

**BEHAVIORAL HEALTH AND SERVICE
INTEGRATION ADMINISTRATION**
Psychiatric Emergency Response Team



2015-17 BIENNIAL BUDGET

Request	FY16	FY17	15-17
FTE	23.0	23.0	23.0
GF-State	\$1,903,000	\$1,765,000	\$3,668,000
Total	\$1,903,000	\$1,765,000	\$3,668,000

DECISION PACKAGE SUMMARY

The Behavioral Health and Service Integration Administration (BHSIA) requests 23.0 FTEs in order to expand the Psychiatric Emergency Response Team (PERT), currently in action at the Center for Forensic Services(CFS) within Western State Hospital (WSH). By funding this request, BHSIA is expected to increase the safety of both staff and patients at the state hospitals; creating an additional team for day and evening shifts to support the civil wards of the hospital; and adding a single team for day and evening shifts at Eastern State Hospital (ESH).

PROBLEM STATEMENT

The PERT team provides a mobile group of highly skilled staff who can be on any ward as needed to work with clients requiring additional support. This additional support to the client is focused on bringing a gentle resolution to potential crisis thus avoiding the need for physical intervention which maximizes safety for both clients and staff.

Currently, for wards outside of WSH CFS, de-escalation of patients is done by staff assigned to the general ward. As staff are drawn into crisis with one patient, their ability to serve the wider group is diminished. If a situation escalates to a level in which a patient needs to be physically contained to prevent harming herself or others, a call is sent out over the intercom for assistance from nearby wards. The highest number of staff injury reports in the state hospitals are related to the events of physical containment of patients. The highly skilled PERT team works to reduce the incidents requiring physical containment and when necessary takes over the physical aspects, thus ensuring that the individuals participating in the containment are those most practiced and skilled in the recommended techniques.

If this request is not funded, recent collaborative efforts by the Department of Social and Health Services (DSHS) and labor organizations to address the problem will be compromised and a key mitigation strategy for reducing patient violence, patient-to-staff assaults and industrial insurance claims and premiums will not be implemented.

PROPOSED SOLUTION

The PERT team is a first line responder team trained in crisis intervention, analysis of the antecedents for violence and aggression, and de-escalation techniques. When containment is necessary, this team facilitates seclusion and restraint



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and works with floor staff to re-integrate the patient back to the population with appropriate evidence-based debriefing. Since the roll out of the PERT team in March 2013, the Center for Forensic Services has shown a dramatic decrease in the hours of seclusion and restraint.

EXPECTED RESULTS

The budget request supports DSHS Goal 1: Health – Each individual and each community will be healthy: Decreased state psychiatric hospital assault rates.

The decision package is essential to implementing the BHSIA Strategic Objectives: 1.8: Decrease the quarterly rates of patient seclusion hours at Eastern State Hospital and Western State Hospital; and 1.9: Maintain the quarterly rates of restraint use at Eastern State Hospital and decrease the quarterly rates of restraint use at Western State Hospital.

This request directly supports the goal of decreased patient-to-staff assault claims filed at ESH and WSH. Desired and expected results are a reduction in the rate of patient-to-staff violence and assaults. This will reduce patient assault related industrial insurance claims and contribute to a reduction in DSHS industrial insurance premiums.

This request directly supports the goal of decreased rates of patient seclusion and restraint at both hospitals. The expansion of the PERT team serves our clients and staff by creating a mobile and accessible source of expert intervention to quickly and efficiently keep behavioral situations from escalating to the level that requires physical containment of patients. Through the utilization of these specialized services, violence at the state hospitals will be reduced resulting in fewer staff injuries and increased safety for our clients.

STAKEHOLDER IMPACT

This was a recommendation of the State Hospital Ad Hoc Safety Committee, comprised of representatives from all of the labor organizations and management at all three hospitals to identify long and short-term safety improvement initiatives.



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