

LTCS BEST PRACTICE CATALOG SUBMISSION COVER SHEET

TYPE OF SUBMISSION:

NEW

REVISED - Replaces _____
Current submission catalog number

UPDATE - To _____
Current submission catalog number

CHANGE IN CONTACT INFORMATION

Name: _____

Telephone Number: _____

E-Mail Address: _____

Date Submitted To Hospital/Division: 3/8/2000

Approved for submission to LTCS Best Practice Committee

Date Submitted To LTCS Best Practice Committee: _____

Approved for submission to LTCS Best Practice Catalog

LTCS BEST PRACTICE CATALOG SUBMISSION

Project Title: Quick Reference Restraint & Seclusion Procedure Tag

Function Category:

PATIENT-FOCUSED

ORGANIZATION

STRUCTURES

Sub-category(s): Care of Patients

Heading: Behavior Management

Contact Person: Peggy Phaklides, ASH Standards Compliance Office

Telephone Number: 805-468-3396

Hospital: Atascadero State Hospital

The following items are available regarding this Best Practice:

Sample Quick Reference Tags

Photographs

Video Tape

Drawings

Manual

1. **SELECTION OF PROJECT/PROCESS AREA** (Describe how and why your team selected this project/process area for improvement.):

Audits of Restraint and Seclusion chart documentation provided data that showed inadequate documentation on incidents of R&S. This kind of documentation is critical to protecting patient rights and passing the scrutiny of JCAHO & licensing surveyors and the passing patients rights advocate.

2. **UNDERSTANDING EXISTING CONDITION WHICH NEEDS IMPROVEMENT** (Describe the relationship of your project to your goals for improvement, and describe current process performance.):

Immediately following incidences involving violent acts or injuries documentation is often written during times of high stress. Because of the stress, Occasionally critical elements of documentation can be overlooked.

3. **ANALYSIS** (Describe how the problem was analyzed.):

100% of Restraint & Seclusion charts were audited. A significant number showed opportunities to improve in documentation. The audits also showed that the most complete documentation was done by individuals who had some kind of reference immediately available to them at the time of the writing.

4. **IMPLEMENTATION** (Describe your implementation of the solution.):

A team of ASH staff developed a quick reference card to detail the critical components of R&S documentation. The cards are in the form of laminated tags. Tags were distributed to all Level Of Care staff. They are hole punched to fit easily and directly behind the security name badges and are readily available at a moments notice.

5. **RESULTS** (Demonstrate that an improvement has occurred as a result of the project/process area implementation.):

Current audit show R&S documentation is more complete, concise, easier to read, more logically formatted, and contain more of the required critical elements to justify the use of restraint or Seclusion

6. **LEARNING** (Describe what the team learned and how they used those lessons to continuously improve the success of this Best Practice.):

Traditional is always ongoing on this subject, but the tags provide immediate teaching and reference at the time of greatest need.