

REPORT TO THE DIRECTOR OF THE LEGISLATIVE COUNSEL BUREAU
PURSUANT TO ASSEMBLY BILL 280 OF THE 2011 LEGISLATIVE SESSION – SUBMITTED BY:
Southern Nevada Adult Mental Health Services
6161 West Charleston Boulevard, Las Vegas, Nevada 89146
702.486.4400
Patient Safety Officer for Rawson Neal: Frances (Marlene) Twigg, RN
(YEAR – time frame captured July 1, 2016– June 30, 2017)

Policies/ Checklists developed related to the following specific types of treatments: Patient Room and Environment Sanitation		Revisions*	New**	Review***	Usage****
OF-EC-45	Hospital Custodial			X	Housekeeping/Maintenance
	Attachment A – SNAMHS Custodial Daily Cleaning Checklist			X	Housekeeping/Maintenance
	Attachment B - SNAMHS Custodial Cleaning Checklist> Patient Bedroom			X	Housekeeping/Maintenance
OF-SP-26	Cleaning and Disinfecting Non-Critical Reusable Patient Care Equipment			X	Nursing/Housekeeping/Maintenance
OF-SP-29	Bed Bug Management			X	Infection Control/Housekeeping/Maint.
	Attachment A – SNAMHS Periodic Bed Bug Inspection Checklist by Unit			X	Nursing/Housekeeping/Maintenance
	Attachment B – SNAMHS Assessment of Pest Control Agent for Bugs			X	Nursing/Housekeeping/Maintenance
OF-SP-08	Scabies and Lice Infestation			X	Nursing/Housekeeping/Maintenance
	Attachment A- Infection Control and Surveillance			X	Nursing/Housekeeping/Maintenance
	Attachment B- Employee Health Tracking Form			X	Infection Control
	Attachment C- Admission Checklist for Fungal infection/Parasitic Infestation			X	Nursing, Infection Control
Policies/ Checklists related to the following specific types of treatments: Hand hygiene nationally recognized standard precautionary protocols					
OF-SP-22	Hand Hygiene			X	Agency Wide
	Attachment A- Monitoring Tool			X	Infection Control/Secret shoppers
NSG VII-01	Hand Washing Protcol	Jun-17			Nursing
Policies/Checklists related to Infection Control					
OF-SP-01	Infection Control of Ice Machines			X	Maintenance/Infection Control
OF-SP-05	Standard precautions			X	Agency-wide
OF-SP-04	Isolation techniques			X	Agency-wide
OF-SP-06	<u>Use of Disposable Gloves during handling of food and fluids</u>			X	Agency-wide
OF-SP-03	Infection Control Program Overview			X	Agency-wide
OF-SP-17	Exposure Control Plan			X	Agency-wide
	Attachment A- Needlestick, Blood or Body Fluid Exposure Log			X	Agency-wide
	Attachment B- Infection Prevention Protocol for Blood and Body Fluid Exposure			X	Agency-wide
	Attachment C- Post follow- up Written Opinion			X	Human Resources
	Attachment D- HIV Consent Form			X	Staff/Client
	Attachment E- Post Exposure Follow Up Employee Declination			X	Human Resources
OF-SP-13	Infectious Waste Management			X	Agency wide
OF-SP-18	Respiratory Protection Program			X	Infection Control/Employee health
	Attachment A- Respirator Evaluation Checklist			X	Infection Control/Employee health
OF-SP-19	Seasonal Influenza Vaccination Program			X	Agency wide
	Attachment A- Consent Form	Nov-16			Agency-wide
	Attachment B- Consent From, Spanish	Nov-16			Agency-wide
OF-SP--23	Outbreak Investigation			X	Infection Control
	Attachment A and B- Prevention Zika Virus	Feb-16			Agency-wide
	Attachment C- Ebola Fact sheet	Feb-16			Agency-wide

Continued

		Revised *	New**	Review***	
OF-SP-32	Infection prevention Committee	Jun-17			Members Agency Wide
OF-SP-34	Antimicrobial Stewardship Protocol	Jun-17			Agency wide
NSG II-43	Urinary Catheter Management			X	Nursing, Infection Control
	Attachment A- Pre-printed order Foley Catheter Care		Jun-17		Nursing, Infection Control

