VA | U.S. Department of Veterans Affairs

Environmental Programs Service Mental Health Guide

2014

Preface

This Environmental Program Services (EPS) Mental Health Guide was developed in response to a number of safety-related incidents that occurred in VA Medical Center inpatient mental health units in 2006. First, a multidisciplinary workgroup was formed, from VAs across the country, to address these safety risks. As this group began looking for solutions, they realized there were few available resources. Subsequently, this multidisciplinary workgroup, as well as outside product manufacturers, began collaboration to develop a wide-range of products and training used within VA's inpatient mental health environments. The first listing of recommended products was made available through the VA EPS Website. Since then, additional research has resulted in the introduction of new products, customized for a mental health inpatient environment, into the healthcare industry marketplace. *Despite this collaboration, it is important to realize the products and manufacturers represented in this guide in no way represent an endorsement by the VA for any manufacturer or vendor.*

As a result of this success, EPS brought the workgroup back together to review suggestions and attributes of the products appropriate for use in an inpatient mental health environment. This new information was the workgroup's foundation for what would become the EPS Mental Health Guide. The guide also includes more information on the individual products so that the individual medical center can make the decisions between multiple products to their specific patient population. The ideas within this guide are intended to be shared with all VAs in all VISNs so we work in partnership to provide the most patient-centered care in the safest and most therapeutic environments. It will be accessed electronically and updated as necessary so it will be a truly "living" document. To reinforce this training, a Mental Health Unit Orientation Power Point Tracking Program has been developed which also includes acknowledgement of training and a sample equipment checklist. These training procedures will allow all staff who visit inpatient mental health units to understand the different challenges these Veterans face and be aware of safety issues that would be allowed and likely even go unnoticed elsewhere. To achieve the best outcomes and the highest level of patient-centered care, these new paradigms not only describe safety features that are necessary on an inpatient mental health unit, they also highlight the importance of an environment that is aesthetically pleasing—relaxing, healing, and familiar. Our Veterans should feel confident that the VA is a safe place to go for care given with expertise, dignity, and the camaraderie of other Veterans.

Foreword

Aubrey Weekes, MBA
Director Environmental Programs Service

Environmental Management Service (EMS) and Interior Design (ID) personnel are able to have a direct impact on the ability to minimize potential hazards while providing patient-centered care in this unique environment. The content of this Guide was designed specifically for EMS and ID personnel to ensure they have the knowledge to understand the potential safety risks that can occur from standard products that are readily used elsewhere in the healthcare facility. Environmental Management and Interior Designers are dedicated to serving our Veterans by creating a healthy healing environment that inspire, enable, and sustain health and well-being.

Dr. Bradley Karlin
National Mental Health Director, Psychotherapy and Psychogeriatrics, Mental Health Services, VACO

This Guide, the first of its kind in VHA, is designed to further enhance VHA's efforts to promote inpatient mental health environments of care that are safe as well as healing and recovery-oriented. This includes important attention to unit design and products that are home-like, inviting, and pleasing to patients and staff. This Guide is designed to complement facility design guidelines and approaches for therapeutic and safe inpatient mental health facilities incorporated in the VHA Mental Health Design Guide, which has served as a transformational document that has changed the paradigm for mental health design in VHA and spurred the design and development of several state-of-the-art, evidence-based mental health facilities. The detailed guidance included in the pages that follow were developed and identified with the same overarching principles of ensuring safe and healing-oriented environments of care, which research has shown to promote patient recovery and staff functioning. I wish to acknowledge and express my appreciation to the dedicated team that contributed to the development of this important Guide and that throughout the process shared the vision of promoting safe and healing environments for Veterans who deserve nothing less.

Dr. Peter Mills
Director, VA National Center for Patient Safety Field Office

I am very happy to have been part of the team that developed this guidebook. I have worked to help improve the safety of the mental health environment in VHA since we first deployed the Mental Health Environment of Care Checklist in 2007. Since that time there have been a number of innovations and improvements in interior design and products for the mental health setting. We hope this guidebook can be a resource for staff members and administrators responsible for creating a healing and recovery-oriented environment for our Veterans receiving treatment on these units.

Acknowledgements

This guide would not have been possible without the guidance, effort, and expertise of the following individuals:

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Mission and Vision

VA Mission Statement

To fulfill President Lincoln's promise "To care for him who shall have borne the battle, and for his widow, and his orphan" by serving and honoring the men and women who are America's Veterans.

Vision

To provide Veterans the world-class benefits and services they have earned and to do so by adhering to the highest standards of compassion, commitment, excellence, professionalism, integrity, accountability, and stewardship.

Core Values

Integrity: Act with high moral principle. Adhere to the highest professional standards. Maintain the trust and confidence of all with whom I engage.

Commitment: Work diligently to serve Veterans and other beneficiaries. Be driven by an earnest belief in VA's mission. Fulfill my individual responsibilities and organizational responsibilities.

Advocacy: Be truly Veteran-centric by identifying, fully considering, and appropriately advancing the interests of Veterans and other beneficiaries.

Respect: Treat all those I serve and with whom I work with dignity and respect. Show respect to earn it.

Excellence: Strive for the highest quality and continuous improvement. Be thoughtful and decisive in leadership, accountable for my actions, willing to admit mistakes, and rigorous in correcting them.

EPS Mental Health Guide Mission Statement

The Mission for this EPS Mental Health Guide is to educate EPS personnel about products that decrease potential physical hazards as well as maintain a Veteran's dignity and expectations of safe, high-quality, customized care. This guide is based on documented research of the previous Mental Health Environment of Care Work Group. It is intended to be a "living document" on the EPS website that will be updated as appropriate with new information about unique safety design considerations on a behavioral health environment.

Philosophy of Safety and Aesthetics Statement

Safety is always the most important criteria in a mental health care environment, particularly an inpatient unit with restricted access. Despite this, it does not benefit patients to be subjected to an "institutional" environment. Recent studies describe the benefit patients receive from a healing environment with thoughtful consideration given to home-like elements such as comfortable furniture, use of color, windows that provide natural light and access to nature or "green" space, and artwork that highlights local scenery and activities.

Purpose

Purpose

The purpose of developing the EPS Mental Health Guide is to provide guidance and education to the field in relation to determining products suitable for the locked Inpatient Mental Health Environment. This Mental Health Guide was developed to create a living document that provided not only the what, but the why and the how to allow staff to ask questions and encourage the marketplace to continue to research and develop new products appropriate for the Mental Health Environment.

