QUALITY ASSURANCE IN A CHILDREN'S PSYCHIATRIC HOSPITAL

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ABSTRACT: The use of short-term isolation (STI) in a children's psychiatric hospital was examined using the Joint Commission on Accreditation of Hospitals (JCAH) quality assurance mode. A Clinical Care Evaluation addressed two questions: Are we providing quality use of STI? And are we adequately documenting its use? A medical record audit of 78 discharged patients and a review of unit records provided hospital staff with utilization and demographic statistics; structured interviews with staff and inpatients were conducted that provided information about their opinions of STI. The data gathered served as the basis for recommendations that led to planned, informed program changes.

Mental health administrators seem to be directing more and more of their efforts toward the review and monitoring of programs. The public's role as consumer of medical care and increasing concern for patients' rights have stimulated a drive for accountability, but accountability for the quality of a program can exist only if well-defined standards of care have been developed. The absence of such criteria has precipitated court and legislative actions that attempt to globally define quality-of-care issues (Kopolow 1976). However, these superficial attempts to assure quality of care still leave the challenge in the hands of mental health professionals.

The Joint Commission on Accreditation of Hospitals (JCAH) provides mental health administrators with a model for quality assurance (Accreditation Council for Psychiatric Facilities 1974). Quality assurance addresses two questions to mental health administrators: (1) Are we providing quality services? and (2) Can we demonstrate the quality of our services through adequate documentation?
JCAH specifically requires the evaluation of personnel who manage patients. “The staff and administration shall work toward enhancing the quality of patient care through the specified, documented, implemented and ongoing process of clinical care evaluation studies” (Accreditation Council for Psychiatric Facilities 1974). This study is an application of JCAH standards for a Clinical Care Evaluation (CCE) in a children’s psychiatric hospital—a quality assurance appraisal.

Zusman (1976) defines program evaluation as the use of scientific methods to examine the work or accomplishment of an organization in relation to agreed upon standards. Since the goal of such examinations is program improvement, evaluation has become a major element of mental health programs, usually instituted with great expectations and enthusiasm. Zusman offers several explanations for the discrepancy between the promise of program evaluations and the often disappointing results. He states that the primary reason for the minimal accomplishments of program evaluation is that few of the studies are completed and findings are rarely reported to decision makers. JCAH, in fact, stipulates that a quality assurance study must include these two activities—namely, completion and reporting within a specific time frame. JCAH outlines the following steps for a CCE:

- Selection of a particular pattern of care for study
- Formulation of an appropriate design
- Specification of information to be collected
- Collection of data from clinical records
- Analysis of data with conclusions and recommendations
- Production of a study report
- Transmission of the study report to clinical staff, administration, and others concerned
- Implementation and follow-up.

The JCAH manual stipulates that each facility must show documented evidence that it has completed one such study each year and that it has at least one review study in progress at all times. Such studies make it possible not only to identify standards of care consistent with the mission and goals of a facility, but also identify individual cases that deviate from the standards. The crucial aspect of a CCE is the identification and analysis of aggregate patterns of care.

The study to be considered here was conducted at River View Hospital for Children, Connecticut’s only public inpatient psychiatric facility for children. It serves psychiatrically disabled children, aged 6 through 13, who are residents...