

## Select Committee on Quality Improvement of State Hospitals

### WESTERN STATE HOSPITAL

### SAFETY & SECURITY UPDATE

June 30, 2016

#### Violence Reduction

- Assigning staff to focus on strategies
- Researching effective interventions that target violence, and precipitating factors among mental health patients.
- Piloting an IBRU
- Focus on 4 areas of violence reduction
  - Administrative- PERT, Policy Development
  - Patient focused-(Intensive Behavioral Rehabilitation Unit (IBRU), Evidence Based Treatment, Drug intervention
  - Staff focused- Site Safety Surveys, Place Safety Huddles, Situational Awareness training, Team Training
  - Environment focused-
    - Movement control
    - Improve Lines of sight
    - Staffing improvements during movement
    - Access control

#### Expansion of Emergency Management-

An Emergency Management Director was hired and starts on July 1.

- Focused effort to train all staff in ICS 700,100
- Staff assigned to an EOC (our incident management team ), 700, 100, 200, 300 and 400
- Command Staff training 700, 100, 200.
- Focus on safety, initial on-scene, and incident response.
- She will be collaborating with emergency services agencies to support the hospital.

#### Security Restructure

- Redefining the scope of work for Security
- Redeploying staff and auditing the model
- Add a visitors center to the hospital- badging all visitors

### **Update the Escape/UL policy-**

- Includes the establishment of escape posts, building escape kits
- Develop and escape preparedness and exercise program that exercises our ability to respond
- Develop a Quadrant system for in community response
- Work with community partners for improvements
  - Collaborate with Lakewood PD, Steilacoom PD, University Place and DuPont PD.
  - Collaborate with Steilacoom high school admin, Pierce Transit, Pierce College, and the Parks department.

**Security Management Plan-** The security organization is working to develop a Security Management Plan (SMP) designed to be a proactive approach in the protection of patients, visitor, staff and health system assets. The plan will describe how the hospital will implement security requirements (promoting safety and preventing escapes) through the use of:

- an established security organization,
- the use of security equipment and technology,
- the training qualification of security personnel,
- the implementation of predetermined response plans and strategies,

**Security Assessment** -The elements are established by evaluating the feedback from self- assessments and 2016 Washington State DOC Assessment. Developing Plan of Correction .

### **Action Items-Physical plant recommendations –**

- Working with external consultants to provide recommendations for exterior window security installation changes.
- Reviewing and recommending locking system alterations in Escape risk areas
- Making recommendations for fencing modifications
- Install new key cores in over 289 doors on the wards.
- Install Key Access for elevators.
- Evaluate the use of Key Cards (Proximity Cards) in areas that access key watchers.
- Reduce the number of active gates inside the quadrangle park
- Add additional fencing to the quadrangle park area by the infinity center.
- Entering Phase I of the Personal Duress Alarm system expansion.
- Adding Poly Carbon glass to the Communications Center (Impact resistant glass).

### **Inspection Programs**

Establish a stronger security inspection/search program.