OREGON STATE HOSPITAL
EVOLUTION OF AN INSTITUTION

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Disclosures

• I have no financial conflicts of interest to disclose
Learning Objectives

• Describe a century of the major successes and challenges in Oregon's longest running operational psychiatric hospital.

• Describe the current role Oregon State Hospital has in serving the healthcare needs of Oregon citizens.

• Discuss and begin to identify ways Oregon State Hospital can be an optimal partner in Oregon's mental health community per the perspective of community providers.
Formulating Oregon State Hospital
Removing the Blindfolds
A complex history that informs our future
Taking Our Own Social History

- Social History
- Build on Strengths
- Trauma Informed
Segregating the Insane

The Oregon Hospital for the Insane or Hawthorne Asylum Opens in Portland

Oregon’s new provisional government establishes jurisdiction to handle insanity cases

1859

STATEHOOD & SEGREGATION

Soon after Oregon became a state, there was a movement to segregate people deemed “insane” from the general population. The state legislature repeatedly debated building a state run mental asylum, but nothing passed until 1880.
Private Hospital Care in Portland

Portland. The Oregon Hospital for the Insane was a private business, described as a temporary fix for the state’s mental health care needs. The founders stated
Oregon State Insane Asylum
Nothing is certain, except death, taxes...and staffing issues.

**WORLD WAR I IMPACTS OSH**

World War I had a major impact on OSH in terms of funding, staffing, and the patient population. As noted in the 1918 Biennial Report, over thirty staff from all areas of the hospital enlisted in military service, with two staff members losing their life.

**STAFFING SHORTAGES 1939**

In 1939, World War II began, and Oregon ranked 2nd to last in the nation in staff-to-patient ratios at state institutions. It averaged 10.4 patients per employee due to the number of employees drafted.
TRAGEDY STRIKES

An accident at OSH led to the poison deaths of 47 patients, and sickening of nearly 500 more.
Accidental killer dies at Oregon State Hospital

October 3, 1983 | No Comments

Philadelphia Inquirer – October 3, 1983

A mental patient who inadvertently killed 47 people in 1942 when the cockroach poison he mistook for powdered milk was used in scrambled eggs at a hospital has died of apparent head injuries.
Lessons as Silver Linings
A growing institution without room for its own
Efforts to Decentralize

**Decentralization at OSH 1962**

The Oregon State Hospital underwent a mass reorganization of its treatment program, creating six geographically-oriented psychiatric units, in order to help patients relate with each other as well as to make transfers easier.

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**Community Mental Health Centers Act 1963**

John F. Kennedy signed the Community Mental Health Centers Act to set community care centers into action, which started the deinstitutionalization process of state hospitals both in Oregon and nationally.

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**Comprehensive Community Mental Health Program Act 1973**

This act integrated the three state hospitals with mental health care programs in the community into a regional system. It also granted funds to encourage counties to expand mental health services.
Memorial Circle

Library of Dust
The story of the cremains made national headlines in 2005, after they were "rediscovered" in storage in the hospital basement. The story was graphically illustrated through the work of photographer David Mielke, and the images of glittering crystals

Memorial Circle
In 1976, the old pond on the west
ends was re-designed as a
memorial. Twelve underground
vans were installed and the cenotaph
were moved and dedicated in a

A ceremony was held to honor the
placement of the cremains of
thousands of individuals who had died
at OSU. A plaque was placed at the
memorial circle on the west
campus grounds.
A Decaying Hospital
Politics and Media on Tour...

INVESTIGATIONS & IMPROVEMENTS
2004

Oregonian newspaper wins Pulitzer prize for series of editorials drawing attention to severe deficiencies in care at OSH.
“You all heard their doctor say that they want to release these people. But you are not a hospital. You are there to keep people in this state safe.”
OSH Mission Statement

“Oregon State Hospital is a psychiatric hospital that inspires hope, promotes safety and supports recovery for all. Our mission is to provide therapeutic evidence-based, patient-centered treatment focusing on recovery and community reintegration, in a safe environment.”
“...comprehensive treatment that acknowledges their offense

\textit{but also their humanity}

is how we maintain public safety.”
Progressive Scrutiny

CIVIL RIGHTS REPORT 2008

The U.S. Justice Department issues a report after a 2006 investigation at OSH. The report is critical of nearly every aspect of patient care at OSH, including the safety of patients and their constitutional rights.

