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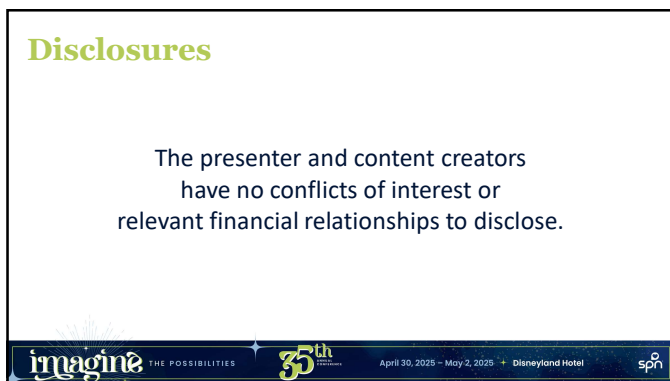
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## Background

- **Global Behavioral Health Crisis**
- **Safety Threats** = Non-psychiatric patient care environment
- **Quality Care** = Competency needs of non-psychiatric nursing staff

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## Project Planning

- **Identify**
  - Needs, Barriers & Return on Investment
- **Support** from Key Stakeholders
- **Design, Develop & Deliver**

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## Return on Investment

-  99.5% of staff reported they felt more or much more prepared
-  Staff survey identified most supportive elements from experience driving future competency education design and delivery
-  Staff survey completed 3-6 months after attending simulation captured practice change
-  Comparative Analysis pre and post program demonstrated decreased events involving unsafe items in patient care areas

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Education and Competency Validation Highlights

Summer 2023 Learners complete a one hour live/Zoom education session

Fall 2023 participate in a Personal Belongings and Room Search competency validation simulation

After participating in both Education and Simulation RNs awarded 2.0 NCPD Education Hours

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Goals and Objectives

Learners will be able to describe the process for conducting a Personal Belongings & Room Search

Learners will be able to identify the steps for performing a mouth check following a medication administration

Learners will demonstrate competency conducting a Personal Belongings & Room Search through simulation or live demonstration

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Education Content and Tool

Personal Belongings and Room Search

Purpose

- A proactive task
- Provides a safe environment for the patient & staff

What Patient Requires this Search?

All patients who are awaiting psychiatric placement

Who Conducts the Search?

A registered nurse (RN) is responsible of completing this search and documenting it in the medical chart. Requires only one RN to complete the search, but the following staff may assist the RN with searches:

- A registered nurse
- Non-licensed assistive personnel
- Behavioral Response Team

When is the Search Conducted?

Upon admission

At minimum, once a shift

Transfer into a new room

All bags/items entering room

Three Elements of the Search

1 Environment

- Visually inspect periphery of room & bathroom
- Search all furniture, chairs, drawers, etc.
- Look for ligature risks, sharps, medications, etc.

2 Belongings

- Inspect all bags, personal/hospital items
- Search and shake out all books, reading materials
- Inspect all clothing, search seams/pockets

3 Pocket

- Ask patient to remove any items from pockets
- Patient pulls out pockets or put flat to illustrate empty

Key Points for a Successful Search

- Use Red Zone principles to avoid distractions: Don't rush
- Don't gloves: Look for contraband & items that place harm to patient / staff
- Look Listen and Feel: "Never stick your hands where your eyes cannot see"
- Turn on room lights or use flashlight on Spectra Line phone to inspect dark areas
- Look out for items that have been removed with / could be a good hiding spot
- Resistance: validate feelings & reiterate, "searches are to keep everyone safe"
- Agitation or Safety Concern: pause, ask for an additional staff member/BRT to assist you, but do not leave patient alone in the room

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Education Content and Tool

Staff Introduction

ALL staff present introduces self & role before beginning the search.

"Hello, (patient name). My name is (staff name) and I'm your (state role) for this

Introduction to Search

ALL staff present for the search will introduce self and their role.

"I am going to do your room and belongings search now. This is something that your nurse will do once a shift that means probably once in the morning and once in the evening."