Scope

The scope of this document is to include items that are specific to the Environmental Management Service and the Interior Design Program at the local VA Medical Center. Furniture, accessories, supplies, and tools for EMS and Interior Design can greatly impact a space and its safety upon completion of construction. Items that are part of construction may be referenced throughout this guide to show the increased development that has occurred since the Office of Construction and Facilities Management (CFM) Mental Health Design Guide was released. However, the CFM Mental Health Design Guide and the Mental Health Environment of Care Checklist should be consulted for the use of those items.

Goals and Objectives

Of the 12 goals and objectives to improve Patient Centered Care identified by the Office of Patient Centered Care, four were particularly relevant to the physical environment of care in a VA inpatient mental health facility.

I. Honor the Veteran's expectation of safe, high-quality, accessible care.

II. Ensure that architectural layout and design are conducive to health and healing.

III. Provide for physical comfort and pain management.

IV. Introduce creative arts into the healing environment.

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Philosophy

When considering design for an inpatient mental health unit, it is important to realize how unique this environment is compared to traditional hospital units. The most obvious difference is it is locked. The criteria alone for admission to a locked inpatient mental health unit make limited unit access necessary for the protection of a Veteran, who has been determined to be a risk to self or others, thereby warranting admission, whether it is voluntary or involuntary, to a mental health unit. Still, it's disconcerting to Veterans when they realize their freedom has been greatly restricted and they can only enter and exit the unit when accompanied by staff. This leads into a second major difference between an inpatient mental health unit and a traditional inpatient medical unit—patients are almost never confined to a bed, nor are they confined by other medical equipment such as IV tubing and poles or cardiac/vital sign monitoring equipment. While a Veteran in a traditional hospital setting may be too sick to feel like walking around and exploring the environment, mental health patients are frequently ambulatory and potentially receive great benefit from engaging with their environment as much as interacting with fellow Veterans. Because of this, safety standards are in-place such as the absence of anchor points in design, no available objects that are sharp or can be broken in shards, and the use of furniture that cannot be readily thrown or used as a barricade. Highly reverberant spaces should also be avoided (Karlin and Zeiss, 2006) as should other features that could alter perception such as long corridors and any highly polished or reflective items that increase glare and could frighten patients with altered thought processes (Karlin and Zeiss, 2006). However, "… large, low windows may improve sensory abilities and reduce delirium and paranoia" (Karlin and Zeiss, 2006).

Diagnoses frequently treated include PTSD (Post-Traumatic Stress Disorder) caused by military combat or military sexual trauma (MST). Sadly, both are prevalent among Veterans from other conflicts as well as the incoming waves of OIF (Operation Iraqi Freedom) and OEF (Operation Enduring Freedom) Veterans returning from the Middle East. Veterans with PTSD may have symptoms that include hypervigilance and exaggerated startle reflexes, nightmares, paranoia, or distorted perceptions. Other diagnoses include bipolar disorder (characterized by extreme highs and lows in mood, with or without psychosis) suicidal or homicidal ideation, or anxiety disorders to name a few mental health diagnoses. It is not uncommon to have these organic conditions also be accompanied by alcohol or drug misuse. This happens when these Veterans try to reduce symptoms by self-medicating with alcohol or other substances for temporary relief with sedating, activating, or reality-altering effects. In addition, a Veteran may have cognitive impairment related to dementia or traumatic brain injury (sometimes referred to as a TBI) from something like an improvised explosive device (IED)—a practice used more and more in combat. The devastating effects traumatic brain injury has on a Veteran's ability to "lead a normal life" among a civilian society are as life-altering as a Veteran who lost limbs in combat. But because brain and psychiatric damage is "invisible," it is commonly misunderstood and, frequently, treated with less compassion and less immediacy than a Veteran with an obvious physical injury.

There are many ways a thoughtfully designed inpatient mental health environment can enhance the recovery process. Karlin and Zeiss (2006) have conducted significant research as to how environment sets the tone for patients and staff. They write, "Planning for interior design should take into account the unit's symbolic meaning or the set of messages that the environment sends to its users," (Karlin and Zeiss, 2006). This makes close collaboration between facilities management, nursing, general safety, and patient safety essential. Each of these services must ensure that an environment meets the needs of the both the facility and the patient. As VA professionals who have been entrusted with the care of our nation's Veterans we must continuously ask, *what is the message we want to send our returning Veterans as well Veterans from previous generations?*

In addition to illustrating unique safety needs for an inpatient mental health unit, our Mental Health Environment of Care Guide highlights the environment's aesthetic components and its role in a holistic approach to Veteran-centered care. More recent research of best practices describes benefits of a home-like environment with thoughtful use of color, natural light, access to fresh air, attractive and comfortable furnishings as well as the addition of music, artwork (digital and still) and

sensory elements such as a "green" wall of lavender or other nontoxic herbs to enhance feelings of calm and well-being. Ideally, this guide will also show how a vibrant living space, as opposed to a drab institutional environment, will create balance and enhance the efficacy of the multidisciplinary treatment plan created for every Veteran upon admission. Consideration as to why environment, combined with more traditional therapies such as participation in groups, one-to-one therapeutic communication, and pharmacology, work together to engage the senses and promote recovery is vital to this guide. Just like a "living environment," our Mental Health Environment of Care Guide strives to become a "living document" to help each VA inpatient mental health unit across the country deliver the most innovative Veteran-centered care possible.

As the VA works to create therapeutic spaces within a locked inpatient mental health facility, it is imperative to understand the value of collaboration that is central to all processes—from inception to planning to design to construction. To avoid costly delays such as needing to re-design or replace products, all involved must communicate—the designers, the mental health staff, the safety experts, and the builders (including plumbers and electricians). When there is streamlined communication and a clear objective (such as creating a safe, aesthetically pleasing, therapeutic living space for a locked inpatient mental health unit), all parties can contribute their expertise so this environment meets all of these criteria—safety, functionality, beauty, and therapeutic benefit within the context of mental health standards of care. Not only does collaboration result in cost-effectiveness, it increases the best outcomes for veterans who need this space.

To learn more about specific information on the planning and construction of the physical environment, please refer to the *Office of Construction and Facility Management's Mental Health Design Guide*, electronically located at http://www.cfm.va.gov/til/dGuide.asp

Guiding Principles

This information is taken from the Office of Construction and Facilities Management Mental Health Design Guide.

