

State of Washington

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 013134	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 08/30/2022
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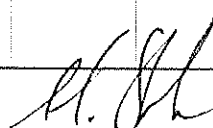
NAME OF PROVIDER OR SUPPLIER SMOKEY POINT BEHAVIORAL HOSPITAL	STREET ADDRESS, CITY, STATE, ZIP CODE 3955 156TH ST NE MARYSVILLE, WA 98271
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
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L 000	<p>INITIAL COMMENTS</p> <p>STATE COMPLAINT INVESTIGATION</p> <p>The Washington State Department of Health (DOH) in accordance with Washington Administrative Code (WAC), Chapter 246-322 Private Psychiatric and Alcoholism Hospitals, conducted this health and safety investigation.</p> <p>On site dates: 08/18/22 and 08/30/22</p> <p>Case numbers: 2022-9016 and 2022-2129</p> <p>Intake numbers: 124057 and 120472</p> <p>The investigation was conducted by:</p> <p>Investigator #15</p> <p>There were violations found pertinent to this complaint.</p>	L 000	<p>1. A written PLAN OF CORRECTION is required for each deficiency listed on the Statement of Deficiencies.</p> <p>2. EACH plan of correction statement must include the following:</p> <p>The regulation number and/or the tag number;</p> <p>HOW the deficiency will be corrected;</p> <p>WHO is responsible for making the correction;</p> <p>WHAT will be done to prevent reoccurrence and how you will monitor for continued compliance; and</p> <p>WHEN the correction will be completed.</p> <p>3. Your PLANS OF CORRECTION must be returned within 10 calendar days from the date you receive the emailed Statement of Deficiencies. Your Plans of Correction must be emailed by 11/27/22.</p> <p>4. Return the ORIGINAL REPORT via email with the required signatures.</p>	
L 325	322-035.1E POLICIES-ABUSE PROTECTION	L 325		
	WAC 246-322-035 Policies and Procedures. (1) The licensee shall develop and implement the following written policies and procedures consistent with this chapter and services provided: (e) Protecting against abuse and neglect and			

State Form 2567

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE



TITLE

CEO

(X6) DATE

11.30.22

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L 325	<p>Continued From page 1</p> <p>reporting suspected incidents according to the provisions of chapters 71.05, 71.34, 74.34 and 26.44 RCW; This Washington Administrative Code is not met as evidenced by:</p> <p>•</p> <p>Based on interview, record review, and review of hospital policies and procedures, the hospital failed to develop and implement policies and procedures to ensure a safe environment of care by providing staff guidelines when assigning roommates for patients on enhanced safety precautions, such as Sexual Acting Out (SAO) or Sexual Victimization (SVP) precautions, to prevent incidents of sexual aggression, sexual assault, or sexual victimization for 4 of 9 patient records reviewed (#1506, #1507, #1508, and #1509).</p> <p>Failure to develop and implement policies and procedures to ensure that patients identified with sexual aggression precautions will not be roomed with a patient identified with sexual victimization precautions places patients at risk for serious physical and psychological harm.</p> <p>Findings included:</p> <p>1. Document review of the hospital's policy and procedure titled, "Patient Rights," policy number PR 010, last reviewed 03/22, showed the following:</p> <p>a. Patients have the right to be free of any sexual harassment and nonconsensual sexual activity.</p> <p>b. Patients have the right to be free of abuse and neglect.</p>	L 325		

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L 325	<p>Continued From page 2</p> <p>c. Patients have the right to receive care in a safe setting.</p> <p>Document review of the hospital's policy and procedure titled, "Sexual Victimization Precautions," policy number POC 100.69, last reviewed 04/21, showed the following:</p> <p>a. The purpose of the policy is to provide a secure environment to prevent the patient from being sexually victimized.</p> <p>b. Sexual victimization may include any of the following: boundary violation, allegations of sexual encounters, unwanted touching, sexual misconduct, sexual intercourse, and sexual assault.</p> <p>c. The patient on sexual victimization precautions should have special considerations related to roommate assignment, specifically: age difference, sexual history, physical size/stature, mental status/cognitive status.</p> <p>Review of the policy found no guidance or parameters related to the "special considerations" related to roommate assignments.</p> <p>Document review of the hospital's policy and procedure titled, "Sexually Acting Out (SAO)/Sexual Aggression Precautions," policy number POC 100.68, last reviewed 01/22, showed the following:</p> <p>a. It is the policy of Smokey Point Behavioral Hospital to provide an increased level of observation/safety for patients with a clinically relevant history of sexually acting out behavior.</p>	L 325	

