

# Select Committee on Quality Improvements in State Hospitals

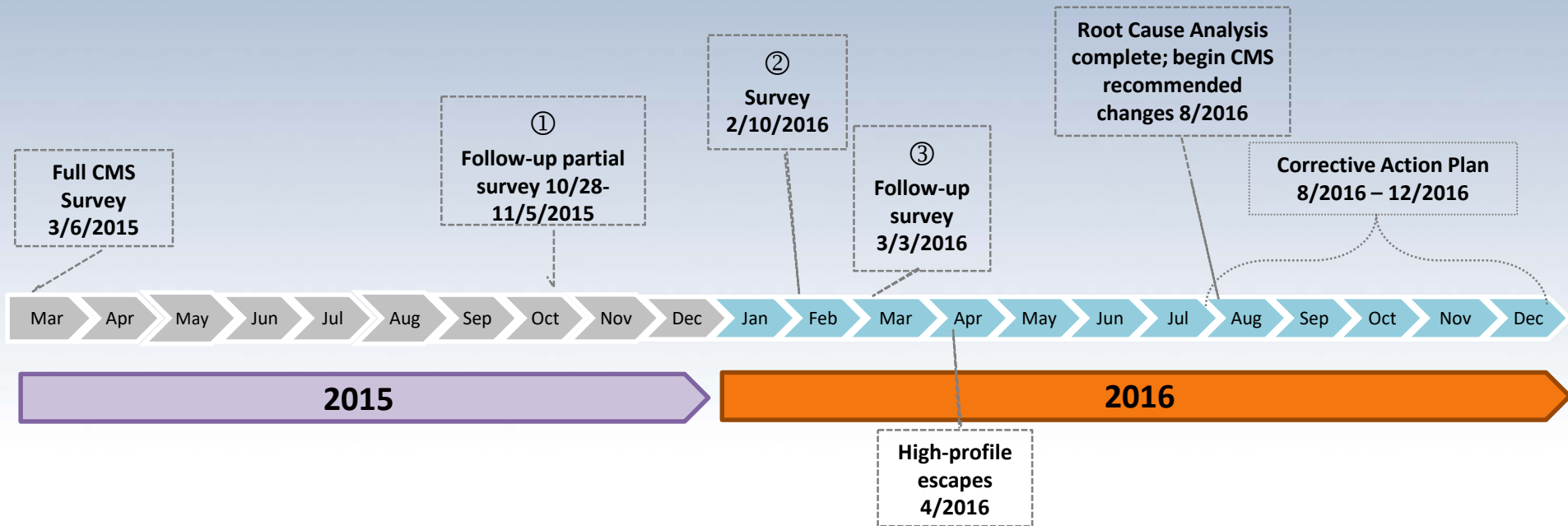
July 24, 2018

***Mission: Transform lives by supporting sustainable recovery, independence and wellness***

# **History of System Improvement Agreements & CMS Surveys at Western State Hospital**

Cheryl Strange, Secretary  
Department of Social & Health Services

# Systems Improvement Agreements at Western State Hospital



## 2016 – Root Cause Analysis

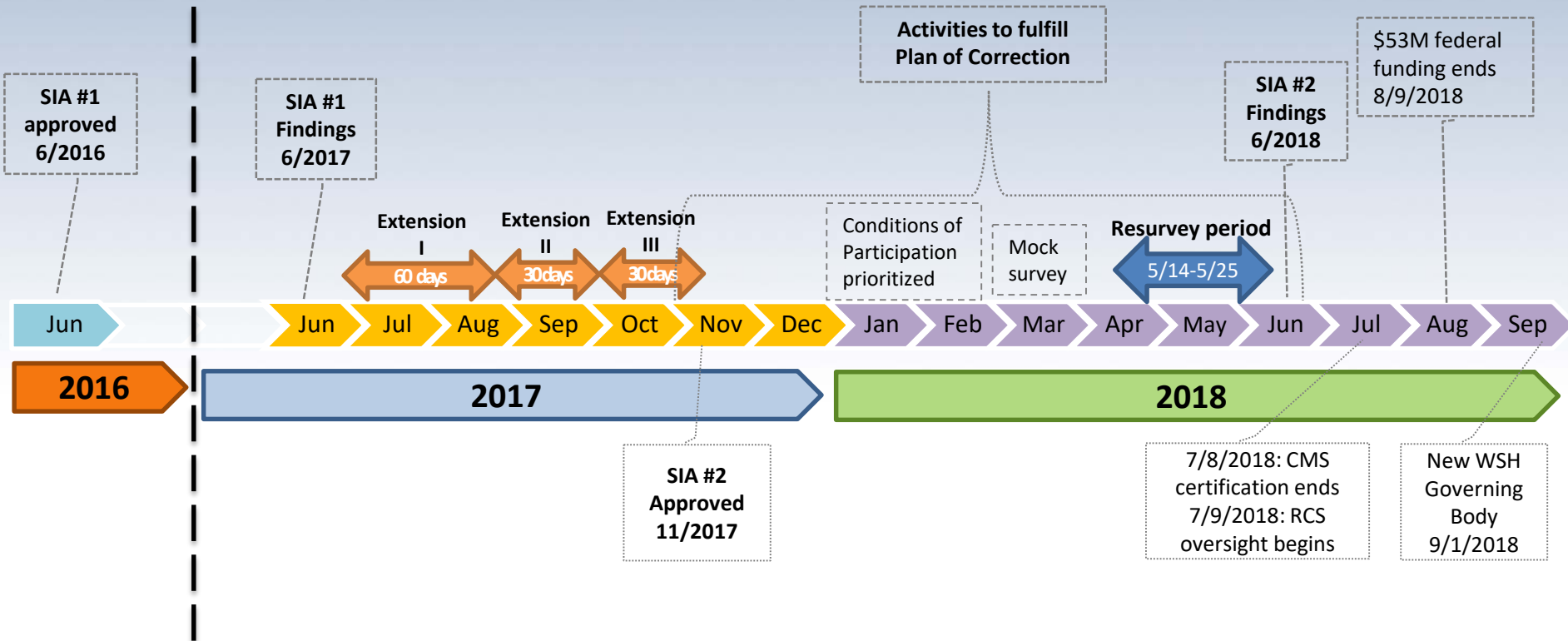
- Significant budget cuts
- Elimination of direct care positions
- Severe physical plant neglect
- Unmanageable set of responsibilities
- Autocratic, micromanagement leadership
- Lack of accountability at ward level

264  
Recommendations

7 Conditions of  
Participation

16 Workgroups

# Systems Improvement Agreements at Western State Hospital



## WSH: Condition and Standard Level

Citation type		Oct 2015 partial survey	May 2017 full survey	May 2018 full survey
		# of Citations	# of Citations	# of Citations
<b>CONDITION LEVEL</b>	Hospital operations deficiencies (A Tags)	5	9	4
	Psychiatric hospital deficiencies (B Tags)	3	0	0
<b>STANDARD LEVEL</b>	Life Safety deficiencies (K Tags - typically fire safety physical plant-related such as sprinklers, doors, electrical equipment, alarms, etc.)	N/A	24	17

# 2018 CMS Survey Results, Improvement Activities

Cheryl Strange, Secretary  