Ten Fundamental Components of Recovery:

1. **Self-direction**
2. **Individualized and person-centered**
3. **Empowerment**
4. **Holistic**
5. **Achievement of full potential**
6. **Strength-based**
7. **Peer support**
8. **Respect**
9. **Responsibility**
10. **Hope**

Guiding Principles

Principle #1: Mental health services should be recovery-oriented

- Patient and family-centered
- Rehabilitation/recovery-focused
- Evidence-based
- Emphasis on community reintegration

Principle #2: Mental health services should be provided in a therapeutically enriching environment

- Home-like
- Familiarity
- Visual and physical access to nature to promote healing
- Patient autonomy, respect, and privacy

Principle #3: Mental health services should be provided in a safe and secure environment

- Minimize potential physical hazards
- Enhance staff visibility and engagement with patients
- Integrate abuse-resistant materials, furnishings, and fixtures
- Incorporate safety-promoting technologies (e.g., personal safety alarms or pressure-sensitive door alarms)

Principle #4: Mental health services should be integrated and coordinated

- Promote collaboration among care providers
- Utilize and streamline technologies to promote continuity of care
- Treat the patient for multiple diagnoses in the same setting as much as is possible

Principle #5: Mental health services should be provided in settings that respect and accommodate a diverse patient population and care needs

- Provide appropriate accommodations for specific patient groups
- Promote safety, privacy, and dignity for female Veterans
- Provide separation within inpatient units or provide distinct units where necessary

Evaluation Factors

The goals of the product evaluations contained in this document are multilayered; many resident experts in specific fields are often tasked to provide input in designing and remodeling Mental Health Units. Staff responsibilities for these units may include approving furniture, interior colors, bedroom and bathroom fixtures, etc. Therefore, critical thinking, communication, and a comprehensive guide will facilitate an end product that will provide a safe and pleasant environment for patients and staff.

Look for this table on each product page for the Evaluation Rating Guide

PE	MC	ICI
😐	☺	☹

Product Evaluation Ratings (PE):

☺ **Beneficial**—first priority for evaluation and testing

😐 **Suitable**—second priority for evaluation and testing

☹ **Limited**—item may have limited or restricted applications, further evaluations and testing by clinical and safety staff for the specific environment.

Maintenance Concerns (MC):

☺ **Low Maintenance**—product or item is very durable with stable material, is chemical-resistant, and may withstand physical abuse. Examples: a one-piece molded bed or chair, stainless steel toilet paper dispenser, or polycarbonate and ABS plastics.

😐 **Average Maintenance—**product or item is durable and may withstand limited physical abuse. Examples: surface-mounted items, soft surface materials that could be scratched, etc.

☹ **High or Poor Maintenance**—product or item may be damaged and may be difficult or impossible to repair. Examples: Formica® laminated furniture, items made from Medium Density Fiberboard (MDF), products that require fasteners, and some surface-mounted items.

Infection Control Issues (ICI):

☺ **Beneficial**—Product or item is bacteria-resistant with a hard, impervious surface, and is easily cleaned.

😐 **Suitable**—Over time, the product or item may have designs issues that could increase infection problems.

☹ **Limited**—Product may have a highly textured surface, deep ridges, or corners that makes thorough cleaning difficult.

Note: Preliminary ratings/evaluations are in no way an endorsement of the product for final application in Mental Health Care units. All items must be reviewed by the appropriate Behavioral Health Care and Safety staff prior to placing items on locked inpatient units.

Waste Receptacles

Waste Receptacles are necessary to maintain a clean environment. Consideration should be given to the staff interaction with patients in each space to determine appropriate needs.

Because of unique safety concerns, inpatient mental health areas will not permit patients to use plastic bags or waste receptacles with components that can be detached and used as a weapon.

Likewise, waste receptacles in patient bedrooms must not be able to support significant weight.

Common items used for waste receptacles are:

Paper bags: (available on GSA Advantage)

Paper Bags:
Pros:
- Do not support weight of any kind
- Cost-effective
- Take very little space to dispose
- Very little space required to store as a supply

Cons:
- Do not hold fluids
- Poor aesthetics

PE	MC	ICI
☺	☺	😐

Collapsible Waste Receptacles:
Vernacare
A disposable, non-weight bearing waste basket is designed with "patient safety" in mind.

- Safe - lightweight and collapsible at a weight of 40kg/88lbs
- Leak proof - will hold liquids for up to 4 hours
- Single use - improves infection control Environmental - made from 100% recycled pulp

Collapsible Waste Receptacles
Vernacare
Pros:
- Collapsible at 88 lbs.
- Hold fluids for up to 4 hours
- Aesthetically pleasing
- Single use improves infection control

Cons:
- Support up to 88 lbs.
- Can be cost prohibitive (approximately 99 cents per unit)
- Requires limited space to store stock supplies
- Requires additional space for disposal
- Can be misidentified as flower pots.

PE	MC	ICI
☺	😐	☺

Clocks

Peter Pepper

Pros:

- Sloped frame
- Secured with tamper resistant screws allows for access for maintenance and battery replacement
- Large face (12"Diameter) allows for distance viewing
- Available with variety of clock faces
- Available with atomic components (Master Frequency required)

Cons:

- 12" Diameter face may not be large enough for distance viewing
- Custom product may be required larger than 12" diameter face

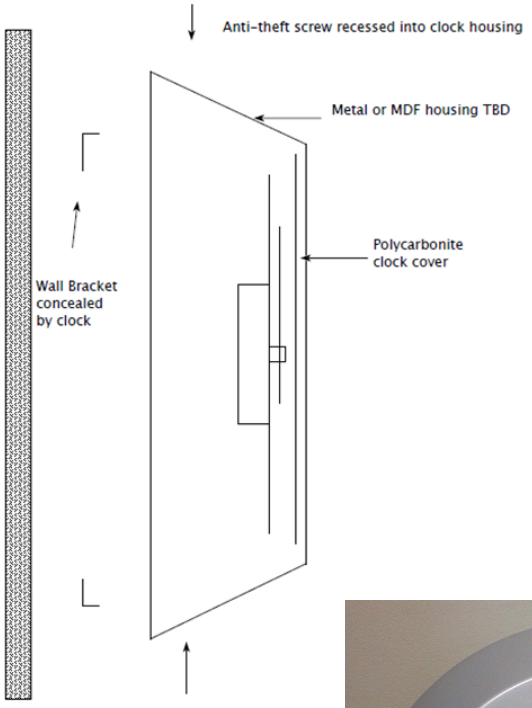
PE	MC	ICI
😐	😐	☺

Clocks will be placed in common areas to allow patients to maintain daily routines and assist with orientation.

