

St. Patrick Hospital
Providence

Missoula, Montana

October 24 & 25,

2023

Site Inspection Conducted by the Mental Disabilities
Board of Visitors

Jeremy Hoscheid

Jeremy Hoscheid, Executive Director

INTRODUCTION

Mental Health Facility reviewed:

St. Patrick Providence (Missoula)

Jeremy Williams, Director of Psychiatric Services

Authority for review:

Montana Code Annotated, 53-21-104

Purpose of review:

1. To learn about services provided by St. Patrick Providence in the Neurobehavioral Unit and the Providence Psychiatry Outpatient Clinic.
2. To assess the degree to which the services provided by St. Patrick Providence are humane, consistent with professional standards, and incorporate Mental Disabilities Board of Visitors standards for services.
3. To recognize excellent services.
4. To make recommendations to St. Patrick Providence for improvement of services.
5. To report to the Governor regarding the status of services provided by St. Patrick Providence.

Site Review Team:

Board:

Aaron Atkinson, Board Member

Consultants:

Teslynn Anderson, LCPC

Carter Anderson, MBA

BOV Staff:

Jeremy Hoscheid, Executive Director

Vera Good, Patient Advocate

Review process:

- Interviews with St. Patrick Providence staff and clients
- Review of treatment activities, tour of St. Patrick Providence facilities
- Review client treatment plans
- Review policy and procedures, organizational structure

Overview

The Mental Disabilities Board of Visitors (Board) conducted a site review of St. Patrick Hospital Providence in Missoula on October 24 & 25, 2023 per M.C.A. 53-21-104. The Board reviewed the inpatient and outpatient treatment programs offered at the hospital. The Board was able to tour the different units, interview both patients and staff, review client treatment plans, and review organizational policy and procedures.

Mission: As expressions of God’s healing love, witnessed through the ministry of Jesus, we are steadfast in serving all, especially those who are poor and vulnerable.

Values: Compassion Dignity Justice Excellence Integrity

Vision: Health for a Better World

Promise: “Know me, care for me, ease my way.”

Services Provided:

Providence Psychiatry & Counseling – outpatient care with a team of licensed psychiatric providers (MD, PA, NP, LCSW, LCPC etc.)

Neurobehavioral Inpatient Medicine (NBMI) – Adult Inpatient care with a team of licensed psychiatric providers (MD, PA, APRM, LCSW, RN, CNA etc.)

Adolescent Inpatient Unit (AIU) – Adolescent Inpatient care with a team of licensed psychiatric providers (MD, PA, APRN, LCSW, RN, MHS etc.)

Adolescent Partial Hospitalization Program (APHP) – Partial care in which adolescent students attend the hospital during the school day while schools are in sessions for mental health treatment along with co-occurring schoolwork.

Electro-Convulsive Therapy (ECT) Services – ECT treatments are provided as both inpatient and outpatient.

St. Patrick Emergency Department Orange Zone – Patient is admitted to the Psychiatric Emergency Department (Orange Zone or OZ) when facing immediate psychiatric crisis.

Youth Crisis Diversion Project – Crisis Facilitation that assists family’s with navigating resources and guiding to meet the family’s need.

Youth Crisis Response in School – The Youth Crisis Response in School LCSW works in tandem with the Youth-Crisis Diversion Project to serve a different patient population with a school-based focus vs. community-based focus.

Organizational Planning and Quality Improvement

St. Patrick Providence provided the Board with a strategic plan that covers the Providence Medical Group System as a whole and then drills down to the specific service line within the St. Patrick Hospital, including inpatient and outpatient services. Given the larger system that St. Patrick Providence operates in has some definite strategic advantages as St. Patrick Providence can rely on and partner with the sister hospitals within the Providence System.

St. Patrick Providence has a streamlined Strategic Planning Process that collaborates with its main facility as well as with the Providence organization. A strategy officer assists the mental health services with their planning and coordinates with the other programs both locally and system wide. Hospital leadership appear to value the input from the local managers. Local managers are directly involved in the planning process, beginning with the needs assessment as well as participation in quarterly community meetings with NAMI, community providers and local advisory councils. Plans are reviewed on a quarterly basis by the local management Team and communicated to Providence and St. Patrick leadership. The strategic planning process is fluid enough to allow for flexibility in the development of new services and other needs within the community. During covid, the outpatient services were able to adjust their plan to provide telepsychiatry services in an effort to continue services to patients in the community in a timely and effective manner.

