



[REDACTED]

[REDACTED]

[REDACTED]

1. [REDACTED]

2. [REDACTED]

3. [REDACTED]

4. [REDACTED]

5. [REDACTED]

6. [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

1. [REDACTED]
2. [REDACTED]
3. [REDACTED]
4. [REDACTED]

[REDACTED]

Policy 6.029 states that the unit can reduce privileges up to 90 days without returning to RR for reinstatement. Units can hold a patient to the unit when over there is a clinical or security concern.

[REDACTED]

Clinical hold is defined in policy as a temporary measure in which the RN can restrict a patient's use of privileges if

there is a clinical or security concern. (Release from clinical hold does not require a team meeting.)

[REDACTED]

[REDACTED]

Other Information

1. [REDACTED]
2. The Judge's order states that the victims of the crimes desire notification of the Psychiatric Security Review Board hearings, conditional release, discharge or escape of the defendant. This information was not brought forward at the time of the escape and will be noted as an immediate corrective action.
3. Communications Center staff reported that he spoke to a particular [REDACTED] nurse on the day of the UL after the UL had occurred. [REDACTED] The RN denies that she reported this as she was not working on [REDACTED] on that day.

Another RN on [REDACTED] however, reports that she did speak to the Communications Center staff on September 3rd, after the UL had occurred. She reported the information [REDACTED]

Nurse Manager on [REDACTED] and MHSRN had met with [REDACTED] RN in early August when making decisions on patient roommates [REDACTED]

Two other RNs working on [REDACTED] in July were also interviewed following the elopement.

Issues and Concerns

1. [REDACTED]
2. [REDACTED]
3. [REDACTED]
4. [REDACTED]

Recommendations

1. Immediately review all patients' privileges. (Note: Completed Sept. 9, 2011);
2. [REDACTED]
3. Conduct a clinical review of the [REDACTED] team between [REDACTED]
4. Review and revise, as needed, existing policies and procedures for:
  - a) Clinical holds
  - b) Granting privileges
  - c) Requesting and approving on-grounds trips/walks outside the secure perimeter, and off-grounds trips.

(Note: Regarding (c), an immediate/temporary policy/procedure change was effected on September 16, 2011.)

5. Review and revise, as necessary, existing policies regarding communication between sending and receiving units when patients are transferred;
6. Review and revise, as necessary, existing policies for notifying victims of PSRB patient exposures. (Note: This was completed on September 30, 2011.)