All clock faces should be covered with a non-breakable material and have all components covered to prevent inappropriate access. And, although clock covers should be secured with tamper-resistant screws, they should not be permanently sealed to the wall to allow for maintenance and battery replacement.

Attempts should be made to place clocks where patients cannot reach or gain physical access, but they should be clearly visible and readable. (example—on a wall at the nurses' station where patients do not have direct physical access, NOT in patient bedrooms)

Peter Pepper Clock—specifically designed for Mental Health



Signage

The VA requires the proper room identification and has developed a guide for location of required signage. The Signage Guide also includes a section specific to inpatient mental health environments. For additional information on the VA Signage Guide, please visit the Technical Information Library. http://www.cfm.va.gov/til/spclRqmts.asp#SIGN

The VA Signage Guide requires signage to meet requirements for tactile room numbers with accompanying braille. However for an inpatient mental health unit, letters and numbers must not be able to be torn from the sign, nor should the sign be easily removed from the wall. Flexible materials should be used to eliminate the sign from being thrown or used as a weapon if it does become dislodged from the wall. It is also suggested that signs are securely mounted to the wall and sealed around the perimeter.

Apco Signs

Pros:

- Flexible material
- No sharp corners
- Includes braille and text as part of sign

Cons:

- No opportunity to customize specific room information

PE	MC	ICI
☺	☺	☺

Apco Signs are made from a flexible material. Room numbers and letters are screen printed and colors allow for appropriate contrast between the background and the text. Apco signs are securely attached to the wall with adhesive and have a thin profile. The thickness of the material is .04 inches. For additional security, silicone around the perimeter may be requested.

Apco offers a complementary product with a dry erase board on the bottom portion. However, the dry erase backing is hard and therefore the entire unit loses its flexibility.

2/90 Sign Systems

Pros:

- Flexible material
- No sharp corners
- Includes braille and text as part of sign
- Includes space to inter-change room or patient names with paper

Cons:

- Access to slide patient name provides an access to pull the sign apart

PE	MC	ICI
☺	😐	☺

2/90 Sign Systems provide a mental health specific sign that is flexible and provides an opening for a paper insert. All text and Braille are part of the flexible material and cannot be broken off.

Innerface

Pros:

- No sharp corners
- Includes braille and text as part of sign
- Includes dry erase board

Cons:

- Hard, rigid material
- Includes components that with tools can be pried apart

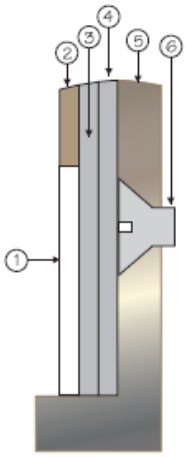
PE	MC	ICI
😐	😐	😐

Innerface offers tamper-resistant interior signage that can be requested as either the components are all permanently mounted to the wall to become a single tamper resistant unit, or the components can be added to the frame which is mechanically fastened to the wall leaving the components interchangeable with appropriate tools.

Innerface tamper-resistant signage includes mechanical fastening, solid metals frames, pry-resistant face components, a variety of colors and materials, and durable photopolymer-based raised characters and Braille. Layers are held together with VHB (very high bond) tape as shown below.

Section Detail:

1) Indellible Dry Erase Board
2) Photopolymer
3) Acrylic Backplate
4) VHB Tape
5) Metal Frame
6) Screw Mount



Artwork

Artwork provides a visually pleasing environment but may also integrate products that cause a safety concern. All artwork and frames should be free from materials that can be broken to produce sharp edges. Likewise, artwork must be well secured to the wall to prohibit removal and consideration should be given to seal all sides and edges.

In all cases, the installation method is just as important as the type of product being provided. Installation must be supervised by an individual with the knowledge regarding the strict safety precautions necessary, and every piece should be inspected individually before the space is used for patient occupancy.

Location of the artwork should also be considered. Wall spaces within a direct line-of-sight from staff is ideal. Avoid placing artwork in alcoves or around corners from the nurse station. These spaces would allow patients an opportunity to tamper with the artwork.

Direct application:
Pros:
- Flexible material
- Frame can be made from various materials

Cons:
- Difficult to repair or change images
- Requires routine inspection for damaged or loose items

PE	MC	ICI
😐	☺	☺

Direct application:
Images can be applied directly to the wall with vinyl wall covering or painted materials. To secure edges, composite molding can be mounted directly to the wall to create a frame. All edges should be sealed to decrease tampering.

Adhesive Text:
Pros:
- Flexible material
- Applied directly to the walls with no depth or framing needs

Cons:
- Difficult to repair or change text
- Requires routine inspection for loose edges

PE	MC	ICI
☺	☺	☺

Adhesive Text:
Positive phrases added to walls can inspire Veterans and provide encouragement toward recovery. Adhesive text should be mounted in locations where it can be seen but not accessed. Additionally, consider an application of a clear finish topcoat to protect the text and secure edges.

Security Frame Artwork (DAC):
Pros:
- Frame is angled and the flat top is minimal
- Artwork is protected by acrylic
- Appearance is similar to artwork throughout the rest of the medical center with image and matting and frame

Cons:
- Requires routine inspection for damage or signs of tampering

PE	MC	ICI
☺	😐	☺

Frameless Artwork (DAC):
Pros:
- No Frame or Acrylic to tamper with
- Rounded corners

Cons:
- Requires routine inspection for damage or signs of tampering
- Unit is the size of the image which can appear small on a large wall

PE	MC	ICI
☺	😐	😐

Security Frame Artwork
Security frame artwork is comprised of multiple components. The artwork itself is matted and secured to the outer frame and covered with a non-breakable Lexan material. An additional component (or interior frame) fits inside the outer frame and is completely concealed when fully installed. The entire piece should then be sealed to the wall with a clear caulking.

Not only is the framing and physical composition of the artwork important, but careful consideration should be given to the images within the artwork as well. Specific colors or images may impact the recovery of the patients. Speak with the staff to gain information on the specific population of the Veterans at your facility and geographic area.

Security Frame
Designers Art of California (DAC) is working to patent this item and the installation method. For more specific information, please contact Designers Art of California.

Frameless, no-cover artwork
Designers Art of California (DAC)

Printed Acrylic:
Pros:

- No frames or layers to separate
- Artwork is protected by acrylic
- No sharp edges
- Matte or gloss finish

Cons:

- Requires routine inspection for damage or signs of tampering

PE	MC	ICI
☺	☺	☺

Printed Acrylic provides artwork without unnecessary layers of material or framing. The image is printed on the back of clear acrylic with beveled edges and secured with counter-sunk tamper-resistant screws. Edges are sealed to the wall with clear caulk. The acrylic can be specified in a gloss or matte surface.

