NORTHERN NEVADA ADULT MENTAL HEALTH SERVICES

POLICY AND PROCEDURE

SUBJECT: MANAGEMENT OF HIGH RISK CONSUMERS

NUMBER: NN-RI-03

ORIGINAL DATE: 12/01/88

REVIEW/REVISE DATE: 04/16/90, 08/08/90, 04/22/92, 07/03/95, 11/05/98, 10/03/01, 12/02/04, 08/04/05, 05/01/08, 4/16/09, 6/21/12

APPROVAL: Cody Phinney, Agency Director

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I. PURPOSE

To protect individuals who have been deemed to be a significant risk to themselves or others.

II. POLICY

Northern Nevada Adult Mental Health Services will provide an appropriate level of intervention for consumers who, in the opinion of the attending physician, nursing or other clinical staff, are a significant risk of causing injury or death to themselves or others.

III. DEFINITIONS

1. One-to-One Observation for High Risk: The consumer is assigned to an individual staff member on each shift who remains within arms length of the consumer at all times.
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2. Line of sight observation: The consumer is assigned to an individual staff member on each shift and remains within sight of the staff member.

IV. PROCEDURE

1. One-to-One Observation:
   a. Physician orders for one-to-one observation shall be written for an indefinite period. The order only may be discontinued by a written order of the physician, and only after that physician has personally evaluated the consumer. Orders for 1:1 observation may include variations describing time and place when 1:1 is required or not (i.e., “1:1 while awake” or “when in room”). No verbal orders will be accepted to discontinue 1:1 observation. A progress note documenting the physician interaction is to be completed within twenty-four (24) hours.
   b. One-to-one observation requires 15 (fifteen) minute observation documentation on each assigned consumer.
   c. The one-to-one observation consumer may not leave the unit, except for clinic, lab, x-ray, or life threatening emergencies. This consumer must be escorted on a one-to-one basis and if a driver is needed, this person is in addition to the escort (total of two staff). At least one of the accompanying staff is to be of the same gender as the consumer.
   d. The one-to-one observation consumer will sleep in the video monitored room while on such precautions, with a staff member in attendance.
   e. Documentation requirements include:
      i) An RN and/or MHT initialed the fifteen (15) minute checks on the MR 113 “Observation/Documentation Record.”
      ii) Progress notes at least three (3) times per day/once each shift. A minimum, one of the (3) notes is to be written by an RN.

2. Line of sight observation:

   a. Orders for line of sight observation shall be written for an indefinite period. Orders for 1:1 observation may include variations describing time and place when 1:1 is required or not (i.e., “1:1 while awake” or “when in room”). Line of sight observation will be discontinued only by written order of the physician and only after that physician has personally evaluated the consumer. A progress note is to be completed within twenty-four (24) hours documenting consumer interaction. No verbal orders will be accepted to discontinue line of sight observation.

   b. Line of sight observation requires dayroom restriction except for meals, medical and life threatening emergencies.

   c. Must be escorted by the assigned staff member to bathroom, showers, medication area and groups as assigned.

   d. Documentation requirements include:

      1. An RN and/or MHT initialed the15 minute checks on the MR 113, “Observation/Documentation Record”.

      2. Progress notes at least three (3) times per day/once each shift. At minimum, one of the (3) notes is to be written b y and RN.

3. Q 15 minute checks: All consumers on all units will be checked every 15 minutes for location and activity.

   1. Initialed 15 minute checks on the Patient Rounds Checklist.

4. General Procedures:

   a. All consumers in inpatient or POU shall be required to surrender all potentially dangerous or lethal instruments. This includes, but is not limited to, shoe laces, belts, and suspenders.

   b. If the consumer wears glasses, staff will assess the safety of allowing the consumer to wear the glasses and the difficulty that the consumer will face if the glasses are removed.

c. When a consumer is on one-to-one, group observation, or line of sight, special attention shall be given to ensure that medications are actually taken and not hoarded or cheeked. If any staff member has reason to believe that the consumer is not swallowing medications given in tablet or capsule form, the attending or O.D. physician will be notified immediately, and the Physician will consider giving medications in liquid, quick dissolve or IM form. Consumers shall not be given medication while having gum, food, etc., in their mouths.

d. Any staff member who has reason to believe that a consumer intends to injure himself/herself will immediately inform the Registered Nurse (R.N.) on the consumer's unit.

e. The R.N. will assess the consumer for lethality (thought, intent, etc).

f. The R.N. shall then notify the attending physician of their assessment and the physician shall issue an appropriate order.

g. The staff member should clearly identify his/her safety reasons for requesting special precautions in the consumer's medical record.

h. The physician will re-evaluate the consumer’s need for one-to-one or line of sight daily and document this evaluation in the progress notes.

i. If, on weekends, the nurse believes that special precautions are no longer necessary, the nurse will contact the on-duty physician who will then evaluate the consumer in person and decide whether a less restrictive treatment may be utilized.

j. In the management of a high-risk patient, accuracy in documentation is vital. Care should be taken to provide detailed information in every shift report, staff to staff hand off and on the MR 113 specifying the consumer’s risk factors and behaviors.

k. The physician may order a physical inspection of the consumers to ensure that he/she is not hiding items. A nurse or the medical physician will conduct such inspection, and a second staff person will be present to assure safety of consumer and staff. At least one of the staff members will be the same gender

as the consumer. This inspection includes between the gluteal folds, between labia, the under surface of the penis and scrotum, soles of the feet, and along all surfaces of the arms and legs.