

Implementing Evidence-Based "Patient Safety Plans" in Acute Psychiatry

Bernadette Y. Jao, MSN, RNBC

Bay Pines VA Healthcare System

Kristine Ashley, James Morello

Problem

Increased use of seclusion and restraints for the management of aggressive behaviors in acute psychiatry creates a non-therapeutic environment.

Evidence

Current Research suggests that the use of treatment preferences is clinically useful (Srebnik & Russo 2005). The Sheppard Pratt Aggression Reduction Campaign (SPARC) has been found to be effective in reducing seclusion and restraint episodes (Sharstein 2008).

Strategy

Create and implement patient safety plans and develop an agitation monitor. Track episodes of agitation and the effectiveness of behavioral interventions.

Practice Change

Engaging patients, even those who are acutely impaired, as partners in their care results in treatment environments that promote the shared responsibility for maintaining safety. Patients are encouraged to participate by completing psychiatric treatment preferences the "Patient Safety Plan". This gives patients input into their care, communicating individualized actions that are especially useful when they are stressed, de-compensated, psychotic or uncooperative. Patients specify what their individual trigger behaviors are, what is helpful to them, and what is not helpful to them, allowing for accountability, empowerment and responsibility as a partner in their care.

Evaluation

Ongoing evaluations include monthly Seclusion and Restraint Monitors, Staff Satisfaction Surveys, Patient Satisfaction Data (SHEP) and an Agitation Occurrence Monitor completed each shift and evaluated monthly.

Results

Decreased episodes of seclusion and restraints

Increased use of time-outs and the use of the Quiet Area

Decreased patient and staff injuries

Decreased number and severity of crisis calls

Improved LOS from and decrease re-admission rate

Improved staff satisfaction and retention

Improve communication between patients and healthcare providers

Empower patients in working together as partners, team members and having a voice into decision-making and choices of care.

Recommendations

Data supports this innovative patient centered process effectively reduces the episodes of seclusion and restraint and manages aggressive behaviors.

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