

VPCH Performance Improvements – 2013

Department	Title	Result
Clinical and Administrative teams	Reduce emergency involuntary procedures. Reduce staff injured during interactions with patients.	-Significantly reduced the frequency and length of emergency procedures as compared with VSH. -Increased use of manual restraint alone, rather than manual restraint leading to seclusion or mechanical restraint. -Reduced frequency of patient physical aggression against staff. -Reduced frequency of staff injured by patients.
Recovery Support	Evidence-Based Practices and Educational Resources	Integrated several Evidence-Based Practices into on-unit and off-unit Recovery Service activities. Offer Educational Resources through the Unit Library time.
Recovery Support	Quality of Documentation	Created a new therapeutic group and activity documentation form that is also used by nursing staff facilitating groups. Created new section of medical record for this documentation.
Recovery Support	Motivational Interviewing	Successfully incorporated MI into Orientation Training for new staff. Implementing training for Mental Health Recovery Specialists
Recovery Support	Patient Orientation Packet	Created a Recovery Service orientation packet that is provided to all patients after admission.
Recovery Support	Recovery Service Groups and Activities on weekends	Began offering groups and activities for patients during the weekend.
Psychology	Clinical Supervision of Nursing Staff (RN's, Mental Health Specialists and Mental Health Recovery Specialists)	Offered clinical supervision with the associate director of nursing for all members of the nursing staff (RN's, Mental Health Specialists and Mental Health Recovery Specialists) three times per week.

Social Work	SW Progress Note and Aftercare Referral Form	Revised the social work progress note template and the Aftercare Referral Form that communicates discharge information to the patient, family and outpatient care providers.
Nursing	Reducing time to prepare emergency involuntary medications	Analyzed process and made improvements, trained nurses, to reduce potential for errors and reduce the length of time necessary to prepare and administer involuntary medications during an emergency.
Facilities - Nursing - BGS - VPCH Leadership	Unit cleanliness and infection prevention.	Established standards, processes and documentation of cleaning patient rooms and common Areas. Provided training for housekeeping staff in cleaning to hospital levels.
Medicine - Medical Records	Improve quality of open medical records	Assigned exclusive responsibility to unit clerks for filing materials in medical records. Created back-up system to organize chart materials prior to filing. Revised organization of the medical record including new guidelines for thinning lengthy active records.
Facilities	Emergency Response Plans	Updated Continuity of Operations Plan. Required hospital clinical and administrative leaders to complete FEMA online training on Incident Command Structures. Initiated mock trainings for leaders in responding to complex emergencies.
CEO	Enhance communications between administration and VPCH staff	CEO, Medical Director, and Director of Nursing implemented regular open meetings with all shifts, all employees every 1-2 months. CEO initiated regular emails to all employees to provide updates on hospital matters.