NSG II-46	Nephrosotomy Catheter Management		Apr-16		Nursing, Infection Control
NSG II-47	Tracheostomy Management		Jul-16		Nursing, Infection Control
NSG II-49	Colostomy and Ileostomy Care		Jan-17		Nursing, Infection Control
Policies and checklists regarding Admission, Discharge and Patient Identification include:					
PF-CC_55	Patient Identifier			X	Agency Wide
NSG II-18	Patient Identification			X	Agency Wide
	Attachment A-Patient Identification Consent Form			X	Nursing
PF-AST-04	Admission Discharge Criteria		Jun-17		Admissions, Psychiatry, Nursing, Admin.
	Attachment A- Admission Criteria List		Jun-17		Admissions, Psychiatry, Nursing, Admin.
NSG II- 08	Inpatient Admission Procedure	Mar-17			Nursing
	Attachment A- Patient Admission Checklist	Mar-17			Nursing
	Attachment B- Patient Transferring Unit Checklist	Mar-17			Nursing
	Attachment C- Patient Receiving Unit Transfer Checklist	Mar-17			Nursing
FF-CC-01	Forensic Services Admission and Intake			X	Nursing, Forensic, Social, Psychiatry
FF-CC-03	Forensic Services Admission and Discharges Process Protocol			X	Nursing, Forensic, Social, Psychiatry
PF-COC-02	Interhospital Patient Transfers and COBRA Compliance			X	Nursing, med staff, Administration
SW-06	Discharge Planning and Continuity of Care Plan			X	Nursing, Forensic, Social, Psychiatry
	Attachment A- Intra-Agency Discharge Coordination Social Work Check List			X	Nursing, Forensic, Social, Psychiatry
NSG II-27	Patient Discharge	Mar-17			Nursing
	Attachment A- Discharge Checklist		Mar-17		Nursing
OF-MOI-12	Psychiatric Discharge			X	Psychiatry
	Attachment A-			X	Psychiatry
FF-COC-01	Forensic Service Discharge Planning			X	Nursing, Social, Psychiatry
OF-MOI-60	Medication Reconciliation			X	Nursing
01-134	Post Follow- Up Phone Call Procedures	Mar-17			Medical
Policies and Checklists regarding Competency and Accuracy of Orders/Treatment:					
NSG I-05	Nursing Department Competency Assessment Program		Mar-17		Nursing
NSG IV-08	24h Hour Unit Worksheet	Oct-15			Nursing
NSG VI-09	Evaluating Contract Nursing and Certified Nursing Assistants	Nov-16			Nursing
	Attachment A- Certified Nursing Assistant	Nov-16			Nursing
	Attachment B- RN	Nov-16			Nursing
Other Patient Safety Policies developed include:					
NSG I-03	Inpatient Staffing Plan		Feb-17		Nursing
	Attachment A	Feb-17			Nursing
	Attachment B	Feb-17			Nursing
	Attachment C	Feb-17			Nursing

Continued

		Revised *	New**	Review***	
NSG II-04	Transportation of Patients	Mar-17			Nursing
	Attachment A-	Mar-17			Nursing
NSG II-15	Cobra and Escort of an Inpatient to Emergency Room			X	Nursing
NSG II-16	Escort and or Supervision-Meal times		Jan-17		Nursing
NSG II-17	Nursing Staff Responsibilities- Medical emergency- Code Blue		Mar-17		Nursing
	Attachment A-	Mar-17			Nursing
NSG II-19	Security on the Adult Inpatient Unit	Apr-17			Agency wide
NSG II-41	Patient bathroom Security			X	Nursing
NSG III- 03	Measuring Blood Pressure		Jan-17		Nursing
NSG IV-04	Special Observation of Patients	Apr-17			Nursing, Psychiatry, Social Worker

NSG IV- 10	Intake and Output Procedure	Aug-16			Nursing	
	Attachment A			X	Nursing	
OF-PI-02	Incident/Accident Inquiries and Investigations	Oct-16			Agency wide	
OF-PI-04	Incident and/or Accident Reports	Jan-17			Agency wide	
OF-PI-28	Sentinel Events			X	Patient Safety, Admin, Nsg, Pshchiatry	
NSG II-07	Sexual Contact/Physical Contact/Assault Between Hospitalized Patients and Patient Allegations of Abuse	Mar-17			Patient Safety, Admin, Nsg, Pshchiatry	
PF-RRE-02	Seclusion or Restraint of Patients	Jun-17			Patient Safety, Admin, Nsg, Pshchiatry	
	Attachment A-Seclusion and Restraint Order Form	Jan-17			Psychiatry/ Nursing	
	Attachment B- Psychology Consult Form			X	Nursing/Psychology/Psychiatry	
	Attachment C-Staffing Plan, tier 1			X	Nursing	
	Attachment D-Staffing Plan, tier 2			X	Nursing	
	Attachment E- Staffing Plan, tier3			X	Nursing	
	Attachment F- Observation Check Form			X	Nursing	
PF-AST-03	Danger to Self or Others			X	Psychiatry, Psychology, Nursing, SW	
PF-CC-51	Fall Prevention Protocol		Jun-17		Agency wide	
OF-EC-01	Safety Management Plan			X	Agency wide	
OF-EC-02	Safety Program			X	Agency wide	
OF_EC_04	Health and Safety Inspections			X	Agency wide	
	Attachment A- Monthly Environmental Health and Safety Report		Feb-17		Agency wide	
	Attachment B- Notice of Non-Compliance Form		Feb-17		Agency wide	
OF-PI-29	Annual Patient Safety Plan 2017		Mar-17		Agency wide	
HIS	HIS Department Audit Checklists				HIS, Medical	
	Concurrent Review				HIS, Medical	
	Physician Order Audits				HIS, Medical	
Tier Audits	Ongoing Tier audits					
	Nursing				Nursing	
	Psychiatry				Psychiatry	
	Social Services				Social Services	
TOTAL				Revised*	New**	Review***
				31	16	55

