychiatric evaluation, diagnosis, and treatment, as well as community outreach and peer support.

Oregon State Hospital operates under the direction of the Oregon Health Authority. With two campuses – one in Salem and one in Junction City – Oregon State Hospital serves more than 1,400 people per year.

Hospital-level care includes: 24-hour, on-site nursing, psychiatric and other credentialed professional staff, treatment planning, pharmacy, laboratory, food and nutritional services, vocational and educational services.

The hospital is accredited by The Joint Commission and most units are certified by the Centers for Medicare & Medicaid Services.

A culture of respect

OSH is an inclusive place. Everyone shares the responsibility for helping patients here feel safe. Patients and staff are expected to treat others with dignity, support and respect and to respect people's personal space and property.

Hospital staff also strive to meet the cultural and diversity needs of patients. Language interpreters are available to help patients communicate with others, and a broad variety of support groups are here to cater to patients' specific needs.

A few examples include groups for veterans, people who hear voices, and people who are lesbian, gay, bisexual, transgender, questioning, queer, intersex and asexual/allies (LGBTQIA).

The hospital also provides trauma-informed, gender-affirming care to transgender and gender diverse patients through its Gender Expansive Care and Organizational Support (GECOS) team. Patients can get more information about these services from their treatment team.

Hospital staff value people from all cultures, faiths, races, backgrounds, sexual orientations, gender identities, ages and abilities. Everyone plays a part in making sure patients and staff feel comfortable and protected. If, at any time, patients feel discriminated against, or if someone is not living up to the culture of respect at the hospital, they can:

- Speak with a staff member.
- Report to the Office of Training, Investigations and Safety (OTIS) at 503-689-5076 or 800-406-4287.
- Contact the Peer Advocacy Council (PAC) at 503-947-2558
- Call Ombuds and Family Services at 503-947-8109
- Submit a patient grievance using the forms available on their unit.

Introduction to OSH continued

Trauma-informed care

OSH promotes trauma-informed treatment and care. Staff recognize that bad things happen to good people, and people can overcome the challenges they face.

What is trauma?

Trauma results from an event that is observed or lived by an individual as physically or emotionally harmful or life threatening. The event has lasting, adverse effects on a person's functioning and well-being. Untreated trauma can lead to a lack of self-worth, living in fear, depression, health issues and relational issues.

What can cause trauma?

- Childhood neglect or abandonment
- Chronic stress
- Wartime combat
- Discrimination
- Poverty
- Homelessness
- Hospitalization
- Physical, emotional, or sexual abuse/assault

What does trauma look like?

- Feeling disconnected from others
- Not feeling at home in one's body
- Being unable to know what is safe and unsafe
- Being unable to imagine a better tomorrow
- Feeling bad, broken, or unlovable
- Fear of loss

What can be done?

There is hope! People can and do heal from trauma with resilience and support. While at OSH, patients can and are encouraged to work with staff who are trained to provide trauma-specific support. This might include members of their treatment team, or other staff within the hospital.

Collaborative Problem Solving

OSH uses Collaborative Problem Solving (CPS) as a treatment model. CPS is a treatment approach and system of care that's based on the belief that "people do well if they can." If someone is not doing well, CPS states it's because they lack the skills necessary to respond effectively to specific challenging situations.

Everyone experiences situations that are challenging, and we all have different skills. Through CPS, we strive to identify those situations and skills, and we work together to create a more positive outcome.

Staff will work with patients to solve problems they might be experiencing. During the process, they also help patients develop skills to better face the same type of problem in the future. They do this by:

- Involving patients in their treatment.
- Helping patients pursue their goals and learn new skills.
- Listening to patients and trying to understand their concerns.
- Asking for and using patient's solutions to address the problems they face.
- Whenever possible, staff will work with patients to come up with a solution that works for everyone involved.

Patient rights

All patients retain their rights as provided by state and federal law. There are rules and policies related to each of these rights to address safety and security concerns.

Disclaimer: The following is for informational use only and is not intended or implied to substitute for state and federal laws and regulations.

Patients have a right*:

- To recognition, respect and dignity as an individual.
- To be treated under the least restrictive and most inclusive conditions and not be subjected to unnecessary physical restraint and seclusion.
- To be free from abuse or neglect, and to report abuse without being punished.
- To a humane living environment that affords reasonable protection from harm and affords reasonable privacy.
- To impartial access to treatment, regardless of race, religion, gender, ethnicity, age or handicap.
- To be informed of the facility's rules and regulations regarding their conduct.
- To be visited by their friends, family, advocates and legal professionals – provided they are approved by both security and their treatment team.
- To send and receive mail.
- To be furnished with a reasonable supply of writing materials and stamps.
- To reasonable access to telephones.
- To participate in decisions concerning the limitation of visitors, telephone calls or other communication.
- To religious freedom.
- To daily access to fresh air and the outdoors.
- To wear their own clothing.
- To a private storage area and access to it.
- To be given reasonable compensation for all work performed, other than personal housekeeping duties.
- To participate in their plans for individualized treatment and discharge, explained in terms they can understand.
- To review their individualized treatment plans.
- To confidentiality of their medical and mental health records.
- To not receive services without informed consent, except in a medical emergency or as otherwise permitted by law.
- To receive medication only for their clinical needs.
- To be informed of benefits, possible side effects and risks of medications and treatment procedures.
- To decline medication and treatment to the extent permitted by law; and to be informed of the medical consequences of their actions.
- To develop advance directives for their care in the case of future serious medical or psychiatric illness.
- To access their medical and mental health records upon approval from the treatment team.
- To not participate in experimental medical treatment or research without voluntary informed written consent.
- To submit grievances regarding the violation of patient rights and to have those grievances reviewed in a fair, timely and impartial way.
- To exercise the rights specified in this document without any form of retaliation or punishment.

*For questions about patient rights contact OSH Ombuds and Family Services.

Commitment types

Because patients come to the hospital for different reasons, different rules apply to the length of a patient's hospital stay. A patient's treatment team will work with them to set goals and help them work to achieve them.

People are admitted to OSH under one of three commitment types. Commitment types help determine in which program a patient will live and the services they receive. They also play a part in how long people may stay here.

In some cases, a patient's treatment team (see page 19) will determine when they are ready to leave the hospital. In other cases, courts or the Psychiatric Security Review Board (PSRB) makes that decision. The PSRB is the agency in Oregon that supervises people who have been found "Guilty Except for Insanity" and people who have been civilly committed under PSRB supervision.

Forensic commitment types

People who come to OSH through a forensic commitment have been charged with criminal behavior related to their mental illness.

Aid and assist (.370):

People under the "Aid and Assist" or ".370" commitment are ordered to OSH by the courts under Oregon Law (ORS 161.370). Treatment focuses on stabilizing the symptoms of their mental illness, so they can understand the criminal charges against them and assist in their own defense. Under this commitment, patients receive "competency evaluations" to determine if they are "fit to proceed" with the legal process.

Guilty Except for Insanity (GEI):

People found "Guilty Except for Insanity" (GEI) of a crime are sent to OSH because the court decided that they need a hospital level of care, due to their mental illness. People who plead GEI are usually under the jurisdiction of the Psychiatric Security Review Board (PSRB) for the maximum time they would have been sentenced to jail if they had been convicted. The PSRB will decide how long someone will be at OSH, based on their level of safety and recovery.

