



Ledger Program Review

Review of Patient Event at VIHA's Child, Youth and Family Ledger Program

VIHA's Quality Improvement review into the death of a 16-year old inpatient at Ledger House (located at the Queen Alexandra Centre for Children's Health) in December 2010 has concluded. The review contains seven recommendations. The table on the following pages lists the recommendations of the VIHA review and the health authority's response and actions to each recommendation. The responses and related actions will be updated as necessary to reflect progress.

Child, Youth and Family Inpatient Programs/Services – [Ledger Program](#):

The Ledger Program provides care for children and youth with serious and complex mental health issues, serving as the regional centre for all of Vancouver Island. Ledger is an inpatient unit for children and youth who need stabilization, assessment and treatment planning. It provides 13 acute care beds, including a 2-bed [special care unit](#) for children and youth who are actively suicidal, psychotic, manic, etc.

- Most children and youth who are admitted to inpatient services at Ledger are there on a voluntary basis, though sometimes there are children who are certified under the Mental Health Act.
- The Ledger Program, where appropriate, supports passes so children and youth can go home or to their home community, as well as to have visitors. Leave passes can be for a few hours or a few days. [Click here](#) for more information about the Ledger Program, or visit the VIHA website at: http://www.viha.ca/cyf_mental_health/ledger.htm

RECOMMENDATION 1: Suicide Risk Assessment	VIHA RESPONSE AND ACTION:
Ensure the updated Suicide Risk Assessment is in use in all emergency departments and urgent care centers.	<p>The Suicide Risk Assessment Guideline was reviewed and updated in August 2011. Staff and physicians are receiving education on the updated guideline and it will be fully in use by December 15, 2011 in all VIHA Emergency Departments and Urgent Care Centres.</p> <p>Although having the guideline updated is important, we also recognize staff and physicians need to be better equipped with the skills and knowledge to respond to suicide risk. Accordingly, since October staff from Mental Health and Addictions Services, Child Youth and Family, and Crisis Line Services have been attending a suicide intervention skills workshop. An online suicide risk management learning module is also being developed that will serve as a staff orientation and ongoing education tool in the future.</p>

RECOMMENDATION 2: Transfer of Information	VIHA RESPONSE AND ACTION:
Develop a clear protocol for mental health patients on a pass who present to a VIHA Emergency Department or Urgent Care Centre.	<p>To support patients, staff and physicians, a pass protocol has been developed for children and youth. This protocol outlines the entire pass process, from determining patient readiness for a pass to when patients return from a pass. It also includes clear directions for when a patient on a pass presents to an emergency department or urgent care centre. Specifically, it directs staff and physicians to contact the mental health facility where the pass was granted for help in care planning and, if required, to transfer the patient back to the mental health facility. If transfer is required the following actions will occur and will be documented:</p> <ol style="list-style-type: none"> 1. Discussion with the psychiatrist on call at the Mental Health facility; 2. Completion of Mental Health Status and Suicide Risk Assessments; 3. Completion of a Level of Care Assessment; and 4. Determination and agreement on a mode of transportation.
RECOMMENDATION 3: Communication	VIHA RESPONSE AND ACTION:
Enhance shift-to-shift communication at Ledger House.	<p>Two key changes have been made at Ledger House to enhance shift-to-shift communication.</p> <ol style="list-style-type: none"> 1. The Registered Nurse located in the special care unit will now be in charge of the Ledger Program after hours. This change ensures the person in charge will have a strong knowledge of policies, procedures, and protocols. 2. The patient pass protocol has been updated. Now, a mental health status assessment will be documented for all patients prior to leaving on a pass, as well as when they return from a pass; a suicide risk assessment will also be completed when clinically indicated. <p>In addition, parents are now expected to remain on the unit to give a pass report to staff before leaving. To ensure these assessments and communications are occurring, regular audits are performed and education is provided to staff as required.</p>
RECOMMENDATION 4: Pass Protocol	VIHA RESPONSE AND ACTION:
Review the pass communication protocol for Mental Health and Addiction Services (MHAS) and Ledger House Clients	The pass communication protocol for Mental Health and Addictions and Ledger House patients has been reviewed and revised. The pass protocol supports planning with families about behaviors that indicate when a patient on a

	<p>pass may need to return to the facility or to an Emergency Department. As part of this work, the Child, Youth and Family program website has been developed to provide more information to patients and families.</p> <p>In addition, a “Questions and Answers” pamphlet has been created for families and patients, which includes information about passes and will better explain the differences between voluntary and certified admissions. This is posted on the Ledger Program website at: http://www.viha.ca/cyf_mental_health/ledger.htm</p>
RECOMMENDATION 5: Missing Youth Protocol	VIHA RESPONSE AND ACTION:
Work with Saanich Police Department and Coroner’s Office to update the missing child/youth protocol to include clear language understood by staff and Saanich Police Department which identifies level of risk.	VIHA has worked closely with the Saanich Police Department and the Coroner’s Office to update the missing child/youth protocol. The protocol now includes clear language to identify the level of risk and will be reviewed annually. Ledger House staff, Saanich Police Department members, and 911 operators have been educated on this protocol.
RECOMMENDATION 6: Electronic Health Record	VIHA RESPONSE AND ACTION:
Allow Emergency Departments and Urgent Care Centres access to MHAS Clinical Profiles. Determine the timeframe in which Emergency Departments and Urgent Care Centers can have access to the Ledger House MHAS clinical profile feature of Power Chart (VIHA’s electronic medical record).	<p>As of June, all Emergency Departments and Urgent Care Centres now have electronic access to the Mental Health and Addictions Services clinical profile, which is specific to adults. Staff education has continued into the Fall to ensure this tool is being appropriately used. The Ledger Program is working with VIHA’s Information Management/Information Technology Department to see if the adult clinical profile template could be used by staff at Ledger as an interim measure until a profile more specific to children and youth is developed.</p> <p>Patient discharge summaries from Ledger are in the process of being transcribed into the electronic health record, allowing staff and physicians in emergency departments across the island to have better access to patient information.</p>
RECOMMENDATION 7: Door Alarms (Jack Ledger House)	VIHA RESPONSE AND ACTION:
Add alarms to exits at Ledger House	VIHA is working closely with the Saanich Fire Department, the Municipality of Saanich and an architect on plans to upgrade the security system at Ledger House, including door alarms, ensuring compliance with fire and building codes.