



Healthcare Organization Commitment

Contact Details

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Position

Chief Medical Officer

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Commitment Details

Commitment Name

Challenge 13B: Optimizing Collaborative Care Planning in Mental Health

What Patient Safety Challenge does your Commitment address?

Challenge 13B - Collaborative care planning in mental health

Commitment Start Date

01/01/2018

How Many Hospitals Will This Commitment Represent

Action Plan

- Provide low barrier ways for staff and patients to collaborate on care planning.
 - o Collaborative care planning begins on admission with nursing
 - Unit orientation
 - Community meeting and goal setting each morning
 - Group therapy schedules
 - Goals completion / follow up group daily
 - o Collaborative care planning continues on admission day with nursing/ SW/CM and MD in rounds
 - o Improvement opportunity: staff should be in the milieu at all times, only one person at the nurse's desk.
 - Improves group attendance, observable patient status and communication on interventions or needs for discharge
 - Promote patients to take more of an active role in identification and management of symptoms.
 - o In California patients have the right of refusal, which gives choice and active participation it can result in the need for Reize hearings for appropriate treatment
 - o Improvement opportunity: with staff constantly and consistently in the milieu, there is a quicker response to potential escalation where de-escalation can be successful and prn medications given to reduce violent episodes.
 - Increased awareness and insight on appropriate discharge placement to be communicated to and discussed with interdisciplinary team
 - Potential decrease LOS
 - Reduce restraint
 - Reduce seclusion
 - Increase patient safety by increasing awareness of and interventions for strong negative emotional states which may precede harm of self or others.
 - o First and foremost the EOC is essential
 - o Ongoing and consistent treatment team meetings and daily team rounds
 - o Initiation of constant observation if warranted or 1:1 if actively suicidal
 - o 15 min safety checks consistently 24/7 with room checks for safety
 - o Thorough room checks when warranted
 - o Improvement opportunity: Staff in the milieu heightens awareness, increases patient interaction, improves overall trust and communication
 - Potential decreased LOS
 - Decrease violent episodes
 - Improve patient satisfaction
 - Be evaluated with metrics such as Client Satisfaction Surveys, patient lengths of stay, patient readmission rates, Code White frequency, and seclusion room use.
 - o Press Ganey patient satisfaction surveys
 - o HBIPs which include:
 - SA (Drugs Alcohol Tobacco)
 - Seclusion and Restraint data

Commitment Timeline

These actions are underway and will continue through December 2018

Impact Details

Lives Lost in Last Calendar Year

0

How many lives do you expect to spare from harm in the next calendar year?

0

How many lives do you expect to save in the next calendar year?

0

Methodology for Determining Lives Saved

This calculation will be included in APSS #1