The operational plan is identified within the strategic plan and the operations piece is pulled out of that plan. Time frames and responsibilities are implemented depending on the project and the size and scope the project entails..

For Quality Improvement St. Patrick Providence utilizes patient survey and caregiver surveys. Included in the Quality Improvement is the High Reliability Organization (HRO). These teaches staff members to be looking ahead. The QI process is regularly evaluated, and changes are made as needed. One recent change was the implementation of early morning huddles for both service lines.

Typical responsibility of the QI process is handled by the charge nurse. The hospital also utilizes the relationship security staff have with the patients along with offering de-briefing huddles after traumatic events in order to limit secondary trauma. St. Patrick Providence provides a specific therapist on-site whose only role is to provide services to employees who need this service.

The QI process continually shows direct effects to the health and functional outcomes for clients. This includes tracking medication errors, restraints, falls, and re-admissions. Staff reported that these metrics were effective and utilized regularly by staff.

St. Patrick Providence is committed to quality improvement using patient and caregiver surveys, as well as the implementation of a HRO (Higher Reliability Organization) program that involves the entire leadership, management, and front-line staff. St. Patrick Providence has a commitment to Zero harm and a fully functional culture of safety through the use of HRO standards and effective date of collection.

The management team prioritizes collection of data on restraints, re-admit, falls, and med-errors, and can show improvements in all areas. They were also able to demonstrate data on patient and caregivers' satisfaction as well as key areas for overall management of the facility and process improvement.

Rights, Responsibilities, and Safety

Upon admission into services, a staff member from St. Patrick Providence will go over the admission paperwork as well as the individual patient rights and responsibilities. St. Patrick Hospital Providence clearly defines the individual patient rights and responsibilities in both verbally and in writing located in the patient handbook. Patient rights and responsibilities also are reviewed during community meetings and as certain situations occur.

St. Patrick Providence did have displayed information regarding the Mental Disabilities Board of Visitors displayed. This information does not appear in the individual patient handbook. The Board would recommend adding the contact information for the independent advocacy agencies, Mental Disabilities Board of Visitors, Mental Health Ombudsman, and Disability Rights into the patient handbook.

Patients are supplied with an admission handbook that outlines grievance policies and the patient's rights and responsibilities. Standards and expectations are reviewed with patients daily at a community meeting held on the units for both the adult and the adolescent programs. Grievance forms are supplied to all patients and are reviewed within 24 hours by management staff. Follow-up is provided to patients and a copy of all grievances are shared with the hospital risk management program. Patients stated they were aware of the grievance forms and understood the process. Patients stated that they felt staff really did try to help them resolve any issues that come up.

St. Patrick Providence has policies and procedures, which fully implement the requirements of Section 53-21-107 MCA, for detecting reporting, investigating, and determining the validity of and resolving all allegations of abuse and neglective individuals. St. Patrick Providence

Staff receive ongoing training to safely respond to and understand difficult behaviors and complex patients. Staff interviewed reported familiarity with de-escalation training and presented them with an overall sense of safety while at work.

St. Patrick Providence has policies and procedures for the use of special treatment procedures that involve behavioral control, restraints, PRN medications, etc. establishing that patients are properly monitored during critical events.

As a HRO, debriefings for patients after critical events are provided and follow-up is provided throughout the course of treatment. The facility has what is referred to as a 4H team to do formal debriefings with both patients and staff.

The facility provides appropriate training for de-escalation and physical management through its NVCi program and supplies skills fairs specific to each discipline for additional training in de-escalation and mental health specific areas.

Individual, Family Member, Guardian Participation

Family and guardians are involved in the treatment plan process for each patient. St. Patrick Providence encourages as much involvement of family members in the treatment as clinically appropriate for the individual. If adult patients do not have family members, the hospital encourages the individual's natural support to be involved in the treatment plan. The nurse on shift or the primary social worker is the primary point of contact for the family member/guardians.

During assessments, treatment planning sessions, and treatment reviews, individuals and family members/guardians meet with the nurse, psychiatrist, and social worker. Each team member has a specific role in developing the treatment plan. The nurse handles the patient orientation, PHQ-9, and CSSR. The Psychiatrist is responsible for the diagnostic piece of assessment. The social worker is responsible for completing the social history, substance abuse history, along with cultural and religious preferences.

