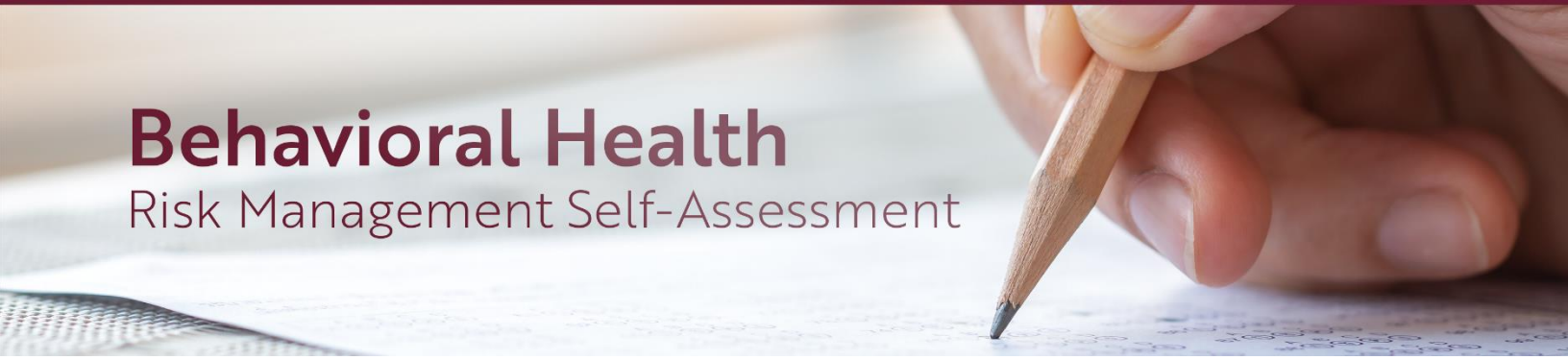

Behavioral Health
Risk Management Self-Assessment

The following tool is designed as a self-assessment for behavioral health services offered by senior care communities. This tool is not designed to evaluate all potential risks.

Written Program Plan

- ☐ A written Behavioral Health Program is in place that describes the scope of services provided, resident admission criteria, person-centered care planning, primary care provider and mental health provider care requirements, medication review and management, staff competency and training, unit staffing, therapeutic activities, resident discharge and transfer criteria and quality assurance and performance improvement monitoring
- ☐ The facility has contracted mental health clinical providers

Behavioral Health Policies and Procedures

The following policies and procedures are in place:

- ☐ A behavior management policy includes assessment, interventions, monitoring, a behavioral support care plan, and documentation, including pharmacological and non-pharmacological Interventions
- ☐ Managing suicide risk
  - ☐ The policy addresses recognition, reporting, and response
- ☐ Behavioral emergency
  - ☐ The policy includes care of the resident while managing the safety of other residents (e.g., one-to-one observation, calling 911, use of law enforcement)
  - ☐ Written transfer agreements are in place with facilities that have behavioral health units
- ☐ Psychotropic medications
  - ☐ The policy includes the frequency of medication review and provider follow-up
  - ☐ A process is in place for Gradual Dose Reduction (GDR) medication review of psychotropic medications
  - ☐ The policy addresses care planning requirements for medication “black box” warnings
- ☐ Restraint policy or restraint-free policy
  - ☐ The restraint policy addresses
    - ☐ Use of restraints – least restrictive
    - ☐ Provider orders
    - ☐ Resident monitoring
    - ☐ Resident consent
    - ☐ Quality review
    - ☐ Documentation
  - ☐ The restraint-free policy addresses least restrictive interventions
- ☐ The abuse, neglect and exploitation policy and procedure includes definitions, screening, training, prevention, identification, investigation, protection, and reporting/response

Pre-Admission

- ☐ Written admission criteria are in place
- ☐ Pre-Admission screening includes:
  - ☐ Medical history
  - ☐ Current medications including herbal supplements, over-the-counter medications, and illegal drugs
  - ☐ Behavioral health history
    - ☐ History of physical aggression
    - ☐ History of sexual aggression
    - ☐ History of abuse and neglect
    - ☐ Suicide risk and past history
  - ☐ Current behaviors
- ☐ Residents with a primary, unmanaged mental health diagnosis are not admitted
- ☐ A national sex offender screening is completed on all potential admissions
- ☐ A mental health professional and/or the resident's primary care physician is consulted prior to admission if the facility is uncertain about their ability to care for the resident

Admission

- ☐ Admission screening includes (unless previously obtained):
  - ☐ Medical history
  - ☐ Current medications, including new medications within the past 30 days
  - ☐ Behavioral health history
    - ☐ History of physical aggression
    - ☐ History of sexual aggression
    - ☐ History of abuse and neglect
    - ☐ Suicide risk and past history
  - ☐ Current behaviors

Resident-Centered Care Plan

- ☐ A resident-centered care plan is started on admission. The multi-disciplinary team is involved.
- ☐ Based on provider orders/recommendations and current history, a resident-centered behavioral support plan is developed on admission including behavior triggers/ antecedent events and interventions
- ☐ A behavior log is initiated per facility policy and procedures (as applicable)
- ☐ The resident-centered behavioral support plan is reviewed and updated at least quarterly and with change in condition
- ☐ The multi-disciplinary team is involved with development of the resident-centered behavioral support plan. The plan is reviewed for effectiveness on a scheduled basis

Therapeutic Programming and Activities

- ☐ Therapeutic programming and activities are designed to promote self-esteem and engagement, minimize boredom, and align with resident-centered behavioral support plans
- ☐ Activities are regularly scheduled and posted

Discharge/Transfer

- [ ] A written discharge/transfer policy is in place that includes resident care and safety prior to discharge or transfer, discharge communication with resident, family, provider and receiving facility and components of the resident-centered discharge plan

Environmental Safety

- [ ] Regularly scheduled environmental safety rounds are scheduled that include:
  - [ ] Resident rooms
  - [ ] Courtyards
  - [ ] Designated smoking areas
  - [ ] Common areas
  - [ ] Secured areas
  - [ ] Exits
- [ ] Window restrictors are in place to secure windows to a six-inch opening to allow for adequate ventilation but prevent resident exit
- [ ] Regularly scheduled preventative maintenance is documented and includes functioning checks on exit door alarms and electronic monitoring systems

Staff Training and Competency Validation

Staff training and competency validation includes, but is not limited to:

- [ ] Dementia care – understanding behavior
- [ ] Working with non-compliant and aggressive residents
- [ ] Least restrictive interventions
- [ ] Signs of escalating behavior and de-escalation techniques
- [ ] Recognition of depression and suicide risk
- [ ] Psychotropic medications and common side-effects
- [ ] Resident rights
- [ ] Abuse, neglect, and exploitation
- [ ] Resident behavioral emergency response
- [ ] Recognition and response for inappropriate sexual behavior

Risk and Quality Management

- [ ] Resident behavior events that result in injury to self or others are reported on an incident report
- [ ] The incident investigation addresses causal and contributing factors
- [ ] Resident behaviors are reviewed at morning meeting (e.g., new admissions, behavior incidents and residents with change in behavior)
  - [ ] The medical record is reviewed for complete documentation and the Care Plan is reviewed for updated interventions
- [ ] Weekly At-Risk Meetings address the effectiveness of interventions
- [ ] The Monthly (preferred) or Quarterly Quality Assurance and Performance Improvement (QAPI) Committee reviews patterns and trends related to behavior incidents and emergency transfers

Notes