From Fantasy to Reality: A Four-Part Formula for Behavioral Health Patient Safety

1. CREATE POLICY centered on your desired model of care.
2. SECURE SPACE Choices for securing space affect the psyche. A space doesn't have to LOOK secure to BE secure.
3. REDUCE HARM We can anticipate risks and provide reasonable degrees of prevention.
4. ADOPT BEST PRACTICES for patient and staff safety.

AMONG OUR BEHAVIORAL HEALTH CLIENTS
- Acadia Hospital
- Arizona State Hospital, Forensic Hospital
- Arizona State Hospital, Civic and Adolescent Behavioral Healthcare Hospital
- Baltimore Washington Medical Center
- Bermuda Hospitals Board
- Brattleboro Retreat
- Brooklyn Children’s Psychiatric Center
- California Department of Corrections Center for Addiction and Mental Health
- Commonwealth of Virginia – Department of Mental Health
- Dorothea Dix Hospital
- Eastern Niagara Health
- Erie County Medical Center
- Essex County Hospital Center
- Jacobi Medical Center
- John T. Mather Memorial Hospital
- Kaiser Permanente
- Kalispell Regional Medical Center
- Lancaster General Hospital
- Lindner Center of HOPE
- Mental Health Centre Penetanguishene
- Niagara Health System
- North Carolina Department of Health
- North Shore Medical Center
- Ontario Shingles Centre for Mental Health Sciences
- OSF/ST. Anthony Medical Center
- Pima County Community Hospital
- Prairie North Health Region
- Royal Ottawa Hospital
- St. Joseph’s Hospital Health Center
- St. Mary’s Hospital Medical Center
- The State of Maryland Department of Health and Mental Hygiene
- Saskatchewan Health
- Saskatoon Health System
- South Nassau Communities Hospital
- University of Alabama, Birmingham
- University of Maryland Medical Center
- U.S. Department of Veterans Affairs
- Vancouver Island Health Authority
- The Washington Hospital

CREATE POLICY

SECURE SPACE
Choices for securing space affect the psyche. A space doesn't have to LOOK secure to BE secure.

REDUCE HARM
We can anticipate risks and provide reasonable degrees of prevention.

ADOPT BEST PRACTICES
for patient and staff safety.

SAFETY BALANCE DIGNITY RECOVERY

Light at the end of the tunnel
The third dimension of safety

OBSERVATION THRESHOLDS ZONES

HIGH RISK
- Patients are alone and unsupervised

MEDIUM RISK
- Patients have some observation, small groups or alone

LOW RISK
- Patients are observed (have minimal chance of no observation)

Material Technology Durability

Anticipation, awareness, simplicity
The comfort of forecasting
Change Management
Safety Economics
Aspect Ratios
Light, air and recreation above grade

Observation responsibilities ABCs
- Patients are alone and unsupervised
- Patients have some observation, small groups or alone
- Patients are observed (have minimal chance of no observation)

On stage / off stage Observation responsibilities

Patients are alone and unsupervised
High Risk

Patients have some observation, small groups or alone
Medium Risk

Patients are observed (have minimal chance of no observation)
Low Risk