Images and details provided by James Gallery

installed view of fit to wall with silicone bead

installed view of radiu beveled edge and recessed security screw

front view of radius corner and recessed security screw

side view of 3/8" acrylic beveled edge and security screw

Housekeeping Carts

Rubbermaid
Pros:
- No sharp edges
- All compartments are lockable

Cons:
- May pose false sense of security as patient may remove metal components or chemicals if not secured and monitored at all times.

PE	MC	ICI
☺	☺	☺

Royce Rolls
Pros:
- All compartments are lockable

Cons:
- Corners may be sharp if patients are in the same areas while Housekeeping is cleaning
- 90 degree corners may collect dirt and debris

PE	MC	ICI
☺	☺	😐

Additional safety features should be included for the housekeeping carts kept on inpatient mental health units. Additional locks should be included and special attention should be given to the items placed on the cart. Carts should never be left unattended.

Structural Web Plastic:

Rubbermaid Mental Health Compliant Cart has been retrofitted and modified based on input from VHA. Manufacturer has modified standard product to meet strict safety requirements reviewed by VHA.

All compartments are lockable and allow for separate storage areas for paper products, trash collection, mopping supplies, and cleaning chemicals. This cart is made of a durable, non-rusting and easy-to-clean aluminum and structural web plastic construction.

Model # 9T75
The Joint Commission compliant locking cabinet doors, locking security hood, and waste cover. Lock 'N Go bucket attachment, Tool grips hold handles upright, removable 10 quart Disinfecting caddies, non-rusting and easy-to-clean aluminum and structural web plastic construction. This cart has 7.25 cu. ft. of locking cabinet space.

Stainless Steel

Royce Rolls Mental Health Compliant Cart has been retrofitted and modified based on input from VHA. Manufacturer has modified standard product to meet strict safety requirements reviewed by VHA.
All compartments are lockable and allow for separate storage areas for paper products, trash collection, mopping supplies, and cleaning chemicals.

Model # GF36-PST2
Stainless steel cart contains two shelves, lockable door, zip bag, locking trash lid, pouch24, Mesh bag, and PST2 locking double tub and sieve. Options for C or F platform carts include single or double microfiber container. The cart has four keyed alike locks.

Specialized Equipment

EMS Personnel will need to move furniture for the purposes of cleaning. Due to the often heavy or awkward items on inpatient mental health units, specialized equipment should be provided to assist housekeepers and decrease the risk of injury.
Some furniture manufacturers may provide a dolly specific to their products, when possible purchasing and making these readily available to housekeeping can prevent injury when performing job duties. (for example Spec Dignity Lounge Chair)

Anything that can be stored in carts or in the housekeeping closets would be ideal. Most of these items can be purchased at any hardware store and are not manufacturer specific. Depending on the size of housekeeping closets on the units, these items may need to be stored off the unit.

Dolly
Pros:
- Holds larger pieces of furniture
- Available as a frame as shown below or platform

Cons:
- Requires significant amount of storage space

PE	MC	ICI
😐	☺	😐

Dolly
A four wheel platform dolly allows for movement of any size furniture over various types of flooring material. Once placed upon the dolly, furniture is moved with relative ease and little effort. This item is available at most hardware stores and through various sources on GSA Advantage.

Furniture Sliders
Pros:
- Can be kept on Housekeeping Cart

Cons:
- Not Ergonomic
- May require more force to slide than rolling options
- May be easy to forget to remove and be left in place under the furniture

PE	MC	ICI
😐	😐	😐

Furniture Sliders
These small discs can be kept in small spaces and can be placed under the feet or corners of the furniture to allow staff to slide the furniture without extreme force. Available through multiple sources and brands. Sliders will hold approximately 750 lbs.

Tri-Caster Plate
Pros:
- Easy rolling for large heavy furniture

Cons:
- Too bulky to be kept on Housekeeping cart
- May need multiple sets to move one piece of furniture
- May be difficult with plinth type base items

PE	MC	ICI
😐	☺	☺

Tri-Caster Plate
Smaller dollies with casters are available and are intended to be used with one at each corner or each support leg. These are smaller that the furniture dolly and require less storage space. They may still be too large to keep on the housekeeping cart, but may fit in the housekeeping aide closet on or near the unit.

All other housekeeping equipment should be kept in locked HAC. Large equipment should be kept off the patient care unit.

Sally Ports

Sally Ports:
Pros:
- Sally Ports provide a level of security to eliminate or reduce elopement potential
- Eliminate or reduce contraband into the unit

Cons:
- Sally Port configuration may restrict the movement of equipment; e.g., bariatric beds. Consider door arrangement to allow equipment to enter the unit

Lockers:
Pros:
- Secure location to leave items/belongings outside of the locked unit

Cons:
- Size and height of lockers might pose a problem for ADA visitors
- Types of locks and keys may pose a security and maintenance problem
- Security cameras may reduce thief claims against the VA for alleged thief of personal effects left in lockers

PE	MC	ICI
☺	😐	☺

All entrances to inpatient units are required to have a secure vestibule or sally port. The purpose of the sally port is to prevent patient elopement.

Providing secured lockers at the visitor entrance allows family members and friends to safely leave their belongings outside of the locked unit. This will decrease the potential for visitors bringing contraband onto the unit, provide peace-of-mind for visitors in knowing their belongings will be safe, and increase visiting time with friends and family of Veterans by not inconveniencing visitors by having to return items not permitted on the unit to their vehicles. Lockers should be secured to the wall and not freestanding units.

Providing a table in the sally port helps staff maintain proper ergonomic posture while checking for items not allowed to be taken onto an inpatient unit such as cell phones, backpacks, purses, or outside food. Likewise, staff can separate items that are safe such as books, magazines, mail, or clothing items without drawstrings or other embellishments that may be a potential danger. By using a table as a check-in desk, behavioral health staff may sign in visitors, offer hand sanitizer, and have time to build rapport and educate visitors as to why some items are allowed on the unit and why others are not.

Consideration should be given to the type of table and weight based on the access to this area. If it is used as an egress for patient for other activities, heavier, non-mobile tables are desirable.