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L 325	<p>Continued From page 3</p> <p>b. A patient who has a clinically relevant history of sexually acting out or aggressive behavior towards the same sex shall have no roommate.</p> <p>Review of the policy found no additional guidance or parameters to define "clinically relevant history" used to determine roommate assignments for patients with enhanced SAO precautions.</p> <p>Document review of the hospital's policy and procedure titled, "Suspected or Confirmed Cases of Patient Sexual Activity," policy number POC 100.85, last revised 03/22, showed that after learning of a case of suspected or confirmed sexual activity between patients, a physician order for a private room or transfer to another unit will be obtained when necessary and appropriate.</p> <p>2. Review of the hospital's daily census for 1 North for 02/10/22 showed that an adolescent patient with SAO Precautions (Patient #1507) was assigned a roommate with SVP and SAO Precautions (Patient #1506).</p> <p>3. On 02/11/22 at 12:00 AM, Social Worker staff documented that during observation rounds, the Mental Health Technician found two adolescent patients, Patient #1506 (15-year-old female) and Patient #1507 (13-year-old female) engaged in sexual activity. Patient #1507 was found topless on top of her roommate, Patient #1506. At the time of the incident, both adolescent patients were on SAO Precautions. Additionally, Patient #1506 was on enhanced safety precautions for sexually inappropriate behavior with male and female peers. Patient #1507 was also on SVP Precautions. The adolescent patients were separated after the incident and moved to private rooms in separate units.</p>	L 325		
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L 325	Continued From page 4 4. On 08/18/22, the Investigator reviewed the hospital's daily census for 1 East Unit. The unit has a 26-28 bed capacity. The daily census for the unit was 21 patients. The census showed 2 patients with SAO and 4 patients with SVP. The daily census showed that one of the patients with SAO (Patient #1508) was assigned a roommate with SVP (Patient #1509). 5. On 08/18/22 at 4:00 PM, during an interview with Investigator #15, and the Chief Clinical Officer (CCO) (Staff #1502) and Assistant CCO (Staff #1504), Staff #1504 stated that upon admission, the intake staff refers to the High-Risk Notification to identify increased risks, such as SAO. When that risk is identified, the patient is usually given a private room. Staff #1502 and #1504 verified that Patient #1508 and Patient #1509 were roommates. 6. On 08/18/22 at 4:15 PM, during an interview with Investigator #15, Registered Nurse (RN) (Staff #1505) stated that there is no real practice or policy to guide staff on not rooming SAO and SVP patients in the same room. Staff #1505 stated that you typically would not see that, staff just try to be mindful of the safety precautions. 7. On 08/29/22 the Chief Executive Officer (CEO) (Staff #1503) confirmed via email correspondence that the hospital does not have a policy that specifically addresses roommate assignments for patients with enhanced safety precautions (SAO and SVP).	L 325			

Revised POC received on 11.30.22

POC Approved on 12.01.22

Mary Jane MSN, RN
DOH Nurse Investigator

Smokey Point Behavioral Health
Plan of Correction for
State Investigation #2022-9016 and #2022-2129
Exit 08/30/22

Tag Number	How the Deficiency Will Be Corrected	Responsible Individual(s)	Estimated Date of Correction	Monitoring procedure & Target for Compliance
L325	<p>Policy Revision: Policies for 'Precautions-Sexually Acting Out' and 'Precautions-Sexual Victimization' have been revised to include guidance on 1) Admission criteria leading to High Risk Notification for Sexually Action Out and Sexual Victimization and 2) regarding room accommodations for Patients on 'Sexual Acting Out' and 'Sexual Victimization' precautions.</p> <p>The Policy revision will address roommate assignments by defining for Intake and Nursing Staff what is specifically considered "clinically relevant" Patient characteristics and SAO/SVP history. By providing specific guidance, we will be using those defined characteristics and history of SAO/SVP to guide Intake and Nursing in room assignment. As mentioned below, Intake will receive education on Precaution identification for Patients on Unit and Potential Patient's admitting.</p> <p>Patients identified as SAO and/or SVP will not be roomed together; No Patients on SAO precautions are currently rooming with SVP.</p>	CCO or designee	12/7/2022	<p>•Chief Clinical Officer or designee will oversee audit process, in which 100% Audits will be conducted on all Patients with SAO/SVP precautions. For all Patients placed on SAO/SVP precautions, their room assignments, specifically their Roommate's Precautions, will be reviewed for appropriateness and documented, as to whether they were appropriately assigned to a room(Y/N). These audits will be ongoing, as Patient's are placed on precautions. CCO or designee will follow up with staff for any non-compliance.</p>
L325	<p>Education: Chief Clinical Officer and Intake Director or Designee will begin process of educating the Nursing & Intake Department of changes for determining HRN of patients for Sexually Acting Out & Sexual Victimization, education on Precaution identification for Patients on Unit and Potential Patient's admitting and the roommate assignments for Patients on Sexually Acting Out and/or Sexual Victimization Precautions by 12/20/2022. Education regarding roommate assignments of Patients on SAO/SVP precautions has been implemented into New Hire Orientation training.</p>	CCO or designee	12/20/2022	<p>Our monthly target is 95% compliance to our policy regarding roommate assignments of Patient's on SVP/SAO. If 95% compliance to our policy is not met, we will initiate an action plan to further mitigate possibility of the issue reoccurring. Audits will continue until 95% compliance is achieved</p>

