



## Behavioral Health: Comprehensive Risk Assessment

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Behavioral health is an area with increasing risk exposure and is an area of high scrutiny to accrediting bodies as well. The proactive performance of a comprehensive risk assessment is an effective tool to enable an organization to more successfully mitigate clinical and legal risk in behavioral healthcare. The assessment needs to encompass a review of the entire process of care, the environment of care, and regulatory compliance in this complex area of care. Once the review is completed, the results need to be reported in such a way as to enable the appropriate prioritization of risks, development of an action plan with responsible parties and target completion dates assigned, and development of indicators to assure that the actions taken were effective. The following outlines the various components to consider in undertaking a proactive and comprehensive risk assessment of Behavioral Health.

### OVERALL ISSUES

A comprehensive risk assessment needs to include, at a minimum, a review of the following factors:

- Environment of care
- Clinical assessment/reassessment process
- Staff competence and staffing adequacy relative to patient population and treatment regimens
- Team communication
- Adherence to regulatory requirements e.g., HIPAA, EMTALA, restraint and seclusion, documentation, and staffing requirements.
- All unexpected near miss and actual events on the unit that may lead to unexpected adverse outcomes, actions taken to prevent future events and data collected to

demonstrate that the actions were effective or additional actions were taken.

*Do not overlook assessing the risks that may be introduced into the environment...*

### **ENVIRONMENT OF CARE**

The behavioral healthcare environment needs to demonstrate that the physical surroundings help assure that the patient cannot harm himself/herself or others, and that staff are adequately protected from potential harm at the hands of patients. Assessing the environment for sharp items, hanging and strangulation risks is critical. Other areas of concern are access to opportunities to jump or leave the area without authorization, electrical outlets, stoves and breakable furniture. *Caution:* Do not overlook assessing the risks that may be introduced into the environment by patients, visitors, and staff from other departments.

### **CLINICAL ASSESSMENT/REASSESSMENT PROCESS**

The clinical assessment/reassessment process is the best way to identify high risk behavioral health patients. An evaluation of the flow from the patient's diagnosis to the plan of care, interventions and discharge planning is what is included in this portion of the clinical risk assessment. In addition, clinical assessment and planning are to be a continuous process rather than an isolated event. Evaluate not only the steps in the process, but include following both successful and unsuccessful patient encounters to see how the process worked in each case and where potential problems exist.

In the evaluation of the reassessment process, review how often this was done and documented prior to any change in privilege level, authorization of a pass or transfer to another unit or discharge. Also, review those patients with changes in their affective state to determine if the reassessment process was utilized to create or revise the care plan; a reassessment should always be done when a patient has any change in his or her affective state.

### **STAFF COMPETENCE AND ADEQUACY OF STAFFING**

This aspect of the comprehensive risk assessment evaluates how the organization assesses the resources needed to care for behavioral health patients. It is important to review budgeted and actual staffing on all shifts and days of the week correlated with the census, patient complexity and skill-mix/experience level of care providers.

The review includes:

- Qualifications of staff hired to perform clinical responsibilities
- Adequacy of initial orientation and evaluation of competence
- Process used to evaluate competence in an ongoing manner
- Ongoing Professional Practice Evaluation (OPPE) / Focused Professional Practice Evaluation (FPPE) criteria used to reappoint Licensed Independent Practitioner (LIPs)
- Continuing Education
- How volunteer staff are utilized and evaluated.

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### **TEAM COMMUNICATION**

The healthcare team assembled needs to work together to create the best and safest therapeutic milieu for patients. A complete risk assessment includes review of how the team acknowledges and considers each staff member's assessments. As we know communication is essential to an effective hand-off process; therefore, the review also includes an evaluation of the hand-off process in place both for patient intake and for transitions within the behavioral health setting. Evaluate the effectiveness of hand-off communication between each of the following providers: nurse to nurse, physician to physician, nurse to physician, and tech to nurse, and when transfers are made to other units or care settings.