Under a GEI commitment, patients may be granted a "conditional release." This means the person is released from the hospital to a facility in the community but is still under the jurisdiction of the PSRB for the entire length of time set by the court.

The PSRB determines the "conditions" the person must agree to and comply with while living in the community.

Civil commitment types

Civil commitment

As defined by ORS 426.130, people who are civilly committed to OSH require a hospital level of care in a physically secure setting that is not available through community programs. Because of a mental illness, a court determined they were a danger to themselves or others.

A civil commitment can last up to six months at a time. If, after an evaluation, a court decides that someone still meets the criteria for a civil commitment after six months, their commitment may be extended.

Commitment types continued

Civil commitment under the jurisdiction of PSRB

The Psychiatric Security Review Board (PSRB) (see GEI section on page 11) also supervises a small number of people who have been civilly committed by the court.

As defined by ORS 426.701, to commit someone under this section, the court must find, by clear and convincing evidence: (1) The person is “extremely dangerous”; (2) The person suffers from a mental disorder that is resistant to treatment; and (3) Because of the mental disorder, the person committed one of the serious crimes listed in the statute.

Voluntary admission by guardian:

If the court determines an individual lacks capacity to make decisions for themselves, it may legally appoint a responsible adult as their guardian. Guardians need to provide OSH with a copy of the court order that gives them legal guardianship status.

Guardians must work with the local community mental health provider and Oregon State Hospital’s Admissions Office. Together, they will determine if the individual’s needs can be met in the community, or if OSH level of care is needed.



Volleyball in the East Plaza.



A therapy dog on the Salem Campus.



Staff and patients play checkers at the Sjolander Empowerment Center.

Level of care

Patients admitted to OSH receive 24-hour on-site nursing and psychiatric care and access to services and treatment to help them meet their recovery goals.

While at OSH, patients reside on a unit based on the level of care they require. Most patients are housed in Salem, while some reside in Junction City. Every unit at OSH is designed to meet patients' therapeutic needs, and as they progress through their treatment, they may transition to a less restrictive level of care that offers them more choices.

No matter what unit someone resides on, the hospital's goal is to help them get well so they can leave the hospital and achieve the goals they have set for themselves. The hospital offers many treatment groups and activities to help meet a patient's needs. Staff provide encouragement and assistance to help them work towards discharge and recovery.

Hospital Level of Care (HLOC) Units

HLOC units include a blend of patients from all commitment types and provides care to closely assess their therapeutic needs. Movement from a more restrictive HLOC unit to a less restrictive unit depends upon many factors, including available space in the hospital, their regular participation in treatment, and their ability to stay safe. Please know there is no set "checklist" that will guarantee a patient's move to a less restrictive unit. These decisions are made on a case-by-case basis by their treatment team and other people familiar with their individual history and needs. There are HLOC units on both the Salem and Junction City campuses.

Secure Residential Treatment Facility (SRTF) Units

When patients progress in their treatment and no longer require a hospital level of care, they may be placed on a Secure Residential Treatment Facility (SRTF) unit. These are transition units that help patients get ready to return to the community. Hospital staff decide which patients move into or out of an SRTF unit based on criteria defined in state law (OAR 309-035-0163 and OAR 309-035-0170).

Admission Units

Upon admission, patients are assessed by staff to determine the level of care they need. Patients are placed on a unit based on these needs and on space availability. As patients progress with their treatment, or as their needs change, they may move to another unit. Transfers between units may occur when the patient and their treatment team have identified any treatment needs that may require a higher, or lower, level of care through the course of their treatment.

Psychiatric Intensive Care Units (PICU)

The PICU provides treatment to patients experiencing a severe phase of mental illness or are at high risk of engaging in aggressive behavior. Patients may be directly admitted to the PICU because they need more support and intensive resources. Other patients may be transferred to the PICU from another unit if they meet certain criteria. Patients will move from the PICU to a HLOC unit when they no longer meet PICU criteria and when a bed on a unit providing a Hospital Level of Care becomes available. All PICU units are on the Salem campus.

Daily life

OSH staff help guide your friend or family member’s recovery and help them achieve the highest level of health and safety. We ask employees and patients to keep the following principles in mind:

- All individuals, no matter how ill or how well, have hope for recovery. Hope is a promise that things can and do change.
- There are multiple pathways to recovery based on an individual’s own unique strengths, needs, preferences, experiences, and cultural backgrounds. No two people will have identical paths.
- Recovery is focused on people’s entire lives, including mind, body, spirit, and community.
- Recovery isn’t a step-by-step process, but one based on continual growth, occasional setbacks and learning from experience.
- Recovery requires that individuals take personal responsibility for their own recovery, often with help from friends, family, support networks and professionals.

During their stay at OSH, they will work with a team of trained staff who will provide them with treatment for their mental health. These staff

members will help them learn skills to manage their symptoms and medications and keep them engaged during their free time. They may also receive help with school, work, therapy, spiritual care or counseling for alcohol and drug addiction. There will be opportunities to work on their living skills throughout daily treatment mall activities, classes and if eligible, approved outings. Patients will also participate in discharge planning with their treatment team members. Patients admitted because they were unable to aid and assist in their own defense will also get help with legal skills.

A typical day for an OSH patient usually includes a combination of treatment mall groups, recreational activities, and opportunities for building skills that they will need for a successful transition to a community setting.

7:30-9 a.m.	Breakfast is served in a central dining area
9-11 a.m.	Treatment mall participation
11 a.m.-1 p.m.	Lunch and break time
1-3 p.m.	Treatment mall participation
3-5 p.m.	Relaxation, recreational and social activities
5-6 p.m.	Dinner
6-10 p.m.	Relaxation, recreational and social activities

*Actual meal and group times may vary depending on the program and unit.



The patient library in Junction City

Daily life continued

Treatment mall

The treatment mall is where people go for group-based therapy. Treatment malls are customized to offer different levels of care to meet every patient's individual needs. Patients work with their treatment team to decide which groups are the right fit. Participation in treatment mall is an important part of progressing toward discharge. Treatment malls hospital-wide are open for at least four hours per day, with structured activities available on the evenings and weekends.

Jurisdictional Treatment

Treatment tracks and the connected treatment groups for each patient are based on their jurisdiction, or commitment type (see page 11). This allows treatment to more effectively target the barriers to discharge that each commitment type may present. It also helps patients better understand what they need to do in treatment to move closer to discharge. For example, for patients admitted under the PSRB or who are civilly committed, treatment might focus on addressing safety risks that need to be addressed before discharge. Treatment for patients under .370 aid and assist orders will focus on removing the barriers that make competency restoration and return to court difficult.



Patients decorate the Forrest Quad in Junction City

Treatment options for patients under the PSRB or who are civilly committed include a variety of groups and one on one opportunities that focus on:

- Emotional and Social Regulation: Promotes skills to identify, regulate, and express emotions in a socially effective manner.
- Communication and Social Skills: Skill development for interacting and communicating with others to support effective social interactions, healthy relationships, and development of social supports.
- Addiction Recovery: Skill development to support individuals in overcoming substance and behavioral addiction and reducing the risk of relapse.
- Pro-Social and Thinking Skills: Skill development to help individuals meet their needs and goals while respecting the needs and rights of others, and maintaining positive relationships. This can include following social norms, considering the needs and feelings of others, self-regulation, problem-solving, generosity, helping others, and cooperating.
- Mental State: Supporting individuals in reality-based thinking and skills for coping with symptoms of psychosis, including delusions, hallucinations, negative symptoms, and cognitive symptoms.
- Sexual Health and Relationship Planning: Focus on reducing risk factors and increasing protective factors related to sexual and relational behavior. Goals include planning for healthy relationships, learning and maintaining consent and boundaries, managing sexual thoughts and urges, and adhering to sexual offense-specific conditions relevant to the PSRB and Sex Offender Registration.