Department of Social & Health Services

Dave Holt, Interim Chief Executive Officer  
Western State Hospital

Sean Murphy, Chief Safety & Security Officer  
Western State Hospital

Joyce Stockwell, Deputy of Hospital Operations  
Western State Hospital

## May 2018 Survey

- 22 surveyors
- 4 of 26 Conditions of Participation not met
  - Physical environment
  - Nursing services
  - Quality Assurance Process Improvement (QAPI)
  - Governing Body



## **Governing Body / Quality**

- Conditional level citations in ANY area trigger automatic citations in Governing Body and Quality Assurance Process Improvement

## Nursing

- Staffing and Delivery of Care
- RN Supervision of Nursing Care
- Documentation
- Accountability Plan

## Physical Environment

- Life Safety
- Safety
- Maintenance
- Security

## Accountability at Western State Hospital

- Hospital-wide framework
- Quality audits
- Daily report-outs
- Focus on results, not process

# Regulatory and Other Oversight

Cheryl Strange, Secretary  
Department of Social & Health Services

Candace Goehring, Director,  
Residential Care Services,  
DSHS Aging & Long Term Services Administration

- Governing Body expansion
- Audit and oversight – maintaining a CMS standard of care; determine next steps for accreditation/certification
- Mandatory reporting of abuse, neglect & financial exploitation