A Belongings and Room Search is a check of all of the things in your room, however we want to make sure that your space is kept safe."

"I will check your bed and sheets and ask you to pull out your pockets to show that they are empty. Then I will check the items in your room and bathroom."

"If we need to have the team check some items, I will take them out of the room to do that."

"Do you have anything that may be unsafe, that could harm you or someone else, or should not be in the room you would like to give to me now before we begin? Do you have anything that is special to you, that I can check first?"

"Do you have any other questions before I begin?"

Frequently Asked Questions

Where are you taking my stuff?

- Just outside the room so your team can help check them.
- If any of the items are unsafe to have in your room at this time, your team will come talk to you, and your items will be kept safe in a locked area.

Why is that unsafe?

- There are some things that can be unsafe in the hospital and sometimes, some things may need to be kept outside of your room while you are not using them.

I am not a little kid. Why are you taking my stuff?

- I recognize that you are not a little kid, and this may be frustrating for you. This is a standard safety procedure for everyone.

You are not searching through my stuff.

- I can imagine this may be frustrating for you.
- A lot of people and items come in & out of rooms in the hospital, so we do regular safety checks.
- We want to make sure that your space is kept safe.

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Room Search

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Key Points for Conducting a Room and Personal Belongings Search

⌚

Don't rush: Take your time: Looking for contraband: pills/other items potential harmful to patient or staff

⚠️

Use Red Zone: Don't let patient or family distract you during search/ Communicate simply "search is to assure patient safety", remember patient relations "Safety Trumps Rights".

🧤

Always Use gloves

👁️

Look Listen and Feel! Remember "never stick your hands where your eyes can not see".

💡

Turn on room lights and additionally use flashlight on Spectra Link phone to inspect dark areas (behind and under beds/ underside of table/closets/ draws)

🔍

Keep a careful look out for items that have been tampered with or could be a good hiding spots. Never assume items are fine, patients are creative"

🗣️

Notify and involve patient. Can be flexible but patient needs to understand it is happening.

🚶

If any patient provides push back or escalates, pause, make sure a second staff member remains in room then excuse yourself and involve BRT/ Security but do not leave patient alone in the room

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# Knowledge Assessment


**BREAKOUT ROOMS**



**Case Study Example**  
Chad is a 15-year-old male with active suicide ideation



**History**  
Depression, Anxiety, Attention Deficit Hyperactive Disorder




**Evaluation**  
Patient admitted to Intermediate Care Program (ICP) for a Tylenol ingestion. Chad is being transferred to 7 West. Per report patient has reportedly been quiet, pleasant and compliant with cares. They have a Patient Observer at the bedside.

**Break Out Room Assignment**


1: Identify a group recorder

2: Discuss

- Safety concerns
- Care plan for patient
- Environment of care modifications
- Education for patient & family
- Delegation report for Patient Observer




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# Competency Validation

**STANDARDIZED PATIENT SIMULATION**





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Room Search Participant Competency Validation Check List	
<b>Demonstrated Personal Safety Measures</b>	
<input type="checkbox"/> Donned gloves	
<input type="checkbox"/> Look Listen and Feel! Didn't stck hands blindly into spaces where eyes couldn't see	
<input type="checkbox"/> Use of Red Zone principles to avoid distractions; Didn't rush	
<b>Demonstrated Mastery of Environment/ Bed space/ Belongings (detailed checklist to perform)</b>	
<b>General Environment</b>	
<input type="checkbox"/> Visually scanned and inspect the periphery of the room	
<input type="checkbox"/> Looked around walls, windows and door frames	
<input type="checkbox"/> Looked for loose ceiling tiles	
<input type="checkbox"/> Looked for cords/ligature risks and unnecessary medical equipment present in the room	
<input type="checkbox"/> Looked for tampering or loose outlet covers, heating/AC vents	
<input type="checkbox"/> Assessed bathroom for unsafe items and potential ligature risks	
<input type="checkbox"/> Looked in trash barrels/ remove plastic liners	
<input type="checkbox"/> Assessed for any metal shower curtain hooks, door hooks, and shower hose	
<input type="checkbox"/> Looked through drawers, books, and items on bedside table for any potential hidden unsafe items	
<input type="checkbox"/> Checked under chairs, parent cot and any other furniture	
<b>Bed space</b>	
<input type="checkbox"/> Checked bed and under mattress	
<input type="checkbox"/> Turned on room lights or use flashlight on Spectra Link phone to inspect dark areas	
<input type="checkbox"/> Removed pillowcases/turn inside out, and then inspect the pillow by actually feeling the pillow	