Continued on next page

Daily life continued

Treatment mall options for people admitted under .370 Aid and Assist Orders include a variety of groups and one on one opportunities that focus on:

- Emotional and Self-Regulation: Promote skills to identify, regulate, and express emotions in a socially effective way, as they relate to attaining competency.
- Communication and Social Skills: Develop skills for interacting and communicating with others, as they relate to attaining competency. For example, working with their attorney and exhibiting appropriate court room behaviors.
- Reasoning and Legal Facts: Focus on factual and rational legal skills knowledge, understanding of legal charges and ability to apply and communicate a legal defense strategy.
- Perception of Reality: Supports reality-based thinking and skills for coping with symptoms of psychosis including delusions, hallucinations, and negative symptoms.
- Thinking Skills: Development of skills in learning ability, memory, decision making, attention, cognitive flexibility and analyzing legal defense options.

Our supportive treatment offerings address patients' overall needs and aim to engage them in meaningful options such as Art Therapy, Music Therapy, Recreation Therapy, Occupational Therapy, Vocational and Educational programs, Spiritual Care, Native Services, and, when appropriate, community transition opportunities.

Spirituality and faith

Spirituality is an important aspect of many patients' recovery. Spiritual care is provided by Clinical Chaplains who offer spiritual/religious counseling, support, and resources for clients of all faiths and for clients with no faith tradition.

Chaplains provide support for emotional and spiritual distress and help connect patients with their faith community.

Spiritual care services include:

- A range of denominational, non-denominational and spiritual ceremonies each month
- One-on-one meetings with the hospital chaplain
- Support for emotional and spiritual distress
- Connect patients with their faith community

Upon request, may provide sacred items such as:

- Bibles
- Rosaries
- Medicine Bags
- Reading materials

Native Services

OSH understands that a patient's access to culturally and linguistically appropriate services can be an important part of their treatment and recovery. The Native Services department encourages all patients who choose to, to engage in Tribal ceremonies, traditions, and practices in the manner that the patient identifies. Services and groups provided by OSH Native Services may include:

- Sweat lodge
- Smudge ceremonies
- Beading group
- Talking circle
- Individual spiritual support

Daily life continued



Patients and staff talk on the Sjolander Empowerment Center porch.

Peer Recovery Services (PRS)

Peer recovery specialists are certified, trained staff who have lived experiences with mental health and/or addiction challenges.

Peer recovery specialists help patients work toward personal recovery goals while providing assistance, encouragement, and companionship. Patient participation is self-directed and voluntary.

Peer Recovery Services include:

- One-to-one or group peer support
- Education and mentorship
- On-campus resource centers
- Patient advocacy and leadership committees including:
 - Peer Advocacy Council
 - Veterans for Progress
 - Community Peer Bridging

Sjolander Empowerment Center and The Welcome Center

Supported by Peer Recovery Services, the Sjolander Empowerment Center in Salem and the Welcome Center in Junction City were created to give patients a place to attend support group meetings and enjoy the company of their peers. Activities often include:

- Peer support and discussions
- Peer-delivered groups and support groups
- Unstructured activities such as:
 - Creating art
 - Listening to music
 - Drinking tea or hot cocoa
 - Playing games

Located across the street from the main entrance in Salem, the Sjolander Empowerment Center is open to patients who have on-grounds privileges. The Welcome Center in Junction City is located on the first-floor treatment mall and is open to all patients.

Continued on next page

Daily life continued

Recreation, leisure and fitness

Treatment Services staff offer a wide range of activities when treatment mall isn't scheduled.

Activities may include:

- Arts and crafts
- Music
- Basketball
- Fitness classes
- Movies
- Board and card games
- Outdoor time (walks, recreation, etc.)
- Off-grounds outings
- Peer Advocacy Council
- Support groups

(Depending on commitment type, privileges granted, and approval from the treatment team).

Staff also organize special events for patients. Past events included musical productions, art festivals, holiday pageants, open mic performances and Superbowl celebrations.

Education

Oregon State Hospital wants to help patients achieve their educational goals. People under a GEI or civil commitment can earn their GED, graduate from high school, take college courses, and pursue lifelong learning through the hospital's Supported Education Department. By taking offered classes, patients can learn new skills to help with future employment, meet life goals, and start on an educational path they can continue after leaving the hospital.

Staff will help patients identify the education program that matches their needs and interests. The type of school a patient attends depends on their age and commitment type.

Quest Adult School

Quest Adult School offers opportunities for 18- to 21-year-olds to continue their education while at the hospital.

Students can earn their high school diploma, complete pre-college coursework, or attend college online. Coursework is tailored to fit individual needs in such areas as basic reading, math, vocational and job skills training, social skills, and developing new leisure interests. Teachers are on site to support students through their recovery and offer a positive, safe space during their hospital stay.

Work opportunities

The OSH Vocational Services Department strives to offer a safe and supportive environment in which patients can experience meaningful employment.

With support from their treatment team, people under a GEI or civil commitment can apply and interview for positions in which they are interested. If hired, patients can use non-treatment time to learn job skills and earn wages for their work.

Patients are paid an hourly rate for most positions, which may include the following:

- Greenhouse attendant
- Janitor
- Kitchen worker
- Coffee shop barista
- Peer Advocacy Council representative
- Market sales associate
- Office assistant