US Department of Justice/Oregon Health Authority

OREGON PERFORMANCE PLAN

Empowering adults with severe and persistent mental illness to live, work, and thrive in their communities.
An Evolving Memorial
De-constructing the Past

NEW HOSPITAL DEDICATION
2010

The new Oregon State Hospital is
dedicated November 18, 2010, with
Greg Roberts as superintendent.

CONSTRUCTION STARTS ON THE NEW STATE HOSPITAL
2009

Amidst the growing concern for patient care and
safety, the Oregon State Legislature approved at
$468 million plan to build two new state
hospitals in Salem and Junction City. An advisory
board was formed with neighborhood residents,
patients, and community leaders to ensure the
State Hospitals

MUSEUM OF MEDICAL HEALTHCARE
2010

Located in the wooded park off the
Hospital, the Museum of Healthcare is
an exhibit that explores the
history and evolution of medical care.

THE NEW OREGON STATE HOSPITAL

The Hospital serves
individuals from all-over
Oregon and reaches beyond
borders.
A New Era

COLUMBIA PARK HOSPITAL
1959-1977

Columbia Park Hospital and Training Center, was Oregon's first hospital devoted exclusively to residential care for persons with mental illness. Pacific Northwest Bell was a major sponsor.

PORTLAND STATE HOSPITAL CLOSED
JUNE 30 1915

Patients were removed to new hospitals and the old Eastern Oregon Hospital in the old Eastern Oregon Hospital was the only remaining facility, which eventually became the state's first mental hospital.

2015

Columbia Park Hospital was closed and replaced by the modern Oregon Health & Science University Hospital.

2015

2015
Treating Illness or Treating Dangerousness?
Early Forms of Treatment

Thomas Story Kirkbride (1809-1883)
Philadelphia based physician who wrote the book literally, On the Construction, Organization and Government of Penn's Hospitals that established the Kirkbride Plan, now known as the Kirkbride Plan.

HOSPITAL FARMS
Cottage Farm was purchased in 1890, and was 640 acres. The Hospital was mainly self-sustaining, as it had spaces on the grounds for fruit, vegetables, pigs, cows, and chickens. The hospital owned and operated a second farm, known as Colony Farm, in West Salem.

Moral Treatment
Moral treatment was a method of treating mental illness that emerged in the 19th century. It emphasized the importance of providing a supportive environment for patients. The approach included activities such as gardening and exercise.

1890s

The Kirkbride Plan

1890s: The Kirkbride Plan was implemented, providing a more humane approach to mental health treatment.
Early Forms of Treatment

Hydrotherapy
Water treatments, such as immersion, treatment with hot, cold, or medicated foot baths, and treatments with jets at high powered jets.

Cosmetotherapy
Cosmetotherapy involved treatments like massage, facials, and other beauty treatments to improve skin and hair. Early cosmetologists were often also herbalists, using natural ingredients to treat skin conditions.

These early forms of treatment laid the foundation for modern medicine and healthcare practices.
“It is a highly technical surgical procedure...severing the nervous pathways from the frontal lobe to other parts of the brain...for patients who are suicidal, profoundly depressed, resistive...In select cases it is now looked upon as standard procedure. The public has heard of this miraculous procedure...and are clammering for this work to be done. A brain surgeon in Portland will be willing to come here and operate for $200 per patient...if we can save a few suicides and eliminate a lot of human misery... it will be money well spent.”

“...received only temporary benefit...and at the present time her mental status is the same as prior to surgery. This patient will no doubt always be a hospital case.”
Eugenics Program

STATE BOARD OF EUGENICS
1917

The Oregon Board of Eugenics was created “To Prevent Procreation of Certain Classes in Oregon,” and forcibly sterilized more than 2,500 Oregonians during its run.