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	<div>and the seams</div> <div><input type="checkbox"/> Inspected bed linen/ roll back fitted sheets.</div> <div><b>Bags and Patient Personal Belongings (Inspected and removed unsafe items)</b></div> <div><input type="checkbox"/> Identified items that were tampered with / could be a good hiding spot</div> <div><input type="checkbox"/> Checked through bags including all pockets</div> <div><input type="checkbox"/> Inspected shoes; removed shoes with laces</div> <div><input type="checkbox"/> Inspected clothing (Look in cuffs, sleeves, collars, thick seams, turn socks, gloves &amp; pockets inside out)</div> <div><input type="checkbox"/> Assessed for strings and straps (if strings/ straps present provided patient the option to have strings/ straps removed or stored in safe location outside of room)</div> <div><input type="checkbox"/> Flipped through pages of books</div> <div><input type="checkbox"/> Used critical thinking on determining which and how many toys/activities are safe and appropriate to be in the space</div> <div><input type="checkbox"/> Refolded and replaced clothing and personal items to pre-search state</div> <div><b>Communicated and engaged patient effectively with patient</b></div> <div><input type="checkbox"/> Introduced self &amp; support staff</div> <div><input type="checkbox"/> Introduced and normalized search messaging/ ordered once a shift for all patients to maintain safety</div> <div><input type="checkbox"/> Was transparent with patient regarding elements of search and what to expect</div> <div><input type="checkbox"/> Engaged &amp; partnered with patient, (demonstrated compassion, provided opportunity for patient to share unsafe items</div> <div><input type="checkbox"/> Responded to patient resistance: validated feelings &amp; reiterated theme, "searches are to keep everyone safe".</div>	
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### Actionable & Reproducible Strategies


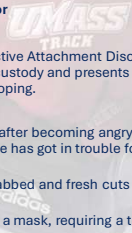
SPRINT SIMULATION




**Leah is a 13-year-old female with Self-Injurious Behavior**  
( Risk: Cutting & ingesting non-food items)

**History** :Post Traumatic Stress Disorder, anxiety, and Reactive Attachment Disorder (RAD) who is in Department Children and Families (DCF) custody and presents to the Emergency Department (ED) from her group home after eloping.

**Evaluation** :

- During her evaluation she reports that she ran away after becoming angry with a peer and subsequently breaking a window, which she has got in trouble for multiple times.
- She reportedly presented to the ED with multiple scabbed and fresh cuts on her arm.
- While she's in the ED, she swallowed the metal from a mask, requiring a trip to the Operating Room for foreign body removal.



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### Supplies to Build Your Own Simulated Experiences



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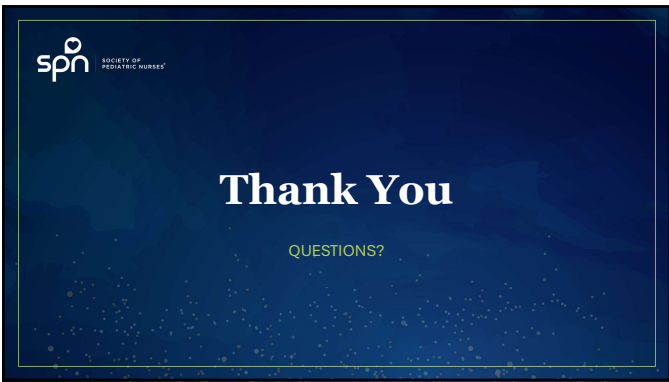
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