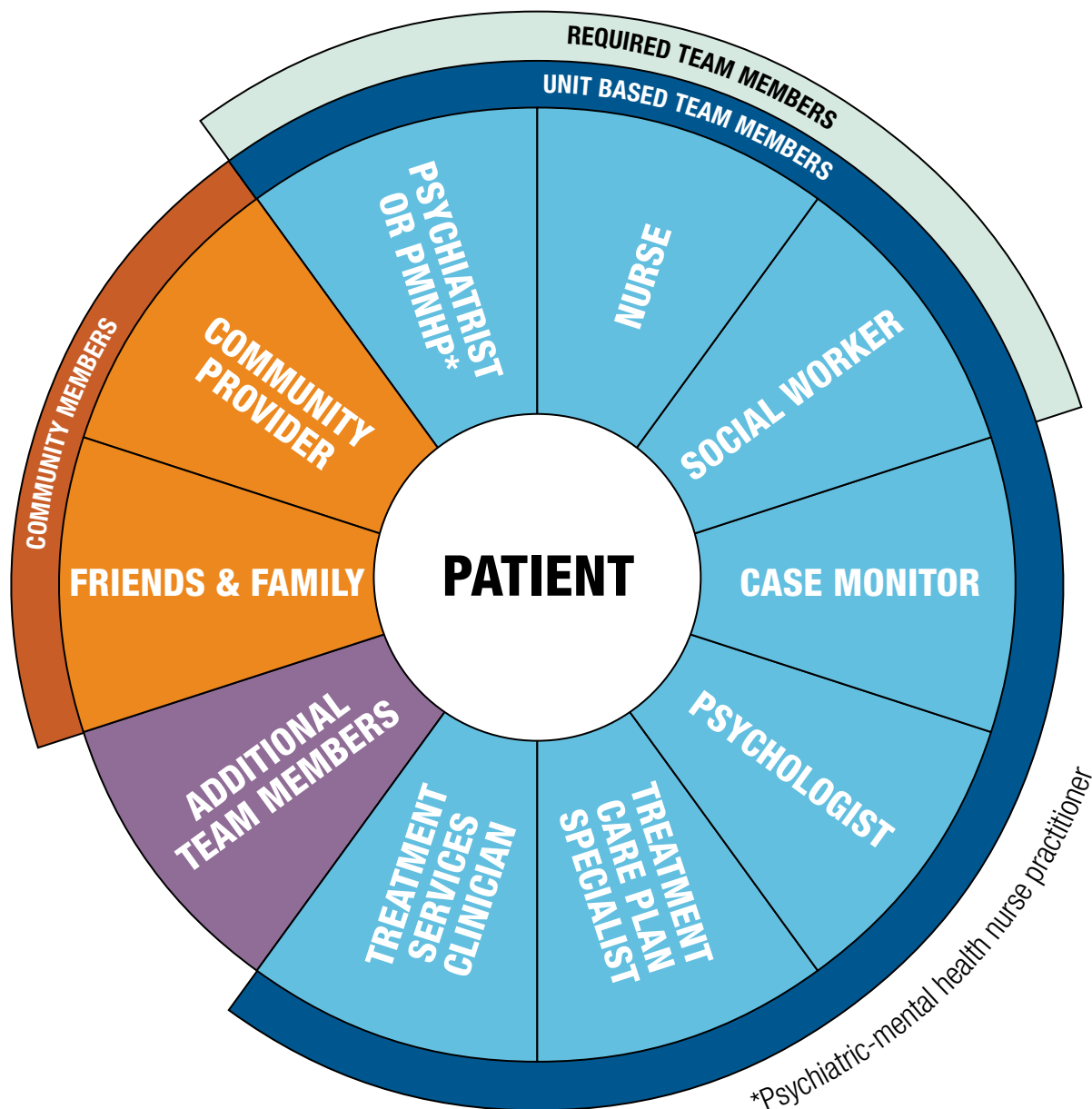
Treatment team

Every patient has a treatment team, also known as the interdisciplinary team (IDT). This team is a group of skilled professionals who work together with patients to determine what treatment, services and supports will best help the patient. The group includes the patient, OSH staff, family members (with permission from the patient) and any combination of those identified in the graphic below.

Family involvement in these meetings can benefit everyone. If you are interested in

participating, contact the staff on your family member's unit for more information. Please see Guidelines for participating in a patient's team meeting on page 21 for more information.

Throughout a patient's hospital stay, the team meets regularly to review the patient's treatment goals and progress, and to update the patient's treatment care plan. If a treatment is not working, or as the patient gets better, the treatment team will adjust the treatment care plan accordingly.



Confidentiality

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) guarantees OSH patient privacy rights related to their health information.

By law, there are two types of permissions a patient may grant by signing one or both of the following forms:

- A Disclosure of Hospitalization (DOH) form allows hospital staff to confirm someone is a patient at OSH.
- A release of Information (ROI) form allows hospital staff to share information about a patient's treatment with the specified person.

Note: The ROI may include the ability to talk with the patient's IDT (see Treatment Team page 19).

Patients can choose to withdraw this permission at any time, for any reason.



A patient from the Junction City Campus goes on a hike near Eugene as a part of a hiking group.

Friends and family involvement

Maintaining connections with family and friends can be an important part of a patient's recovery. You can show your support through visits, phone calls and mail. If patients give their permission, you are also encouraged to communicate with their treatment team. Oftentimes, family members have helpful suggestions and ideas for improving a person's care.

Guidelines for participating in a patient's treatment team meetings:

Treatment Care Plan (TCP) meetings are where the interdisciplinary team (IDT) and the patient discuss the patient's goals, treatment focus areas, and clinical barriers to discharge.

- The treating practitioner sets the TCP agenda and leads the meeting. With the patient's permission, you may be able to discuss other issues with staff at another time.
- Legal issues, such as lawsuits against OSH or open criminal cases, should not be discussed at TCP meetings.
- Except for legal guardians, friends and family can only attend a TCP meeting if the patient gives the okay. A patient may withdraw this consent at any time, for any reason.
- Except for legal guardians, a patient must sign a release of information (ROI) allowing the friend or family to receive information about the patient.
- Friends or family attending the TCP meetings may quietly support the patient. If they disrupt the meeting, they will be asked to leave and may be restricted from future meetings.
- Requests for documentation will be referred to OSH Health Information Office at osh.recordsrequest@odhsoha.oregon.gov.

For questions or concerns about this process, contact your friend or family member's social worker or OSH Ombuds and Family Services.

Sending mail

Patients have the right to send and receive mail while at OSH. Many patients look forward to receiving mail from their family and friends. If patients are unable to pay for postage and writing materials, the hospital will provide them with supplies to send up to 3 letters per week.

Patients can receive mail that is less than 16 ounces, 12 inches high, 15 long or ½ inch thick.

Please contact OSH Family Services or visit www.oshfriends.com for more information.

To send mail to a patient, please address it as follows:

Salem:

Patient name
2600 Center St. NE
Salem, OR 97301

Junction City:

Patient name
29398 Recovery Way
Junction City, OR 97448

Gifts/packages:

OSH is required to keep patients safe. One way we do this is to ensure all patient property is approved for use in our secure psychiatric environment. As a result, you may not send packages through the mail or drop them off in person or during visitation. Packages sent to OSH will be returned to the sender through the mail. This also helps ensure patients do not have more property than they are allowed.

You can help provide items for your friend or family member by putting money on their patient trust account. They can use these funds to purchase items from the OSH patient market. OSH does not make money off market purchases. See "Money/patient trust accounts" on page 22 for more information.

Friends and family involvement continued

Money/patient trust accounts

Patients may choose to open a trust account while at OSH. Depending on a patient's privilege level or treatment team approval, patients can withdraw money from their account to do things like shop in the OSH patient market, make approved purchases through the hospital's ordering system or to purchase food at the hospital's café.

Patients may not receive money directly. If you would like to deposit money into a patient's trust account, you can:

- Leave a check or money order in the patient's name at Reception
- Send a check or money order in the patient's name to:

OSH Patient Trust Dept
2600 Center St. NE
Salem, OR 97301

Once received, hospital staff will help deposit money into a patient's account. If patients do not yet have a trust account, hospital staff can help them open one.

Phone calls

There are phones on every unit that patients can use to make and receive phone calls. These phones provide access to nationwide calling at no cost. Phones may be turned off during treatment hall hours to encourage participation in treatment activities. Phones are also turned off late in the evening through early morning to provide a quiet sleeping environment.

Please ask your friend or family member for the best time to call them, based on their unit's schedule.

Please see the "Contact Information" (page 35) section of this handbook for the list of patient phone numbers on each unit.



Mountain Dining Hall on the Junction City Campus

Friends and family involvement continued

Family responsibilities

Family, for this document, means a person who plays a significant role in a patient's life. A family is a group of two or more persons united by blood or adoptive, marital, domestic partnership, or other legal ties.

Family may also be a person or persons not legally related to the patient (such as a significant other, friend, or caregiver) whom the patient personally considers to be family. A family member may be the surrogate decision-maker if authorized to make care decisions for the patient – should they lose decision-making capacity or choose to delegate decision making to another.