***As part of the annual review any required revisions will be identified. If revisions are required this is noted in the revision box. Any additional patient safety checklists or policies identified will be noted in this (review) column. If the annual review reveals no changes are required this box will be marked with an "X". An "X" means that the checklists and policies were reviewed but no changes were required.

Summary Report

During this fiscal year the Division of Public Behavioral Health began revising Division Policies and requiring agencies to change their current policies to Agency Protocols and Facility policies to Procedures.

This has created a lot of revisions solely on the structure of the policies and is not included in this summary.

During this year, Stein Forensic and C-pod separated from the Joint Commission Certification process. Their census has reached a capacity of 20 beds on C-Pod and Stein at 47 beds for a total of 67 beds while Civil Inpatient beds which include misdemeanor clients from CCDC will decrease in SFY 18-19 to 88 total beds. SNAMHS total licensing beds currently in use is 174.

This has shifted the Tier Staffing levels greatly and each facility has their own new staffing plan as well as staffing department.

Other new protocols added this year to enhance continuity of care and safety precautions include: An Infection Prevention Committee that includes all disciplines and administration which meets quarterly. One of their duties will be to oversee the new Antimicrobial Stewardship Program that is required by Joint Commission and CMS.

As the medical needs for our clients are increasing new nursing procedures have been developed to incorporate those needs such as Colostomy and Ileostomy care, Tracheostomy Management, and Nephrostomy care. (Urinary catheter care added a new Pre-printed Order Care for Patients with a Foley Catheter Attachment).

A new Restraint Free Committee has been developed with the goal of becoming a restraint free facility within 12 months. This committee meets bi-monthly and the Patient Safety officer is reporting Seclusion and Restraint data from the Patient Safety Performance Improvement Plan. A hospital survey will be released next month to all staff to provide feedback on our culture and define some of the barriers to becoming restraint free allowing them to determine what actions to take first.

Two new maps were added to the Life Safety Plan, the Fire Emergency map and Life Safety map for Rawson-Neal. Forensic Services added a new protocol that requires Perimeter checks to be conducted by Post Certified Staff and a new protocol FF-SP-26, guidelines for staff using agency Officer Badges.

Revisions included: Nursing II-07- revising the checklist for Allegations and Abuse include all allegations were reported to appropriate agencies i.e., Police, Aging and Disability. Nursing II-17- Reformatted the Code Blue recording sheet into an SBAR format (Situation, Background, Assessment and Recommendation) with added additional progress notes on the back of SBAR form. Nursing II-19- Security on Adult Inpatient Unit added that security is the responsibility of all staff on unit and included monitoring door entrances and exits during monitor rounds. Hand washing protocol was revised regarding the amount of time for friction rub of hands.

The fall precaution policy was changed drastically after data reviewed many falls were from extrinsic factors such as during sport activities, wet surface areas, etc. It was renamed Fall Prevention Protocol to focus on preventing falls rather than identifying those with a fall risk. This included changing the type of footwear we were currently using (nonskid Terry Socks) to a more stable nonskid slipper/shoe. It

redefined the assessments for falls in regards to nursing and occupational therapy, included a referral for occupational therapy with recommendations to the client during treatment team meetings. In addition, Maintenance is resurfacing the shower floors to improve the friction of the tiles to make them less slippery.

Included in this report are:

- Policy Spreadsheet
- Patient Safety Plan
- The Patient Safety Performance Improvement Plan data
- Tier Audits for nursing, social work and psychiatry in relation to compliance of various protocols/policies. (sent via mail)
- Copies of policies during this review. (Sent via mail)