## External Monitoring

- GOAL: Be a safe and compliant hospital
- West Pierce Fire
- DOH – pharmacy, individually-licensed providers, food service
- L&I – safety in the workplace
- Eastern State Hospital and Child Study & Treatment Center
  - ★ Accredited by the Joint Commission
  - ★ Certified by CMS

## ALISA/Residential Care Services

- State agency for CMS, has regulatory authority over nearly 4000 facilities and agencies with capacity of 72,000 residents
  - Adult Family Homes
  - Assisted Living Facilities, Nursing Homes
  - ICF/IID facilities
  - Supported Living Agencies
  - Enhanced Services Facilities
- Field staff include surveyors/licensors and investigators; WSH team is starting with six staff
- Complaint Resolution Unit is responsible for intake and processing of complaints for investigation
- State Hospital WAC

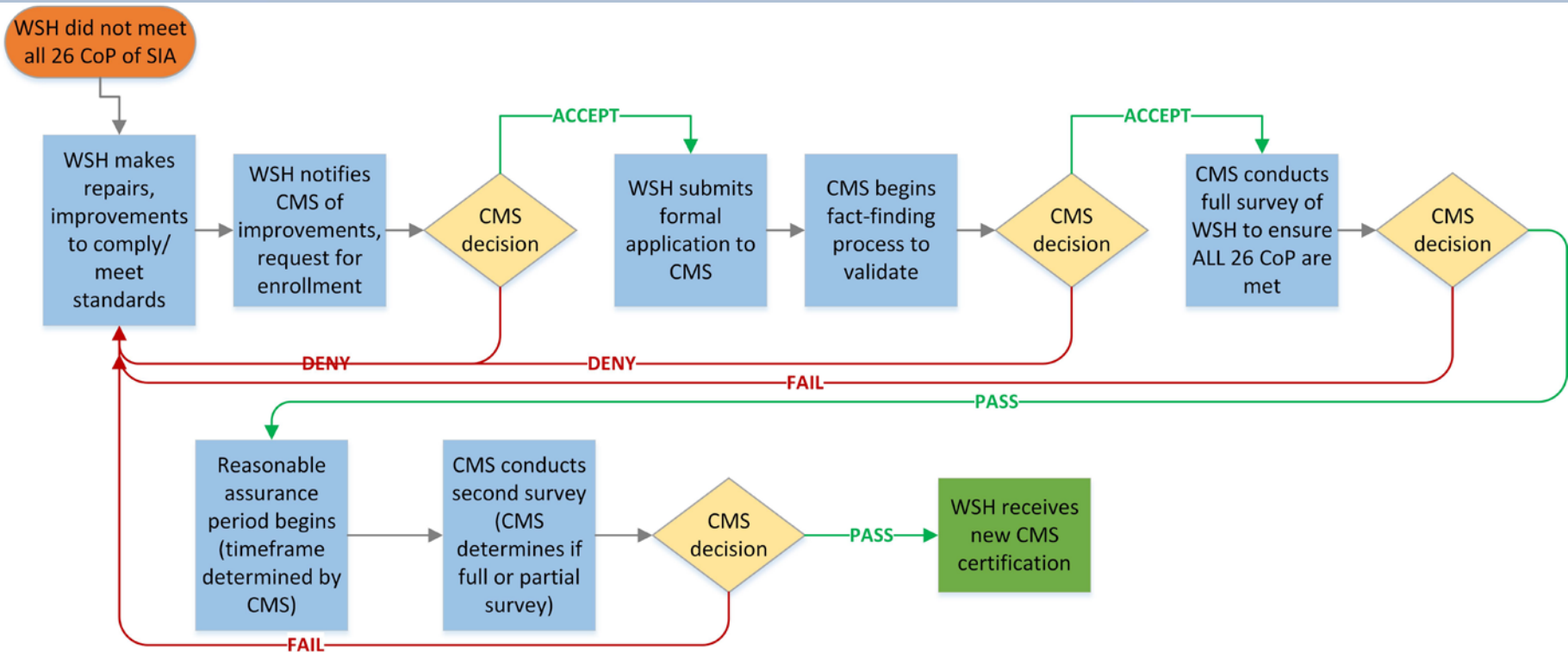


# Next Steps

Rashi Gupta, Senior Policy Advisor  
Office of the Governor

Ken Taylor, Assistant Secretary  
DSHS Behavioral Health Administration

# Hospital Certification



# Thank You

**Ken Taylor, Assistant Secretary**  
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