OSH asks that patient's family members act as a partner in the health care process by:

- Providing information, to the best of their knowledge, about a patient's present symptoms, past illness and hospitalizations, medications, and other matters related to the patient's health.
- Reporting perceived risks in the delivery of care, unexpected changes in the patient's condition, and providing feedback about care needs and expectations.
- Communicating clinical concerns or questions.
- Asking questions when family does not understand what has been communicated about care or treatment or asking about expectations regarding follow-up care or treatment.
- Expressing any concerns about the patient's ability to follow the Treatment Care Plan.
- Accepting natural outcomes if the family does not follow instructions given by health care personnel.

OSH expects family to support patients in the health care process by:

- Following rules and regulations including, but not limited to: patient care, safety, security, contraband, visitation, and conduct.
- Showing respect and consideration toward patients, health care personnel; and other visitors, including being aware of patient need when interacting, helping control noise and environmental disturbances, and respecting patient and OSH property.
- Meeting financial commitments when acting as fiduciary for patient's finances.
- Assisting in maintaining health of patients, health care personnel, and visitors by:
 - Getting recommended vaccinations (e.g., flu).
 - Arranging visits when physically well.
 - Arranging visits when emotionally calm.



A patient on the Salem campus embraces his mother.

Visitation*

*** For the most current visitation information, please visit www.oshfriends.com**

One way that patient's family and friends can show their support is through visitation. We want your visitation experience to be a positive one. To help with this, please review the information in this section. You can find the most current visitation information at www.OSHFriends.com. Please contact Ombuds and Family Services if you have questions or concerns about the visitation process.

Types of visits

Non-Contact

Due to higher safety and security requirements, visits to patients on HLOC units in Salem and Junction City will be non-contact only. This means that a clear partition will separate visitors and patients, and they will communicate through a phone. There is a limit of 1 adult visitor per patient for HLOC visits, and 1 adult and up to 4 minors during child visitation.

Contact

Patients on SRTF units (Bridges 1, 2, and 3 in Salem and Forest 1, 2, and 3 in Junction City) no longer require a hospital level of care, and safety and security risks are lower for this patient population. As a result, visits with patients residing on SRTF units will occur at a table in the hospital's café, with the patient on one side of the table and the visitor(s) on the other. Visitors and the patient may greet each other with a brief hug at the beginning and at the end of the visit. Other contact is prohibited. There is a limit of 4 adult visitors per patient for SRTF visits, and 2 adults and up to 4 minors during child visitation.

Virtual/Video

Virtual, or video, visits through Microsoft Teams are available at no cost to all patients who are interested and their approved visitors. Patients can request a video visit with staff on their unit. Staff will email the visitor a link to the virtual visitation room in advance. These visits follow the same visitation schedule as in-person visits.

Visitor Application Process

Except for legal guardians, patient's family and friends who want to visit in person or through a video visit must first submit a visitor application. This includes completing a criminal background check for adults. An application is required for each person wanting to visit. There is a separate application for minors under the age of 18. Visitor applications are available:

- In person, at Reception in both Salem and Junction City.
- By calling Reception and asking staff to mail a copy to you :
Salem: 503-945-2800 or 800-544-7078
Junction City: 541-465-2554 or 877-851-7330.
- By visiting www.oshfriends.com. There, you will also find informational videos that explain the visitation process for the Salem and Junction City campuses.

Carefully read and follow the directions included with the application. Make sure your application is legible, correct, and complete. Incomplete, incorrect, or missing information could delay the approval process.

Visitation continued

Application submission

- Choose your preferred method of submission, as identified on the visitor application form.
- The OSH Security Department will run a criminal history check and notify the patient's treatment team of any safety concerns.
- The application is forwarded to the treatment team to review.
- If the treatment team approves the application, the patient will make the final decision to approve or deny it.
- Please allow five business days (M-F) from the date OSH receives the application to complete the approval process.
- You will learn of the hospital's final decision by letter, email, or phone.
- By submitting a visitor application, you agree to follow OSH visitor guidelines (see page 27) Please note:
 - Child visitations are restricted to specific times (see schedule on page 31).
 - Staff may deny or end visitation at any time if the safety of the patient, visitor(s) or staff is at risk.
 - Patients have the right to decline a visit at any time.
- For questions about the visitation process contact OSH Ombuds and Family Services

Scheduling your in-person visit

Due to space and staffing limitations, in-person visits must be scheduled at least 24 hours in advance. Approved visitors can schedule their visit by calling OSH reception at 503-945-2800 in Salem and 541-465-2785 in Junction City. Please have a few dates and times in mind in case your first choice is not available. When you call to schedule your visit, Reception staff will ask you for the following information:

- The name of the person you want to visit
- The names of all visitors planning to attend, including any minors.
- Your phone number, in case we need to reschedule visits for any reason
- Your preferred visitation date and time, with alternatives if your preferred time is not available. See the visitation schedule for more information.
- ADA accommodation requests and/or requests to bring essential medical items or devices (ex: asthma inhalers, walkers, canes) into the visitation area.

If you need to cancel or modify your visit, call the reception numbers provided above. Modifications are dependent upon staff and space availability. Staff will notify you as soon as possible if a patient declines to visit.

Visitation continued

The Day of Your Visit

Please arrive for your visit at least 15-20 minutes before your scheduled visit to allow for screening time. You will be asked to put all personal items, hats, scarves, over coats, and excessive layers of clothing, etc. inside a locker. The screening process for all visitors includes:

- Visitors will be asked to take off their belt and shoes, which will be searched and scanned through the X-ray machine.
- Visitors will be asked to turn out their pockets.
- Visitors will then be scanned by Security with a metal detector wand.
- If the metal detector wand alerts Security of the presence of metal, the visitor may be asked to comply with a pat down search. The visitor cannot be forced to be patted down, but refusal will result in the visit being cancelled.
- If Security has a reasonable concern that the visitor is harboring contraband, they may ask the visitor to comply with a pat down. The visitor cannot be forced to be patted down, but refusal will result in the visit being cancelled.

Non-contact visitors will be escorted to the non-contact visitation area where there are visitation bays set up with a clear partition separating visitors and patients. The visitor and patient will communicate through a phone.

Contact visitors will be escorted to the contact visitation area, where they can greet the patient they are visiting with a brief embrace. Visitors will sit on one side of the table and the patient on the other. During a contact visit:

- Visitors and patients must stay at their tables and may not roam the visiting area
- Children may leave the table if they play quietly and stay near the visitor.
- Visitors may not give the patient access to any items they may have brought with them through the secure perimeter. This includes baby bottles, blankets, etc.

All patients and visitors must follow all visitation guidelines during a visit, or the visit may end early and lead to additional restrictions on the ability to visit in the future.

At the end of the visit, visitors will be escorted back to the lobby.

Scan for Salem
visitation video



Scan for Junction
City visitation video



Visitation guidelines

To promote safety and to ensure a positive visitation experience, all visitors must follow the visiting guidelines below. Violation of these guidelines, including infection prevention requirements, may result in the termination of your visit and a restriction of future visitation privileges. These guidelines apply to both in person and virtual visitors. Visit www.OSHFriends.com for more information about visitation.

Visitation

OSH has designated visitor areas for in-person and video visitation. All in-person visitors must complete a security screening before entering the visitation area. For security reasons the number of visitors may be limited.