				<p>for three consecutive months, then random audits will occur to ensure sustained compliance. Data from audits will be reported on a monthly basis in the Quality/Performance Improvement Committee, Medical Executive and Governing Board Meetings.</p>
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Progress Report Rec'd 01.26.23 (Revised)
 Progress Report Approved 01.31.23

Mary Zulu MSN, RN
 DOH
 Nurse Investigator

Smokey Point Behavioral Hospital
 Progress Report for
 State Psychiatric Hospital Complaint Investigation #2022-9016/124057 and #2022-2129/120472
 Dates: 08/18/22, 08/29/22 and 08/30/22

Tag Number	How Corrected	Date Completed	Results of Monitoring
L325	<p>Policies for 'Precautions-Sexually Acting Out' and 'Precautions-Sexual Victimization' have been revised to include guidance on 1) Admission criteria leading to High Risk Notification for Sexually Action Out and Sexual Victimization and 2) regarding room accommodations for Patients on 'Sexual Acting Out' and 'Sexual Victimization' precautions.</p> <p>The Policy revision will address roommate assignments by defining for Intake and Nursing Staff what is specifically considered "clinically relevant" Patient characteristics and SAO/SVP history. By providing specific guidance, we will be using those defined characteristics and history of SAO/SVP to guide Intake and Nursing in room assignment. As mentioned below, Intake will receive education on Precaution identification for Patients on Unit and Potential Patients admitting.</p> <p>Patients identified as SAO and/or SVP will not be roomed together; No Patients on SAO precautions are currently rooming with SVP.</p>	12/07/2022	<p>Since Policy Revision on 12/07/2022 and re-education on 12/20/2022, there have been 5 incidents of Sexual Behavior. All incidents involving Sexual Behavior were audited by the Chief Clinical Officer and the Director of Performance Improvement, Risk & Patient Advocacy, to ensure SAO/SXV Patients were not roomed with Patients on SAO/SXV precautions. Additionally audits looked at the Patients SAO/SXV precautions, to ensure they were identified appropriately, based on information provided during referral and Intake. Compliance to the Policy and re-education is 100%.</p> <p>All Patients placed on SAO/SXV cases were audited for appropriate room assignments, in which:</p> <p>In December of 2022 52 Patients on SVP precautions' room assignments were audited; 52 of the 52 Patient Room Assignments audited had appropriate room assignments. 100 % Compliance</p> <p>In December 2022 16 Patients on SAO precautions' room assignments were audited; 16 of the 16 Patient Room Assignments had appropriate room assignments. 100% Compliance</p>
L325	Education:	12/20/2022	

	<p>Chief Clinical Officer and Intake Director or Designee will begin process of educating the Nursing & Intake Department of changes for determining HRN of patients for Sexually Acting Out & Sexual Victimization, education on Precaution identification for Patients on Unit and Potential Patient's admitting and the roommate assignments for Patients on Sexually Acting Out and/or Sexual Victimization Precautions by 12/20/2022. Education regarding roommate assignments of Patients on SAO/SVP precautions has been implemented into New Hire Orientation training.</p>		
L325	<p>Chief Clinical Officer or designee will oversee audit process, in which 100% Audits will be conducted on all Patients with SAO/SVP precautions. For all Patients placed on SAO/SVP precautions, their room assignments, specifically their Roommate's Precautions, will be reviewed for appropriateness and documented, as to whether they were appropriately assigned to a room(Y/N). These audits will be ongoing, as Patient's are placed on precautions. CCO or designee will follow up with staff for any non-compliance.</p>	Ongoing	