



Report to Alaska Psychiatric Institute (API) Governing Body

For the Period of July – December 2023

About WICHE-BHP & NRI

Western Interstate Commission for Higher Education – Behavioral Health Program (WICHE-BHP):

- ✓ Serving Western states, territories, and freely associated states with the addition of American Samoa under the Pacific Islands membership
- ✓ Consulting and TA: systems improvement, workforce development, data, research, evaluation
- ✓ History providing consultation and technical assistance API and other WICHE state hospitals

National Association of State Mental Health Program Directors (NASMHPD) Research Institute (NRI):

- ✓ Expertise in research, evaluation, data management and analysis.

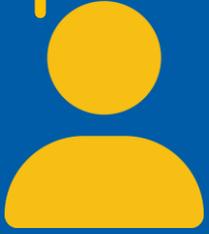
PROJECT OVERVIEW

TIMELINE: July 1, 2023 - June 30, 2024 with (4) annual renewal options to be exercised at the State's sole discretion.

FOCUS:

- I. Assess API's regulatory and policy compliance to The Joint Commission (TJC), the Centers for Medicare and Medicaid Services (CMS) standards, and API's internal policies.
- II. Help API maintain compliance with regulating agencies.
- III. Support API's TJC survey preparedness and hospital functions:
 - Policy Management
 - Standards Compliance
 - Survey Readiness
 - Workplace Violence/Milieu Management
 - Data Management
 - Risk Management
 - Emergency Management
 - Life Safety & Environment of Care
 - QAPI Program
 - Infection Control
 - Pharmacy Services
 - Provider Services

WICHE-BHP TEAM



Dennis Mohatt
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Deb Kupfer
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Project Manager/Lead



Greg Roberts
Survey Evaluation/
Preparedness



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Nursing, Staff
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Richard Fields, MD
TJC Standards
Med Staff & Pharmacy



Mike Guthrie
Life Safety and EOC

NRI TEAM



Glorimar Ortiz
NRI Project Lead



Brijette Morris
Data Management



Emma White
Data Analyst

* WICHE-BHP has partnered with NRI to provide data management expertise and consultation to API, including: data management processes; data abstraction for core measures; data presentation; EHR module reviews, and health information management.

Project Approach

- Consultation and technical assistance to API's leadership
- Regular (virtual) meetings and correspondence
- Training regarding survey preparedness and TJC standards
- Review of policies, procedures and operational plans
- Written reports for API leadership
- BI-Annual reports to API Commissioner & Governing Body
- Triannual On-Site Visits to API
 - October 2023, January 2024, April 2024
- Survey Support: WICHE-BHP "available in pocket"

October 2023 API Site Visit

- ▶ WICHE-BHP team members: Glenn Most and Greg Roberts (Mike Guthrie available remotely.)
- ▶ Meetings with key API staff
- ▶ Tracers of Patient Units, Pharmacy, Food Service, Patient Records, and Seclusion/Restraint rooms
- ▶ Evaluation of relevant documents

▶ Focus on APIs compliance with TJC Standards:

- Governing Body
- Leadership
- Medical Staff
- Performance Improvement
- Patient Safety Systems
- Risk Management
- Emergency Management
- Medication Management
- Patient Rights
- Patient Safety
- Provision of Care/ Treatment/ Services
- Record of Care/ Treatment/Services
- Environment of Care

API was found to be in substantial compliance with majority of standards reviewed.

Recommendations

GOVERNING BODY

- Support API's staffing needs, with an emphasis on hiring and retention of direct care staff, with consideration to competitive salaries, compression pay and hiring incentives*

LEADERSHIP

- Initiate focused recruitment to fill staff vacancies. (Reduce reliance on contract staff & overtime.)*
- Identify and prioritize funding requests for capital/physical plant needs.*
- Evaluate the factors relating to the high rate of hospital readmissions.*

MEDICAL STAFF

- Post signs at front entrance stating API does not provide emergency services.*
- Post signage at all entrances prohibiting contraband (weapons, drugs, sharp items, etc.).*

PERFORMANCE IMPROVEMENT

- Include a complete description of the Plan-Do-Study-ACT (PDSA) cycle for each area of focus.*

RISK MANAGEMENT

- Establish a proactive approach to risk management.*

Recommendations (cont.)

PATIENT SAFETY SYSTEMS

- Ensure a proactive approach: safety is number one priority.*
- Proactively address staffing levels.*

PROVISION OF CARE/TREATMENT/SERVICES

- During the implementation of new EHR, engage with other state hospitals (WPSHA) and NRI.*
- Expand use of available space on the treatment mall.*

RECORD OF CARE/TREATMENT/SERVICES

- Document attendance at Treatment Team meetings; include patient and signatures.*

ENVIRONMENT OF CARE

- Consider expanding active treatment programming in the treatment mall.*
- Ensure written protocol in place regarding decisions on use of rooms with/without vision panels.*
- Consider adding therapeutic color to corridors of patient units and bedrooms.*

SURVEY AREA	TOPIC
LEADERSHIP	Data collection
LEADERSHIP	Readmissions
PERFORMANCE IMPROVEMENT	Performance improvement activities reports
PERFORMANCE IMPROVEMENT	Complete description of the PDSA cycle
PERFORMANCE IMPROVEMENT	Priorities and inclusion of staff and patients
PERFORMANCE IMPROVEMENT	Description of PDSA cycle for each area of focus
RISK MANAGEMENT	Proactive approach to risk management
RISK MANAGEMENT	Monitoring effectiveness of actions in Plan
PATIENT SAFETY SYSTEMS	Data collection regarding patient safety
MEDICATION MANAGEMENT	ADRs reporting
MEDICATION MANAGEMENT	Pharmacy performance improvement data
MEDICATION MANAGEMENT	Policy on reporting ADRs
PATIENT RIGHTS	Posting patient rights
NATIONAL PATIENT SAFETY GOALS	Eliminate all ligature risks
RECORD OF TREATMENT/CARE/SERVICES	Patient's charts documentation and filing
ENVIRONMENT OF CARE	Treatment location
ENVIRONMENT OF CARE	Bedroom doors/visibility
ENVIRONMENT OF CARE	Therapeutic treatment environment/decor

High Priority

Medium Priority

Low Priority

Next Steps

WICHE- BHP

- ✓ January Site Visit: Perform survey readiness tracers noted in deliverables
- ✓ Foci: Treatment Plans & Programs, Milieu, Risk Management, Facility, Safety
- ✓ Review: Staff Training, Life Safety & Environment of Care Plan, Policies, QAPI Plan, Patient Records
- ✓ Provide training/consultation regarding TJC standards & survey readiness

NRI

Review/Advise/Make Recommendations:

- ✓ Data management process
- ✓ Data abstraction for core measures
- ✓ Data for internal/external presentations
- ✓ Health Information Management improvements
- ✓ Review EHR Modules: clinical, nursing, lab, physicians, billing, & pharmacy

Questions?





TAKE CARE OF THE PATIENT AND THE REST WILL FOLLOW

- Thomas Frist, MD

THANK YOU!

Deb Kupfer

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