Child visits

Children under 18 can visit with prior approval while accompanied by an approved adult visitor. In-person visits with minors follow a different schedule. Provide documentation confirming that each child visiting a patient is the visitor or patient's child or is in the visitor's legal custody or court-ordered physical custody (for example: Birth Certificate or court issued guardianship documentation).

Video visits

Only OSH approved visitors may participate in video visitation. Before each visit, staff will ask visitors to confirm their identity before continuing with the visit. If staff observe people who have not been approved, you may be asked to end your visit. Patients and visitors must follow the guidelines in this document, including those about visitor attire, guest behavior, audio or video recording and use of prohibited items.

Guest behavior

Disruptive behavior, including, but not limited to arguing, shouting, using profanity, appearing intoxicated, or using prohibited substances may lead to your visit being terminated.

Smoking and tobacco products

Smoking and tobacco products, including marijuana, cigarettes, e-cigarettes, vaping products or paraphernalia, matches, or lighters are not allowed on hospital grounds or during video visits. This includes the hospital, parking lots, and all associated OSH property.

Physical greetings

When participating in-person contact visitation, brief greeting and farewell embraces are permitted. Physical contact during the rest of your visit is not allowed.

Money and funds

Patients may not receive money directly from their visitor. You can leave money to be deposited into your friend or family member's trust account with Reception staff in the main lobby. You will be given a receipt.

Health and wellness

To support the health of all OSH patients, staff, and visitors, please refrain from in-person visitation if you are feeling unwell. We encourage all visitors to get annual vaccinations, use OSH hand hygiene stations in the lobbies, and cover coughs and sneezes. If OSH requires visitors to wear a face mask, the hospital will provide them.

Visitation guidelines continued

Necessary medical devices or medication

Disclose any medical device or equipment (e.g., pacemaker, inhaler, wheelchair, or walker) or necessary prescription medication that the visitor is bringing into the secure perimeter of the hospital and provide a description of such equipment or medication.

Visitors with proper documentation from a physician, nurse practitioner, or medical clinic regarding a medical condition or disability requiring a medical device or equipment, shall present this information to OSH staff to help inform staff of the visitor's circumstances. This documentation will not exempt the visitor from the security screening process.

Any prescription medication must be in its original container with the original label that contains the visitor's name, name of medication, prescriber, and prescription number.

Food

Patients and their visitors may not consume food or beverages during an in-person visit. This includes items from the hospital cafes, coffee shops, or markets.

Gifts and property

OSH is required to keep patients safe. One way we are doing this is to ensure all patient property is approved for use in our secure psychiatric environment. As a result, visitors may not bring items to give to their friend or family members during a visit.

Children and animals in vehicles

Children may not be left unaccompanied in vehicles on OSH property. Per Oregon Revised Statute (ORS) 167.310 to ORS 167.350, animals may not be left in parked vehicles on OSH property.

Service animals

Disclose whether the visitor is bringing a service animal to the visit and complete any OSH-required pre-approval paperwork for the animal.

Contraband and prohibited items

To provide a safe environment for patients, visitors, and staff, certain items are not allowed in the hospital. Patients and visitors may not exchange items of any kind during visitation.

Contraband includes, but is not limited to; controlled substances, drug paraphernalia, escape devices, tobacco products, weapons, and all prohibited items listed on the OSH Patient Property/Item Access List. Passing contraband is a Class C Felony, pursuant to ORS 162.135 – 162.1851.

All persons, purses, backpacks, bags, and vehicles entering OSH property are subject to search. For more information about patient property, contraband, and prohibited items visit www.OSHFriends.com.

Photographs and recording

Audio and video recording during in-person and video visitation is not permitted. With prior authorization, photographs with patients are permitted. The hospital has cameras and staff can assist with taking photos of you and your friend or family member. Please make this request when scheduling your visit.

Visitor attire

Please know that some patients may react to revealing clothing or images that promote the use of drugs, alcohol, or violence. For their well-being and safety, as well as for the security of staff and other visitors, we ask that you dress for the hospital environment. Clothing must include a dress or a shirt with either skirt, pants or shorts and shoes or sandals.

Visitation guidelines continued

The following clothing items are not permitted in visitation:

- Camouflage or military-type clothing, except as approved in advance by OSH.
- Clothing with words or logos related to alcohol, tobacco products, drugs, vulgarity, violence, bigotry, sexual connotations, or those containing allusion to any of these items.
- Clothing that may be considered provocative, including, but not limited to, excessively short skirts or shorts, see-through, skin-tight, or low-cut clothing and/or clothing that exposes undergarments, back, midriff, or thighs at any time (i.e., while sitting, standing, or bending over).
- Multiple layers of clothing* (a sweater or sweatshirt over a tank top or shirt is allowed).
- Garments with long strings or ties* (for example: adjustment strings on hoodies).
- Neckties, scarfs, necklaces, or any other item that encircles the neck*.
- Large jackets and/or outer garments that protect against the rain or other inclement weather*.
- Accessory personal electronics* (for example: smart watches).
- Hats or other head coverings except as approved in advance by OSH*.
- Shoes or accessories that might be a safety hazard, including anything that may be used as a weapon or ligature device*.

* These items are allowed during **video visitation**.

Child Visits

Child visits are scheduled for specific times and locations, separate from adult visits. Visit www.OSH-Friends.com or contact Ombuds and Family Services for the current visitation schedule. Children younger than 18 are allowed to visit when:

- The child's legal parent or guardian has completed a minor visitor application, which OSH has approved
- The child is always accompanied by an approved adult visitor, including during virtual/video visits.
- Strollers, baby carriers, and car seats are prohibited from entering the secure perimeter.
- During child visits, patients residing on an HLOC unit are allowed 1 adult visitor and up to 4 children at a time. Patients residing on an SRTF unit are allowed 2 adult visitors and up to 4 children at a time.

Special Arrangements

Requests for special arrangements, including extended visits, visits outside of normal visitation hours, and photos with your family member must be made at least 3 business days in advance. You can make your request by calling the reception desk or by contacting Ombuds and Family Services. Approval is not guaranteed and depends on the nature of the request and resource availability.

Health and Wellness

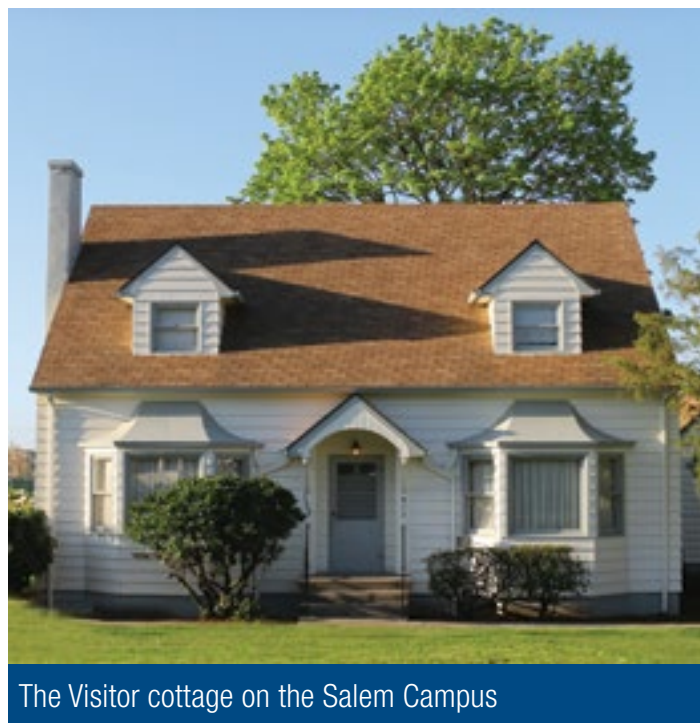
OSH may occasionally close a unit or the entire hospital to visitation when there is a high level of any contagious illness. When this happens, the hospital will post information at www.OSHFriends.com and at the OSH Reception Desk.