Patient Bedroom

Accessories for Patient Bed Rooms:

Waste Receptacles	Yes
Clocks	No
Artwork	No

Private Bedrooms

Pros

- Provides privacy for patients without requiring additional locks
- Provides a place of refuge and reduced stimulation for a Veteran if the milieu activity increases anxiety

Cons

- Provides individual patients extended periods of time without staff or other patient interaction and could increase the risk of self-harm

Shared Bedrooms

Pros

- Provides additional layer of interaction and intervention if patient attempts self-harm

Cons

- Requires additional means of providing privacy
- Can be problematic with regard to infection-control
- Can also be an issue if Veterans have personality conflicts or if there are other issues such as snoring or wandering that keeps another Veteran awake. This is particularly problematic in mixed-population units

Bedrooms are designed with the principles of a mental health environment in mind. However, because bedrooms allow the highest level of privacy for our Veterans, particularly if they are single-occupancy, they are also the highest level of risk. For female Veterans, in particular, there is the added concern for their sense of security, particularly if they are victims of PTSD or military sexual trauma (MST). To reassure our female Veterans, it is suggested to have their rooms segregated as much as possible, such as being on the same part of a hallway, as well as having them be able to lock their doors from the inside. This enables greater protection, particularly at night if there is a patient with dementia or cognitive impairment who walks into other's rooms believing it to be their own room. In addition, a Veteran's bedroom should be a refuge. Karlin and Zeiss stress the need for Veterans being able to control their level of social contact, choosing to either retreat and have a quiet space for resting or have increased interaction in thoughtfully designed common spaces (2006). Lastly, a Veteran should get a homelike feeling from the bedrooms décor and use of color. Research suggests that warm colors, such as reds, oranges, and yellows may be more activating and appropriate for areas designed to promote social activities while cooler colors, such as shades of blues and greens increase feelings of calm and relaxation and may be beneficial in Veterans' bedrooms. (Dalke, Little et al. 2006). In lieu of traditional wall art that may have difficulty meeting safety standards for high-risk areas such as bedrooms, recovery-oriented statements can be applied to the walls to use this environment to facilitate healing.

Bolting Beds to the floor

Pros

- Eliminates the ability for a patient to move the bed to block entrance or exit, or to reach above standing height

Cons

- Eliminates the ability to easily switch out a platform bed for a medical bed if the need arises

Norix Sleigh Bed

Pros

- Raised off floor to allow for use of patient lifts
- One-piece molded bed reduces opportunity to remove parts

Cons

- Could be stood on end and balanced increasing potential for anchor points.
- Footboard could be used as an anchor point

PE	MC	ICI
☺	😐	☺

Platform Beds

Pros

- No headboards to act as support if stood on end.
- If bolted to the floor, they can be sealed to eliminate the need to move for cleaning

Cons

- No opportunity to use a patient lift
- Must review with manufacturer the options for headboard, and drawers prior to order
- If not bolting to the floor, ensure a review of the underside of bed is performed

PE	MC	ICI
☺	☺	😐

Standard Beds are appropriate for patients who are physically able to get in and out of bed safely without it needing to be raised or lowered. These beds can be secured to the floor to prevent it being moved and used as a barricade or other effort of self-harm. Likewise, standard beds must be free of anchor points. All items secured to the floor should be sealed to prevent liquids or spills from traveling to areas under the furniture that cannot be accessed for cleaning.

Norix Sleigh Beds were designed to allow a patient lift to be used. They are made as a one piece molded material.

Platform Beds

Many manufacturers offer "Behavioral Health Platform beds." Be sure to review the specifications carefully. Several manufacturers include items such as removable glides for leveling, drawers for storage, and restraint handles that can be used as anchor points. You should work with your local representative or factory to have these items removed or corrected prior to delivery. Otherwise the VA will be required to spend additional money to correct these patient safety risks.

Manufacturers for Platform beds include:

Hill-Rom Harbor Glen must be modified to remove restraint handles and floor glides.

Norix Attenda
These beds are tested to a 1000 lb. static load. Made of rotationally molded high impact polyethylene.

Nemschoff, Behavior health line, must be ordered without headboard and without drawers. Standard bed holds up to 750 lbs, heavy duty bed mounted to the floor will hold up to 1000 lbs.

Photo above shows Norix Attenda beds with home-like bed linens

Mattresses for inpatient units require additional consideration. Zippers, cording and non-breathable materials are all items that must be eliminated from mattresses provided in this environment. Interior mattress components also need to be considered to ensure patients will not have access to inappropriate materials should the mattress be destroyed to access those interior components.

Derby Industries Pinnacle Mattress
Pros
- Foam core does not provide access to contraband if destroyed
- Ballistic material provides rip-stop
- Heavy duty option increases weight capacity to 450 lbs.

Cons
- Limited 5 year warranty

PE	MC	ICI
☺	😐	😐

Derby Industries Pinnacle Mattress is a foam construction with a fluid-resistant breathable vent protect the padding by locking out fluids. The Secure Care cover is integrates ballistic material into the cover to provide a rip-stop to control mattress damage. The standard foam core supports up to 250 lbs. The Pinnacle Plus supports up to 450 lbs.

Norix Comfort Shield Mattress
Pros
- Foam core does not provide access to contraband if destroyed
- Kevlar thread for strength and durability
- No weight limitations for mattress warranty

Cons
- 3 year prorated warranty
- No weight limitations can be provided by manufacturer

PE	MC	ICI
😐	😐	☺

Norix Comfort Shield Mattress is a foam core mattress with a nylon mattress cover with laminated fire retardant barrier. The polyurethane coating is fluid repellant, anti-bacterial, anti-fungal, crack resistant, stain resistant and breathable. The mattress has an inverted seam and Kevlar thread for strength and durability.

Medical Beds

Pros
- Support the medical needs of patients
- Allow the patients to remain within the inpatient unit instead of transferring to a medical unit

Cons
- Many anchor points and potential patient safety hazards

Medical Beds are necessary for patients who have physical limitations and may need a bed raised or lowered for access in addition to interventions such as elevating the head for comfort or elevating the foot of the bed to decrease swelling in the legs. Because of the nature of needing to be moved for patient care, medical beds are not secured to the floor, but rather have brakes to lock them in-place. All rooms with medical beds, however, require increased monitoring because of the possibility of using rails or other components of the bed as anchor points.

Sizewise Medical Bed

Pros
- Nursing lock out controls with universal key
- Contiguous molded construction of headboard, footboard and side rails
- Add on features are bolted to bed frame
- Tamper-resistant encased wiring
- Accommodates patients up to 850 lbs.

Cons
- May provide limited anchor points for underneath

PE	MC	ICI
☺	😐	☺

Sizewise Beds have been specifically designed to eliminate the common safety risks on medical beds. The Footboard contains a nursing lock our control. The bed has contiguous molded construction for head, foot and side rails, and the wiring is encased in tamper-resistant enclosure. This bed can accommodate patients up to 850 lbs.