HUMAN STERILIZATION

DR. R. OWENS ADAIR, Author of The Famous “HUMAN STERILIZATION” BILL of Oregon

2002

Governor Kitzhaber publicly apologizes to the 2,500 individuals sterilized in Oregon during the eugenics movement.
Impact of Psychopharmacology

- Sedation and CNS effects
- Cardiovascular side-effects
- Extra-pyramidal side-effects
- Anticholinergic side-effects
- Gastrointestinal side-effects
- Genitourinary side-effects
- Screening for diabetes mellitus
- Prolactinaemia side-effects
- Weight gain
Precursors to the Treatment Mall
Why Wilderness Therapy?

build self-confidence. Processing the experience after the adventure activity engages participants to generalize the lessons learned together. This consistent reflection process creates a powerful therapeutic environment where positive recognition of skills and abilities happens and self-perceived limitations are dispelled. significantly supports and prepares patients for discharge into the community.

Treatmen Service Plan. OSH Rehabilitation Services Department. November 2010.
Community as Therapy

Dr. Dean Brooks
Superintendent OSH
1955–1982
One Flew Over the Cuckoo’s Nest

From the 1973 diary of Dean Brooks

"Some thoughts about deciding to make One Flew Over The Cuckoo’s Nest at OSH."

1) Patients are the main consideration.
   a) The filming itself provides an "event" in the hospital conversation about it, the stimulation of having famous people here, chances for some to be extras, etc. All provide both interest in life around them and...
   b) A film made from Kesey’s book is going to provide "patients" all over the world with a sense of - "Well, somebody finally did a story about me. I must be real." Even if it is sad, the sense that someone...
   c) I really feel that cooperation with the telling of the story may let people be aware that OSH, at least, is trying to do some things about some features of life that Kesey writes about. The sense that the...

“I hated everything about it!!” He saw it defensively, thinking it an exposé of OSH, differently. “I saw it for what Ken intended; it’s about the use and abuse of power in any of the institutions we have created, banks, schools, churches, as well as hospitals.”

March 6, 1973:
“Ken Kesey has something quite significant to say.”

Diary, Dr. Dean Brooks
What it meant in the moment...

“This was the one showing they were most anxious about - they cared deeply how the patients would react.”

Forman said “They laughed and they had a good time...and they felt like being liberated from themselves.”
Simply Being Remembered
Using the legacy of others to build our own...

"... find fact, not fault." Dean Brooks

1970s

ADDRESSING DEHUMANIZATION

"Elimination or reduction of the dehumanizing aspects of institutional living. Although not a new program, humanization is a significant trend in Oregon State Hospital. Many improvements have been made through the years, but not nearly enough. Patients enjoy more freedom, eat better food, are less crowded, can get prompt treatment aimed at early return home, etc. Many areas still demand attention. They may seem small but are of immeasurable value in maintaining a sense of worth and self-respect. Napkins at meals, drinking glasses on the wards, doors on toilet stalls, and personal lockers are but a few of the needed steps to humanization at Oregon State Hospital. These requests are included in the 1969-71 budget."
Discussion

1. Do you have reflections and insights to share about Oregon State Hospital’s past?

2. As a citizen of Oregon, how would you define the state hospital today?

3. What features of current state hospital initiatives are you curious to learn about?
   - Peer Recovery Services
   - Trauma Informed Care
   - “Safe Together” Crisis Prevention, Intervention and De-escalation
   - Collaborative Problem Solving for Adult Population
   - Ligature Mitigation in a Large Institution
   - Suicide Risk Assessment and Planning
   - LEAN Practices
   - Restructuring Institutional Leadership
   - Medical Educational Initiatives
   - Goals to Increase Research Collaboration

4. What is your hope for where future evolution of the hospital will take us?

OSH PANEL

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  - Peer Recovery Specialist

- MIKE DURAN
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