Visitation guidelines continued

Holiday Visits

OSH observes several holidays through the year and follows holiday visitation hours, found at www.OSHFriends.com on those days. When a holiday falls on a Saturday, OSH will observe holiday hours on the Friday before the holiday. When a holiday falls on a Sunday, OSH will follow holiday visitation hours on the Monday after the holiday. The holidays OSH currently observes are:

- New Year's Day
- Martin Luther King Day
- President's Day
- Memorial Day
- Juneteenth
- Independence Day
- Labor Day
- Veteran's Day
- Thanksgiving Day
- The day after Thanksgiving
- Christmas Day



Visitor Cottage

We understand the importance of visitation to a patient's recovery. To encourage visitation of people who live 150 miles or more from the hospital, we invite them to use the Visitor Cottage for overnight stays.

Use of the visitor cottage is by reservation only. Reservations can be made by contacting OSH Ombuds and Family Services at least 5 days business days in advance. To ensure access to everyone who needs it, the maximum stay is 3 nights in a 30-day period. The cost to stay in the cottage is \$10 per day, per room. This fee helps maintain the cottage and the OSH Family Travel Fund, which is used to assist patient visitors when travel presents a financial hardship. Part or all of this fee may be waived with approval from OSH Ombuds and Family Services.

Guests are assigned a private bedroom but common areas of the cottage (living room, dining room, kitchen, and bathrooms) are shared between all cottage guests. There may be multiple families using the cottage at one time. Visitors use the space at their own risk. OSH is not liable for infections conditions that may be transmitted by individuals who do not follow the hospital's self-screening process.

For questions about use of the Visitor Cottage and for ADA accommodation requests, please contact OSH Ombuds and Family Services.

Visitation schedule



These visitation schedules are accurate as of May 2025.

For the most up-to-date schedules visit www.oregon.gov/oha/OSH/FRIENDS/Pages/Visitation-Schedule.aspx

Salem visitation - Adult visitation

SUN	MON	TUES	WED	THURS	FRI	SAT	Holiday
2:15-3:15 p.m.	4-5 p.m.	4-5 p.m.		4-5 p.m.	4-5 p.m.	2:15-3:15 p.m.	2:15-3:15 p.m.
3:30-4:30 p.m.	5:15-6:15 p.m.	5:15-6:15 p.m.		5:15-6:15 p.m.	5:15-6:15 p.m.	3:30-4:30 p.m.	3:30-4:30 p.m.
4:45-5:45 p.m.	6:30-7:30 p.m.	6:30-7:30 p.m.		6:30-7:30 p.m.	6:30-7:30 p.m.	4:45-5:45 p.m.	4:45-5:45 p.m.

Salem visitation - Child visitation

9:30-10:30 a.m.			4-5 p.m.			9:30-10:30 a.m.	9:30-10:30 a.m.
10:45-11:45 a.m.			5:15-6:15 p.m.			10:45-11:45 a.m.	10:45-11:45 a.m.
			6:30-7:30 p.m.				

Junction City visitation - Adult visitation

SUN	MON	TUES	WED	THURS	FRI	SAT	Holiday
1-2 p.m.	4:15-5:15 p.m.	4:15-5:15 p.m.		4:15-5:15 p.m.	4:15-5:15 p.m.	9-10 a.m.	1-2 p.m.
2:15-3:15 p.m.						10:15-11:15 a.m.	2:15-3:15 p.m.

Junction City visitation - Child visitation

9:30-10:30 a.m.			4:15-5:15 p.m.			1-2 p.m.	9-10 a.m.
10:45-11:45 a.m.						2:15-3 p.m.	10:15-11:15 a.m.

Property, prohibited items and contraband

Property

OSH is required to keep patients safe. One way we are doing this is to ensure all patient property is approved for use in our secure psychiatric environment. As a result, visitors may not bring items to give to their loved ones during a visit or send packages through the mail. During a visit, visitors can buy items on a patient's approved order form from the OSH Market.

If you provide contraband items to a patient, hospital staff may restrict you from visiting or refer you to Oregon State Police. Supplying contraband is a Class C felony per Oregon Revised Statute (ORS) 162.185. Staff have the right to search you, or your belongings, while you are on OSH property if they have reasonable belief that you possess contraband.

Prohibited Items and Contraband

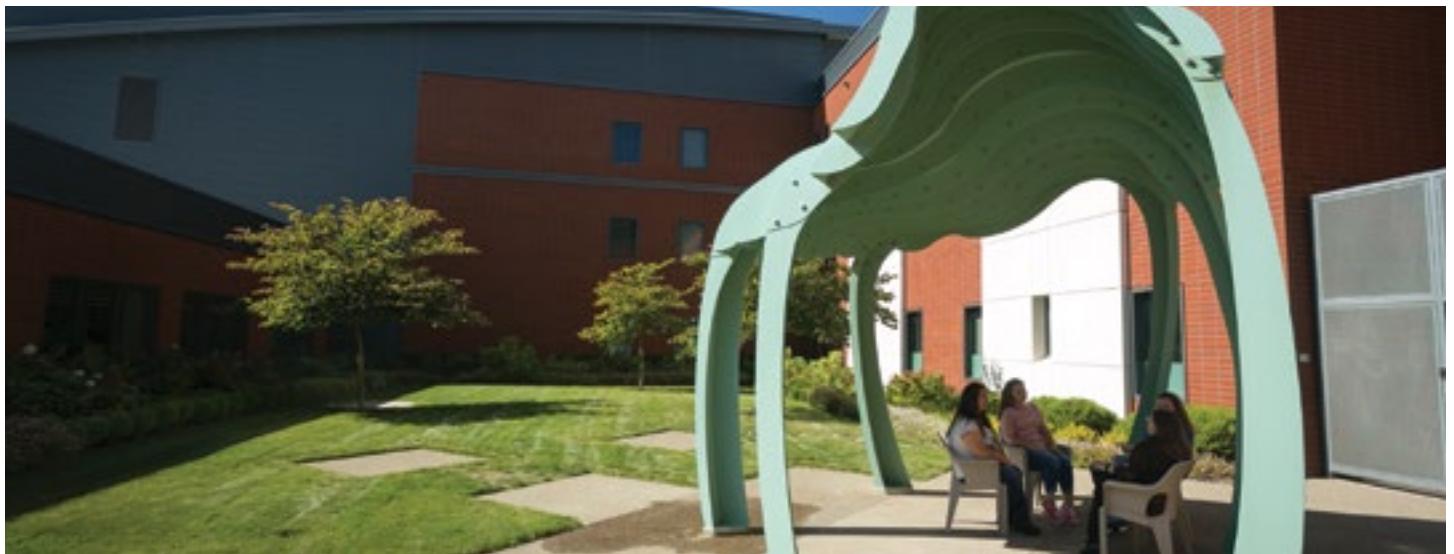
To provide a safe environment for patients, staff and visitors, certain items are not allowed in the hospital. These items are called either "prohibited" or "Contraband."