Stryker Medical Bed

Pros
- Support the medical needs of patients.
- Minimizes safety risks through elimination of unnecessary components
- Tamper resistant screws
- Removable levers

Cons
- May provide staff a false sense of safety because it is marketed a “psych bed”
- Many anchor points

PE	MC	ICI
☹	😐	😐

Stryker has developed a medical bed that begins to meet some of the safety requirements of this type of environment. Safety features like low bed height and optional features like tamper resistant screws and removable adjustment levers (to be used by staff only) are available on this bed.

Nightstands can be provided in all patient bedrooms and are secured to the floor or wall for safety. It is important they are placed within arm's reach of the bed for access to water pitchers, reading materials, and any other relevant items the patient may need. All items secured to the wall that also touch the floor should be sealed to prevent liquids or spills from traveling to areas under furniture that cannot be easily accessed for cleaning.

Regarding the placement of nightstands and wardrobes be aware of the space between the unit and the wall. Enough space should be provided so that limbs cannot be wedged and twisted to increase opportunity for self harm. Be aware of observation points to increase the ability for patients to hide from staff when entering the room from the corridor or patient bathroom.

Nightstands / Wardrobes — Laminated

Pros
- Many styles and colors available (Laminate)

Cons
- Laminate shelving may be broken from sides if a patient stands on shelving
- Delamination from fluids or vandalism is not repairable
- Installation flush to the wall may require additional work to cut the cove base or coordination of specifications to be pre-cut to match profile

PE	MC	ICI
😐	😐	☺

Laminate
Nemschoff laminate nightstands can be custom modified to your specific facilities needs, either flat top or angled sides are available. You will need to work with your factory representative and local staff to determine the need of your facility. (additional photos are shown in the Appendix of this document).

Molded
Norix nightstands are made of rotationally molded high impact Polymer offers a seamless construction with rounded corners.

Nightstands/ Wardrobes — Molded

Pros
- Non-breakable
- Shelves cannot be pulled from sides or broken

Cons
- Limited styles and colors

PE	MC	ICI
☺	☺	☺

Wardrobes should be provided in each room to promote a home-like environment and allow a space for a patient to secure and organize clothing and relevant personal items. For safety, they do not have anchor points or locking capacity. Likewise, wardrobes must be sealed to prevent materials from seeping beneath or behind them. Wardrobes may be built-in during construction or purchased as furniture.

Laminate
Nemschoff laminate wardrobes can be custom made to fit over the type of base in the room to eliminate the need for field modification.

Molded
Norix wardrobes are to be installed on the wall not touching the floor. Ensure enough space is left below for floor care and cleaning.

Cabot Wrenn, Lisbon
Pros
- Available With or Without Arms
- Heavy weighted chair (75 lbs)
- Plinth base is a material that will not absorb or wick liquids

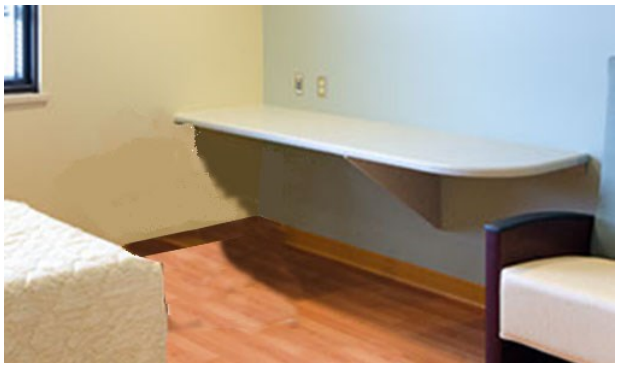
Cons
- Tight space between seat and back may hide contraband (specifying without arms eliminate an additional space on the sides)

PE	MC	ICI
☺	☺	😐

Chairs are provided for desks or additional bedroom seating. They are designed for both comfort and safety and, if for the desk, a chair should not be attached with a horizontal bar as this creates an anchor point. The seat may be supported by a cylinder secured to the floor or they may be freestanding. If they are not attached to the floor, it is recommended the weight and shape does not support the ability to be picked up and thrown.

Cabot Wrenn, Lisbon is meant to be used as a reading chair. It is weighted to minimize a patients ability to move or throw. This specific item is shown upholstered with Xorel textiles. (additional photos are shown in the Appendix of this document)

Desks also create a more home-like environment and can be built in or attached at the wall; rounded corners prevent anchor points. Again, if they are attached at the floor and wall, they must be sealed for cleanliness and infection control as well as prohibiting items from being wedged or wrapped to create and anchor point. Desks are beneficial as they allow an area for patients to read and write, therefore encouraging introspection and creativity. Appropriate chairs should be included.



Norix, Attenda Stool
Pros
- Can be floor mounted
- No anchor points

Cons
- Does not promote a healing environment

PE	MC	ICI
😐	☺	☺

Norix Attenda stool is an option for a patient desk. It can be mounted to the floor and provides no anchor points.

Norix, Integra
Pros
- Available With or Without Arms
- Lightweight chair (7 lbs.)

Cons
- Does not promote a healing environment

PE	MC	ICI
😐	☺	☺

The **Norix Integra** armless chair is lightweight (7 lbs) and will hold up to 400 lbs.

On an inpatient mental health unit, safety is the highest priority. Windows and window treatments can greatly enhance the environment, particularly if windows look on to a natural scene—even a tree or a city scape as opposed to another wall or a parking lot. Windows must not be able to be opened by the patient and must also be unbreakable in the event it is struck by an object or a person. Likewise, window treatments must also be functional and safe—they should be adjustable to let in a desired amount of light whether that is full, bright light or a diffuse amount of light to enable a patient to rest more easily. No components of any window treatment should be able to be removed or altered in any way that may cause patients to hurt themselves or anyone else.

Window Treatments allow for more privacy and adjust the amount of natural light in a room. Patient bedrooms must have the highest security level for window treatments. Shades between glass is preferred. Control of the shade may require key access or a special tools to eliminate knobs that could be removed and swallowed.

WebbShade, WebbLok

Pros
- Allows control by patient
- Available in a variety of colors and patterns

Cons
- Although tested extensively increased level of abuse may allow for patient to tamper with controls

PE	MC	ICI
☺	😐	😐

WebbShade, WebbLok provides secure shades and a track that are tamper resistant. All mechanisms to operate the shade are contained within areas that are secured with tamper resistant screws. The shade is operated through finger clips at the base of the shade. These finger clips have been tested in many locked, inpatient mental health units and have been proven effective.