The treatment plans reviewed were person centered and note the support structure outside the hospital. St. Patrick Providence provides copies of the individual's treatment plan to the individual and then also the family member/guardian upon consent.

During the individual's treatment stay at St. Patrick Providence, there are several opportunities available for parents/family members to participate in. Upon discharge patients and families are given a survey to complete. A Nurse Educator follows up with individuals and families after discharge. This additional follow-up is helpful in coordinating aftercare referrals and working to try to find the best fit for aftercare services.

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Cultural Effectiveness

St. Patrick Hospital Providence does have a policy specific to Cultural Competencies. This policy states that all psychiatric services staff members complete cultural competency training and provide culturally appropriate and sensitive treatment services and interactions with all patients and their families.

St. Patrick Providence does provide staff with multiple opportunities throughout the year for trainings related to cultural effectiveness. Some of the training topics include Putting Cultural

Humility into Practice, Care of LGBTQIA+, Trauma Informed Care, and Going Beyond Pronouns.

Staff expressed to the Board the desire to have more historical cultural competency-based training available to them, so they have a better understanding of how to help a culturally diverse patient. Helping staff become more familiar with minority groups in the area would enhance staff's ability to build rapport to strengthen the therapeutic relationship. One staff member expressed the importance of teaching staff how to be cognizant of the historical oppression of minority groups, such as developing deeper empathy around why indigenous patients often struggle to trust hospital staff.

Staff agreed that it would be beneficial for there to be a specific plan in place to address a patient's cultural needs and beliefs. Staff stated that they try to accommodate and honor special requests such as smudging, and that there was a spiritual counselor that comes and meets with patients on average once a month. There is also a non-denominational Chaplain group available to patients.

The Board recommends that St. Patrick Providence contract with local individuals or recognized experts who are historically culturally competent and could provide additional training opportunities for staff and assist in development of cultural effectiveness plan.

Staff Competence, Training, Supervision, and Relationships with Residents

St. Patrick Providence defines optimum knowledge and competence expectations as noted in the job descriptions provided to the Board.

St. Patrick Providence have an extensive orientation and training program for staff that allows for 4 weeks of orientation training for nurses, as well as for direct care staff. For Nursing staff with limited experience, there is a resident program that provides core fundamentals and ongoing oversight. A preceptor is provided for staff to document Core Competencies throughout the initial 4-week orientation period. Core competencies are documented and maintained as a part of an employee's file. All Staff are provided with the required orientation training but are also offered numerous additional training opportunities either online or in person. Staff performance is monitored throughout the year and documented in a formal annual assessment. Facility leaders are offered additional training in the form of a "Leadership Fellowship Program".

Staff appeared to be actively engaged in the treatment and treatment process for their patients, including the Psychiatric providers, Physical Health providers, therapist, nursing and the direct care staff. The professional staff interact with both direct care staff and clients both individually and at a unit base council meeting. Direct care staff and nursing had positive comments about their relationships with the supervisors, administrative leadership, and their ability to access in communicating with them.

Patients interviewed seemed consistently pleased with the services and seemed very positive about their interactions with the staff. The Board noted that staff members displayed warm interactions amongst each other. Patients in an inpatient treatment setting are better able to regulate and heal when they have these skills being actively modeled to them in real life situations. It was clear to the Board that the staff are genuinely empathetic people and their compassion for all human beings is displayed in their 1:1 interaction with patients.

All staff interviewed described having a nonjudgmental view of their patients and spoke positively of other staff. It was discovered that staff often donate things from home to meet the needs of the patients (such as winter clothing). Although staff will do almost anything to make sure the ball doesn't drop when it comes to the care of their patients, it's important to remember that burn-out culture can thrive in an environment where staff is taking on more responsibilities than their job description. Implementing a case management program would lighten the load for clinical professionals who report doing case management duties that takes time and energy from clinical services. Effective case management is crucial for successful referrals and discharges.

The work environment throughout the hospital appeared and was reported to be positive. Efficient hiring was majorly credited for the positive work culture. The hospital hires individuals who have values and beliefs that align with the vision of the hospital. The overall culture of the hospital matched the vision of the hospital (health for a better world). It was evident that staff truly had empathy and compassion for one another as well as the patients. When an issue arises, staff works together to quickly identify and implement solutions rather than outwardly pointing blame and causing unnecessary negativity.