"Contraband" means any item not permitted on OSH grounds, including, but not limited to:

- Weapons, controlled substances, marijuana, and products containing marijuana, things used to take drugs, illegal substances, lighters, or things used to start fires, and explosives.
- Anything that could harm patients or others.
- Anything that violates the hospital's infection control requirements, such as pets and non-commercially packaged foods and beverages
- Anything that's illegal

"Prohibited item" means an item that could possibly be used to hurt someone. Prohibited items include, but are not limited to things like:

- Aerosol spray cans
- Glass
- Safety pins
- Electrical cords, including chargers of any kind



A group meets under an art structure in a Springs quad.

Resources for family and friends

Resources within the hospital

If you have questions about the services and care that patients receive at the hospital, staff are available to help.

Ombuds and Family Services

This team works closely with patients and their families to answer questions about the hospital, provide education and support, and give assistance with issues or concerns.

- 503-947-8109
- OSH.OmbudsandFamilyServices@odhsosha.oregon.gov
- www.oshfriends.com
- [Facebook.com/oregonstatehospital](https://www.facebook.com/oregonstatehospital)

Resources outside of the hospital

Office of Training, Investigations and Safety (OTIS)

Investigation of all reports of alleged patient abuse.

- 503-689-5076 or 800-406-4287

The Joint Commission (TJC)

TJC makes sure the hospital meets national standards on health care.

- 800-994-6610

National Alliance on Mental Illness (NAMI) Oregon

“Dedicated to improving the quality of life for individuals living with mental illness, as well as their families and friend or family members.”

- www.namior.org
- 503-230-8009 or 800-343-6264

Disability Rights Oregon (DRO)

“To promote and defend the rights of individuals with disabilities.”

- www.droregon.org
- 503-243-2081 or 800-452-1694

Health Care Regulation and Quality Improvement (HCRQI)

The HCRQI program regulates health care facilities, providers and suppliers in acute care and community-based programs. The HCRQI program is part of the Center for Health Protection in the Public Health Division of the Oregon Health Authority. Complaints concerning patient rights related to 42 CFR 482.13 may be filed by contacting:

- Health Care Regulation and Quality Improvement
800 NW Oregon Street, suite 305
Portland, OR 97232
- 971-673-0540

Brain Injury Alliance of Oregon

“Dedicated to creating a better future through brain injury prevention, resource facilitation, education, advocacy, peer mentoring and support groups.”

- www.biaoregon.org
- 800-544-5243

Alzheimer’s Network of Oregon

“Provides compassionate support to individuals, their families and caregivers impacted by Alzheimers disease and other dementias. We provide services and education programs that families need through a local community presence.”

- www.alznet.org
- 503-364-8100

Contact information

Program director and nursing station numbers:

Crossroads		Pathways	
Program director	503-945-2800*	Program director	503-945-2800*
Leaf 3	503-947-2724	Bird 1	503-947-3734
Flower 1	503-947-2714	Bird 2	503-947-8118
Flower 2	503-947-2744	Bird 3	503-947-3754
Harbors		Bridges	
Program director	503-945-2800*	Program director	503-945-2800*
Anchor 1	503-947-4264	Bridge 1	503-947-3764
Anchor 2	503-947-4266	Bridge 2	503-947-3774
Anchor 3	503-947-4267	Bridge 3	503-947-3784
Lighthouse 1	503-947-4268	Springs	
Lighthouse 2	503-947-4281	Program director	503-945-2800*
Lighthouse 3	503-947-4288	Butterfly 1	503-947-3704
Archways		Butterfly 2	503-947-3714
Program director	503-945-2800*	Butterfly 3	503-947-3724
Flower 3	503-947-2754	Junction City	
Leaf 1	503-947-2704	Program director	541-465-2554*
Leaf 2	503-947-2734	Mountain 1	541-465-2704
Tree 1	503-947-2764	Mountain 2	541-465-2714
Tree 2	503-947-2774	Mountain 3	541-465-2472
Tree 3	503-947-2784	Forest 1	541-465-2893
		Forest 2	541-465-2744
		Forest 3	541-465-2754

* To contact a program director, call Reception:
503-945-2800 (Salem)
541-465-2554 (Junction City).

Patient telephone numbers

Crossroads			Springs	
Leaf 3	503-947-2485	503-947-2484	Butterfly 1	503-947-3659
Flower 1	503-947-2487	503-947-2486	Butterfly 2	503-947-3660
Flower 2	503-947-2489	503-947-2488	Butterfly 3	503-947-3661
Harbors				
Anchor 1	503-945-8848	503-945-9741	503-945-9473	503-945-9743
Anchor 2	503-945-9782	503-945-9790	503-945-9796	
Anchor 3	503-945-9804	503-945-9807	503-945-9836	
Lighthouse 1	503-945-9846	503-945-9867	503-945-9861	
Lighthouse 2	503-945-9876	503-945-9898	503-945-9889	
Lighthouse 3	503-945-9904	503-945-9925	503-945-9916	
Archways				
Flower 3	503-947-2491	503-947-2490		
Leaf 1	503-947-2481	503-947-2480		
Leaf 2	503-947-2483	503-947-2482		
Tree 1	503-947-2493	503-947-2492		
Tree 2	503-947-2495	503-947-2494		
Tree 3	503-947-2497	503-947-2496		
Pathways				
Bird 1	503-947-2552	503-947-2551		
Bird 2	503-947-8100	503-947-8101		
Bird 3	503-947-2553	503-947-3658	503-947-2554	
Bridges				
Bridge 1	503-947-3650	503-947-3651		
Bridge 2	503-947-3652	503-947-3653		
Bridge 3	503-947-3654	503-947-3655		
Junction City				
Mountain 1	541-465-2688	541-465-2689		
Mountain 2	541-465-2690	541-465-2691		
Mountain 3	541-465-2692	541-465-2693		
Forest 1	541-465-2695	541-465-2694		
Forest 2	541-465-2696	541-465-2697		
Forest 3	541-465-2699	541-465-2698		

Note: These phones are answered by patients. Please ask for the person you want to talk to and the person who answers the phone will get them for you. Depending on your program, patient phones may be turned off at certain times of the day, including treatment mall hours and late night hours. These times vary by unit.

Treatment team members:

Psychiatrist (doctor) or PMHNP:	
Psychologist:	
Behavioral Health Specialist:	
Social Worker:	
Nurse Manager:	
Registered Nurse:	
Treatment Care Plan Specialist:	
Rehabilitation Therapist:	
Case Monitor:	

Other support people may include:

Peer Recovery Specialist:	
Community Mental Health Provider:	
Religious/Faith Leader:	
Occupational Therapist:	
Guardian:	
Others:	

Notes

This image shows a single sheet of white paper with horizontal blue ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

You can get this document in other languages, large print, braille or a format you prefer free of charge. Contact OSH Language Access Services at OSH.InterpreterServices@odhsoha.oregon.gov or 503-756-7889. We accept all relay calls.

Oregon State Hospital – Salem

2600 Center St. NE

Salem, OR 97301

Reception: 503-945-2800

Toll free: 800-544-7078

Oregon State Hospital – Junction City

29398 Recovery Way

Junction City, OR 97448

Reception: 541-465-2554

Toll free: 877-851-7330