### **ADHERENCE TO REGULATORY REQUIREMENTS**

#### **HIPAA**

Protection of patient healthcare records is essential. The risk assessment includes review of the processes in place to ensure that protection. In addition, the organization's readiness to comply with new requirements for behavioral health patients in 2010 needs careful analysis. *Caution:* The assessment needs to include a review of compliance with both federal and state mental health confidentiality laws.

#### **EMTALA**

Review of compliance with EMTALA regulations of transferred patients is a key component of any risk assessment. At a minimum, the review needs to determine the level of consistency

of patient assessment by a qualified examiner being done prior to discharge/transfer, particularly to discern if any medically unstable discharge or transfers have occurred.

The elements in this portion of the risk assessment include:

- A review of processes related to who can evaluate patients prior to transfer
- Assurance that application of physical and/or chemical restraints is not considered stabilization
- Assurance that the reason for discharge/transfer is always documented
- Review of transfer documentation to assure that it demonstrates that all necessary hospital services were used to stabilize the patient before a transfer including the use of on-call specialists and increased staffing when required.

In addition, under general compliance with EMTALA, include an:

- Assessment of the hospital's ability to demonstrate that the hospital staff and all providers apply the same screening, evaluation, and stabilization standards to all patients requesting emergency care regardless of the patient's ability to pay.
- Assessment that the hospital is maintaining a central log of all individuals who come to the emergency department for assistance.

### **RESTRAINT AND SECLUSION**

This area of review needs to assess whether there is evidence of a proactive approach in place to reduce restraint use, and that there is a consistent drive to use the least restrictive restraints for the shortest period of time. One aspect to evaluate is the use of restraint and /or seclusion in concurrence with the behavioral health unit's staffing. Other areas to review include:

- The restraint policy and the frequency of restraint use
- Indications for behavioral use of restraints
- All death or adverse outcomes in restraints to determine contributing factors to these events
- Adequacy of monitoring of all patients in restraints and seclusion to prevent any harm to the patient in restraint and seclusion.

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## **DOCUMENTATION**

In the behavioral health area, assessment of the patient's medical history and physical exam present challenges because the providers are focused on the behavioral issues associated with the patient. Yet, for risk management and compliance with regulatory requirements it is critical that a complete history and physical be attained, and a treatment plan developed as required. The risk assessment needs to include this aspect as well.

The assessment should include:

- Review of documentation of the plan of care
- Patient's responses to the plan of care
- Assessment of the adequacy of documentation of the discharge plan; including referrals for follow up care and treatment as needed
- Assessment that there is a policy that requires the nurse to document when the attending physician does not physically see the patient before discharge; the following need to be included in this documentation: a detailed summary of the conversation with attending regarding discharge instructions, any variation in the assessment that the physician was notified about, final decision of the attending physician to discharge the patient.

## **REVIEW OF NEAR MISS AND ACTUAL EVENTS**

It is necessary to gain a picture of practice patterns that might be present and that are potentially contributing to near miss or actual events in the behavioral health area. The risk assessment needs to include the last 6 months of near miss and actual events that have occurred on the units, contributing factors noted and actions taken based on these reports. The reviewer should note whether there are any patterns or trends and how the organization assesses the effectiveness of actions taken to prevent future events.

## **SUMMARY**

Proactive and comprehensive risk assessment needs to be both detailed and objective. Its goal is to categorize the likelihood of a mishap. By assigning a severity and a probability level the organization can develop a risk mitigation plan prioritized to prevent those events most likely to significantly harm patients, visitors or staff.

*The goal needs to be to create the best and safest experience for patients, visitors and staff.*

To gain the most from this type of assessment, it is essential that leadership takes a strong role in establishing a learning culture where staff is encouraged to identify areas for improvement and not feel that they will be rebuked when opportunities are identified. The goal needs to be to create the best and safest experience for patients, visitors and staff.

Leadership must assure active medical staff, and other allied healthcare professionals involvement, in the assessment and improvement process.

In order to sustain improvements made during such a process, leadership must define structure, process and outcome indicators for review on a regular basis and establish an ongoing scheduled process for open communication with the behavioral health area providers to continually receive input on measures needed to improve care.

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