



Brattleboro Retreat

Patient Care Audits

As part of our ongoing performance improvement process, the Brattleboro Retreat regularly reviews patient records during the inpatient stay. Weekly chart audits are conducted on all inpatient units to assess and monitor the quality of patient care delivered at the Retreat.

The following five areas were audited during the calendar year 2008:

- ⌚ Treatment planning and discharge
- ⌚ Pain assessment
- ⌚ Electroconvulsive therapy (ECT)
- ⌚ Methadone treatment
- ⌚ Seclusion and restraint

Treatment Discharge and Planning

Initial treatment plan within 24 hours

This indicator reports on whether patient treatment plans were developed in a timely manner. It is based on a review of patient records during the calendar year 2008. The patient's treatment plan guides and documents the goals for each patient's hospitalization. In order for treatment to be effectively coordinated and focused towards the patient's discharge, treatment plans should be developed within 24 hours of admissions.

All seven areas of the discharge plan complete

Most psychiatric illnesses are chronic. Therefore, it is critical to integrate this episode of care in their long term plan of care. Research clearly indicates that patients who follow through on their after care plans are less likely to relapse or need readmission to the hospital and are more likely to sustain recovery. There are several aspects of a patient's discharge plan that should be completed to increase the likelihood that the patient will receive the most effective continuity of care, i.e. after care plan, diagnosis, discharge order.

Measure	Results
Initial treatment plan within 24 hours	96% 500/520
All seven areas of the discharge plan are complete	93.8% 488/520

Pain Assessment

As part of each patient's care, we ensure their pain is assessed and addressed. We:

- ⌚ Identify the patients in need of pain management at admission or during hospitalization and acknowledge every patient's right to pain assessment and management while hospitalized.

- ⌚ Provide assessment and reassessment of pain appropriate to age, diagnosis, and type of pain.
- ⌚ Identify each patient's goal for pain management while hospitalized.
- ⌚ Optimize management of pain within hospital setting.
- ⌚ Provide ongoing education of appropriate staff, patient, and patient families in the management of pain if indicated.

Measure	Results
Pain assessment complete at admission.	98% 510/520

Electroconvulsive Therapy (ECT)

Appropriate informed consent will be obtained for all patients prior to ECT. Informed consent is an integral part of the ECT process. The potential benefits and risks of this treatment, and of available alternative interventions, should be carefully reviewed and discussed with patients, family or friends. Prospective candidates for ECT should be informed, for example, that there may be some risk of memory loss after ECT. Active discussion with the treatment team, supplemented by printed and videotaped information for patients, is a critical part of the decision-making process both prior to, and throughout a course of ECT.

Measure	Results
Consent of patients is obtained prior to ECT.	100% 237/237

Care of Patient Receiving Methadone Treatment

Opiate withdrawal is an acute state caused by cessation or dramatic reduction of the use of opiate drugs that has been heavy or prolonged. During withdrawal, patients may experience some symptoms such as sweating, shaking, headaches, drug cravings, nausea, vomiting, abdominal cramping, diarrhea, inability to sleep, confusion, agitation, depression, anxiety, and other behavioral changes.

Methadone and Buprenorphine (Suboxone) are used to ease some of the withdrawal symptoms. Because these medicines are potent, it is necessary to ensure that only patients who are medically stable receive these medicines. Additionally, lab results showing patient detoxification results must be reviewed by the treating physician.

Measure	Results
Lab results are present in the medical record.	93.7% 112/120
Physical exam is completed prior to first dose of Methadone or Suboxone.	94% 113/120