Treatment and Support

The Board reviewed a sample of patient treatment plans from the different treatment programs being reviewed. The treatment plans appeared to be patient centered and the goals were individualized, patient driven, and included a discharge plan for the patient. The treatment plan is developed within 24 hours and reviewed every seven days but can be reviewed sooner if the team feels it is warranted.

A physical/medical examination is completed prior to the individual patient being admitted into the unit. This examination is complete in the St. Patrick Emergency Department Orange Zone, or OZ. This department is a psychiatric specific emergency department.

The group schedule was available for patients to see throughout the unit to help build healthy routines. Patients report getting a lot out of group and individual therapy. A patient's therapist is selected based on current needs and history. The therapists available are trained in evidence-based theories; The majority of therapists are trained in EMDR therapy which is the most effective treatment for trauma. Other recommended therapies include poly-vagal therapy, CBT, DBT, and EFT. Therapists work well with the psychiatrists to develop a treatment plan that addresses the patient's needs.

Wrap around services provided to the patients appear to be effective. Patients are appropriately referred to other services such as occupational therapy. Patients would benefit from more opportunities to practice daily living skills to strengthen their foundation of wellness and hopefully decrease readmission in the future.

The units were clean, well-organized, and well-staffed. While the units did have a hospital feel, the facility did a nice job of maintaining a positive atmosphere for its patients. Units also had the ability to separate and segregate the units to allow for Services to be provided to more difficult patients. During the tour, staff discussed the proposed plan to increase the capacity for the hospital to provide additional outside space for patients. This is greatly needed as currently there is very minimal outside space available for patients.

Staffed stated that one of the silver linings of the COVID-19 pandemic was that they were able to develop outpatient services due to telehealth requirements and the expansion of telehealth in their programs.

Access and Entry

St. Patrick Providence maintained active communication with primary medical care providers (in house and with community providers) as well as other healthcare facilities throughout the state.

St. Patrick Providence acute programs can accept referrals from all over the state. 90% of the referrals are processed through the Orange Zone Emergency Department and the MHP program that's available through the ER. All initial assessments and evaluations are completed in the Orange Zone or ER. Certified MHPs communicate well with the management staff, nursing staff and medical staff to make the determination that an admission is appropriate to the unit.

Most notably was a process for MHPs (certified mental health professionals) in the emergency room who were able to evaluate patients for appropriateness of care and admission to the acute unit as well as providing referral and follow-up to patients who were not admitted.

It was noted that leadership has worked hard to build strong relationships with community providers and to ensure that those partners know the services available at St. Patrick Providence.

Continuity of Services through Transitions

Prior to discharge, the patient and staff review the individual's treatment plan and decide on after-care appointments and referrals. This information is communicated to family members/guardians as appropriate. Staff provide post-discharge follow-up calls to individuals and families after the patient discharges to ensure after-care plans are being utilized.

Staff reported that St. Patrick Providence could benefit from continued efforts towards developing stronger community ties with other providers. Staff reported that these strong ties in

the community are needed to effectively step a client down from services and feel confident that the patient will receive trustworthy services. One barrier identified by staff is that the professional staff end up spending a lot of their own time building professional connections, however this typically is more of a case management duty. The Board would recommend additional case management positions to help assist with this continued development of these community ties to providers.

Overall & Recommendations

Overall, the Board was pleased with the St. Patrick Providence In-Patient and Out-Patient Psychiatric treatment programs. It was clear to the Board that the staff at St. Patrick Providence are patient centered and aim to provide the best services they can to the individuals who need this level of care. It was impressive to learn about the Orange Zone and how they work collaboratively with the other units.

The Board Recommends: St. Patrick Providence contract with individual to create a cultural effectiveness plan and provide historical cultural effectiveness training.

The Board Recommends: St. Patrick Providence continue with the development of proposed outdoor space for both the adult and adolescent units.

The Board Recommends: St. Patrick Providence explore the potential development of an Occupational Therapy space for living skills development.

The Board Recommends: St. Patrick Providence explore the expansion of integrated health program sharing of opportunities for expansion with other Hospital Providers.

The Board Recommends: St. Patrick Providence add the following independent advocacy agencies as resources available to assist patients in the individual patient handbook. The Mental Disabilities Board of Visitors, the Mental Health Ombudsman, and Disability Rights.

The Board Recommends: St. Patrick Providence explore ability to paint the units to a more warm and therapeutic color versus the current sterile hospital feel.

The Board Recommends: St. Patrick Providence explore and provide more comfortable/safety furniture on the units for patient rooms.