Healthcare Organization Commitment

Contact Details

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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. o 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 Reise 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. o Increased awareness and insight on appropriate discharge placement to be communicated to and discussed with interdisciplinary team o Potential decrease LOS o Reduce restraint o 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 o Potential decreased LOS o Decrease violent episodes o 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: o SA (Drugs Alcohol Tobacco) o 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