

OREGON STATE HOSPITAL

PORTLAND – SALEM

POLICIES AND PROCEDURES

SECTION 6: Patient Care

POLICY: 6.028

SUBJECT: Patient and Family Education

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SUPERINTENDENT 

DATE: JUNE 11, 2012

I. POLICY

- A. It is the policy of Oregon State Hospital (OSH) to promote patient and family education. Educational needs shall be assessed and, when appropriate, educational goals shall be established in collaboration with the patient and the patient's family.
- B. OSH shall provide education programs, resources, and activities to meet the assessed needs and educational goals of the patient.
- C. The process of patient education is conducted through an interdisciplinary approach.
- D. Patient education is supported at OSH by developing and improving patient education programs, resources, and activities, and by achieving the goal of including a personalized education plan for each patient within the interdisciplinary treatment plan.
- E. Educational resources and services include:
 - 1. Clinical staff who provide patient education as a part of their job function;
 - 2. Psychiatric rehabilitation programs;
 - 3. Vocational preparation programs;
 - 4. Academic programs;
 - 5. Educational materials;

6. Educational equipment including computerized and audio-tutorial formats; and
 7. Education and support materials for family members.
- F. Patients are active participants in their ongoing health care and treatment. Responsibilities include:
1. Reporting information about their psychiatric and medical condition and health status to their treatment team;
 2. Asking questions to increase knowledge;
 3. Collaborating with the treatment team to develop, implement, and evaluate their plan of care; and
 4. Conducting themselves in a manner that maintains and supports a learning environment by following program rules and showing consideration and respect for others.

II. DEFINITIONS

- A. "Education" means the process or course of learning, instruction, or training utilized to promote healthy behaviors, recovery, and return to optimal function level.
- B. "Academic Education" is directed towards acquiring knowledge determined to be valuable by an outside authority such as a Board of Education, etc.
- C. "Vocational Education" is directed at developing basic skills necessary to acquire, perform, and maintain employment.
- D. "Psychiatric Rehabilitation" is the process of acquiring skills and accepting supports that are necessary for achieving a specific client goal. This could be in a vocational, living, social, or educational environment. A major component of psychiatric rehabilitation is the development of that goal and therefore involves values clarification and motivation. It could involve academic or vocational education. Its key therapeutic benefit, aside from the skills learned, is the exercise of goal-directed behavior.
- E. "Interactive" means an educational process in which OSH staff, while disclosing information to patients and families, continuously elicit feedback to ensure that the information is understood and that it is appropriate, useful, and usable in practical terms. This interactive process enables patients to be involved in decisions about their own treatment.

III. PROCEDURES

- A. The Written Plan for Professional Services for each specialty treatment service at OSH defines the treatment modalities available for each distinct patient population.
- B. Each specialty treatment service has a written protocol for academic educational services.
- C. Patients admitted to OSH are assessed through discipline-specific assessments to identify needs to assist with learning and education needs (see Attachment 1 - crosswalk chart).
- D. Educational needs are additionally identified through multidisciplinary assessments and are prioritized through the interdisciplinary process.
- E. Based on the educational needs identified in the discipline assessments, interdisciplinary treatment plans are developed. Identified needs are addressed via short- and long-term goals, with specific educational interventions.
- F. Educational services and consultation are available on a referral basis through Dietary, Pharmacy, and Spiritual Services.
- G. Those needs that are not identified as a priority during hospitalization shall be addressed through community referral and discharge planning.
- H. Patient education that does not occur on a Treatment Mall shall be documented in one of two options: the Client/Caregiver Education option, or the multi-iteration education table in the RN Monthly Summary option in Avatar.
- I. Patient and family education is an interactive process and continues throughout the course of hospitalization through interventions identified in the interdisciplinary treatment plan. The patient's response to education and attainment of educational goals is documented through the progress notes of the medical record.
- J. Patients referred for significant medical procedures receive education prior to giving their informed consent for the procedure. This education is shaped and provided in the learning style most comfortable for patients.
- K. Oregon State Hospital employees are provided with resources to facilitate patient and family educational services. These resources include

educational materials and handouts, staff time on education committees, academic programs, vocational programs, psychiatric rehabilitation programs, and resources from the OSH library. Whenever possible, educational resources shall be evidence-based, utilizing the definitions of evidence-based practices set forth by the Administrator of Mental Health and Addiction Services.

- L. At the time of discharge, all OSH patients, family members, significant others, and health care providers are provided with pertinent interdisciplinary discharge information, to which the Interdisciplinary Treatment Team members have contributed.
- M. All outcomes related to patient and family education are documented in accordance with the Interdisciplinary Treatment Team, treatment planning, and the OSH Treatment Manual.

IV. ATTACHMENTS

Attachment 1

IV. REFERENCES

The Joint Commission CAMH (Comprehensive Accreditation Manual for Hospitals)

OSH Policy and Procedure Manual:

- Policy 6.013, Discharge and Continuing Care Planning

OSH Medical Staff Manual:

- Volume 2, Appendix F, Guide to Informed Consent Documentation

OSH Nursing Manual:

- Procedure D-2, Discharge
- Procedure N-4, Nursing Assessment Protocols
- Procedure N-5, Nursing Assessment: Initial (Admission 4-Hour, Data Base I)
- Procedure N-6, Nursing Assessment: Comprehensive (Admission 10-Day, Data Base II)
- Procedure N-7, Nursing Assessment Interdisciplinary Annual Review
- Policy on Education of Patients and Family, Role of Nursing Staff (NS 9.40)

OSH Psychology Manual:

- Psychology Admission Note Outline
- Annual Review
- Psychology Baseline Screen

SUBJECT: Patient and Family Education

POLICY NUMBER 6.028

DATE: June 11, 2012

PAGE 5 OF 5

- Forensic Baseline Assessment

OSH Rehabilitation Services Policy and Procedure Manual:

- Clinical Practices

OSH Psychiatric Recovery Services Manual:

- Written Plan for Professional Services

OSH Forensic Psychiatric Services Manual:

- Written Plan for Professional Services

OSH Vocational Services Manual:

- Written Plan for Professional Services
- Procedure 1.003, Referral and Vocational Services Placements

Replaces Oregon State Hospital Policy and Procedure 6.028, *Patient and Family Education*, dated 4/26/2010.