



## Healthcare Organization Commitment

### Contact Details

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#### Position

Chief Quality Officer

#### Organization Name

CHOC Children's Hospital

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### Commitment Details

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#### Commitment Name

APSS #13: Mental Health

#### What Patient Safety Challenge does your Commitment address?

Challenge 13B - Collaborative care planning in mental health

#### Commitment Start Date

01/07/2018

#### How Many Hospitals Will This Commitment Represent

## Commitment Summary

Children's mental health is as important as their physical health. It is not always obvious when a child is struggling emotionally, but recognizing the symptoms and seeking early and effective mental health services are important for long-term health. As at least one in five children will experience a mental health challenge while growing up, the issue is critical. Stories of courageous children battling medical illnesses abound, yet the mental health crisis is much more shrouded in secrecy. The result? Only one-third of children receive the mental health services they need. And suicide is the second leading cause of death between 10 and 24 years of age. CHOC Children's opened an inpatient pediatric mental health unit earlier in 2018. This is the capstone of a comprehensive program with an ambulatory program of graded intensity, including an outpatient day program. The needs for such resources are dire, as at least 20% of children have a mental health challenge in the first 18 years of life. Similar to the rest of the U.S., the inpatient capacity for pediatric mental health in California is minimal and declining, particularly for those less than 13 years of age. As an example, by opening 18 beds in the CHOC Mental Health Inpatient Center (MHIC), the number of such beds in the entire state increased by 20%. A reliable pediatric mental health system of care has the potential to turn lives around, providing services that reach the children while the developing brain still has the greatest potential to respond. Furthermore, and akin to physical health, treating children early can also have a major effect on the adult mental health crisis.

## Commitment Description & Detail

CHOC Children's, in partnership with committed organizations and community groups, aspires to create an outstanding mental health system of care for all children, teens and young adults in Orange County, CA and surrounding areas. Our goal is to provide a comprehensive approach to pediatric mental illness. Our vision for a mental health system of care recognizes and address the unmistakable link between mental and physical health. Without early identification and treatment, children with early signs are unlikely to escape the long-term impacts on their health and well-being. At CHOC, we believe mental health should be fully integrated with physical health treatment. When needed, the psychology and psychiatry teams work closely with the medical team to attend to patients' emotional, behavioral and developmental needs through inpatient and outpatient therapy. With this potential for benefit comes risk. The CHOC Children's MHIC was designed with the best current designs for safety and effectiveness of therapy, including novel environments which instill normalcy into daily routines. Most uniquely, parents are even invited partners for the duration of care. But as this PSMF APSS underscores, great care must be taken during all aspects of mental health care delivery. This seriousness of purpose and care delivery is integrated into all aspects of patient care flow and monitoring. In alignment with the Patient Safety Movement Foundation's Actionable Patient Safety Solutions (APSS) checklist, CHOC Children's Hospital is actively working on our implementation plan.

## Action Plan

Executive Plan: □ -Provide low barrier ways for staff and patients to collaborate on care planning. □ -Promote patients to take more of an active role in identification and management of symptoms. □ -Increase patient safety by increasing awareness of and interventions for strong negative emotional states which may precede harm of self or others. □ -Be evaluated with metrics such as Client Satisfaction Surveys, patient lengths of stay, patient readmission rates, Code and escalation frequency, and seclusion room use.

Leadership Plan: • Provide infrastructure. Use an appropriate Toolkit to systematically build patient and support skills development in an effective and efficient manner. Collaborative care planning appears to have particularly strong effects in patients with more severe disorders, and even low levels of collaboration can have positive outcomes (Craven et al., 2006). This is particularly important in acute inpatient psychiatry settings, where psychiatric severity tends to be high, and staff often are time and resource constrained (Porter, 1992). • Provide scope. Develop a guide for staff and physicians to determine appropriate family and supports to be involved in care planning. • Provide capacity. Protect time to engage in patient comfort planning. • Provide capability. Educate staff on how to leverage comfort planning, how to engage patients to identify their triggers, and when to seek additional resources. • Provide motivation. Highlight the importance of patient involvement in patient outcomes, empower staff to take action to proactively assess and include patients in their treatment. • Provide outcomes. Systematically track and iteratively improve patient engagement by collecting data about outcomes, success rates, adverse events.

## Commitment Timeline

Our commitment to a comprehensive continuum of outpatient and inpatient children's mental and behavioral health will be ongoing and reported to the PSMF APSS on an annual basis.