The shades are cordless with preset leveling stops that give an architecturally pleasing appearance from the inside the building as well as from outside. Installed with heavy-duty security boxes and security fasteners, they provide a safe, durable, and attractive solution. Shade can be made with custom prints on the shade or in a variety of colors and patterns.

WebbShade, WebbGlide

Pros
- No accessible parts

Cons
- Not intended for patient bedroom
- More appropriate for areas where staff have visible access

PE	MC	ICI
😐	😐	😐

WebbGlide is another product by WebbShade for areas that may be less abusive. The WebbShade does not have finger-clips to lock and release the shade from moving up and down, but it still contained within side tracks.

Additional treatments for patient bedroom windows include a window film that can be permanently applied to the window glazing, however this is semi-permanent and cannot be controlled by the patient.

All Patient bedrooms will have a variety of **Textile products.** Sheets and blankets create a huge risk in patient bedrooms as they most often used as a rope and attached to an anchor point.

Bed Linens

When reviewing linen options for the patient bedroom be sure to use hemmed fitted sheets without elastic or flat sheets only.

Non-elastic-hemmed fitted sheets are available from the following manufacturers on GSA Contract:

- Encompass Group LLC
- Med-I-Pant (MIP), Inc.
- American Textiles Systems

Riley Bed Linen

Pros
- Bulky material deters use as a lanyard
- Color and patterns add to the therapeutic environment

Cons
- May require modified laundering due to temperatures achieved in VA Laundry Plants or contracted Laundries

PE	MC	ICI
☺	☺	😐

Riley Therapeutic Psychiatric Safety Bed Linen is a heavy weight option that provides a safer bed linen options. The quilting is tear resistant and the material creates a thicker less lethal lanyard. The top and bottom layers are seamed together with strong polyester thread.

The linen is a one piece design, therefore it is a visual cue to investigate a room where the bed is empty of all bed linens.

Patient Bathroom

Accessories for Patient Bathooms:

Waste Receptacles	Yes
Clocks	No
Artwork	No

Patient Bathroom items are installed during construction or renovation. Therefore discussion on the items for this area are addressed in the CFM Mental Health Design Guide and the Mental Health Environment of Care Checklist. These documents can be found through the links provided below.

Office of Construction and Facilities Management
Mental Health Design Guide
http://www.cfm.va.gov/til/dGuide.asp

VA National Center for Patient Safety
Mental Health Environment of Care Checklist
http://www.patientsafety.va.gov/professionals/onthejob/mentalhealth.asp

Philosophy
Like bedrooms, bathrooms are one of the most private areas on an inpatient mental health unit. Therefore, functionality and safety are equally important and cannot be compromised in the design process.

The following items are addressed in the CFM Mental Health Design Guide and the Mental Health Environment of Care Checklist:

Sinks are attached to the wall, without anchor points, durable, and modern in design. Sinks should include safety features to prevent a patient scalding himself or herself with hot water.

Toilets are also without anchor points. In addition, they should be environmentally friendly, comfortable, and handicapped-accessible.

Mirrors are shatterproof and placed in the bathroom for convenience of self-care activities as well as encouraging grooming as it relates to self-esteem and the recovery process.

Waste Receptacles are convenient for patients and help keep shared bathrooms clean. They are identical in safety needs for sleeping room waste receptacles although consideration for contact with water is more of a concern and may require something more durable (See General Section Page 12).

Shower / Privacy Curtains, like bathroom privacy curtains, allow patients to shower with increased privacy and help confine water to the shower area. They are not effective anchor points as they hold little weight.

Privacy Curtains offer patient privacy for using the toilet facilities, showering, or other activities of daily living. They are safe in that they support less than five pounds and help patients maintain their sense of modesty and dignity.

Additionally, any items mounted to the wall that protrude may impede on the ADA regulations and the VA Barrier Free Guide requirements.

Norva Plastics

Pros:

- Drop in Soap Cartridge – lid will not fall off when changing soap
- Ability to swap out soap containers in less than a minute
- Dispenser bolts security to the wall
- Cleanable surfaces

Cons:

- Not ADA— ADA issues, small push button to dispense soap
- Only locks on one side

PE	MC	ICI
☺	😐	☺

OPS 1-Touch

Pros:

- No buttons, levers or plungers that can be broken
- Multiple soap cartridges
- Each soap cartridge provides 2500 pumps
- Anti-ligature Surface Mounted Soap Dispenser
- Corrosion restraint Stainless Steel
- Warranty against damage for 5 years
- ADA compliant
- Vinyl coated parts on the shower unit
- Both the pumps and cartridges are disposable

Cons:

- Institutional appearance.
- Sharp corners
- Requires non-standard soap products

PE	MC	ICI
☺	☺	☺

Soap Dispensers are attached to the wall and are sturdy without any removable wall mounting. They dispense liquid soap that would not be harmful if ingested.

Flush Mounted

Norva, **Style #2,** www.norvaplastics.com/
Material: Impact resistant solid surface e.g. Corian type material

The OPS® 1-TOUCH™ Dispensers and Soap Cartridges

- OPS Hand, Hair and Body Shampoo
- OPS ECO / DFE Approved Hand Soap
- OPS Instant Hand Sanitizer
- OPS Antibacterial Hand Soap

The OPS 1-touch bathroom soap dispensers are made of stainless steel that is vandal proof, puncture proof and resists being damaged. There is no way to tamper with the soap inside of the dispenser, so you can be assured the soap, shampoo, and body wash is safe. Additionally, there are no parts that can be broken off and turned into weapons.

Both the pumps and cartridges are disposable, so there is no need to clean out the dispensers before refilling them. This helps to eliminate bacteria growth and the soap becoming contaminated.

Bradley / Grainger

Pros:

- Recessed mount, harder for the patient to damage the unit or remove it from the wall
- Corrosion resistant Stainless Steel (SS)
- Four screw holes are provided on the face plate to reduce the possibility of bending metal from wall thus ensuring proper attachment

Cons:

- May be ok in a single patient restroom by the sink/shower; however, may not work well in a facility where a restroom is shared
- Recessed mount requires a hole cut into wall. Fire wall installations should be reviewed by appropriate safety personnel prior to installation
- Difficult install in existing conditions

PE	MC	ICI
☺	☺	😐

Recessed Soap Dispensers (Holders) are mounted into the wall and are sturdy with any removable wall mounting.

Bradley

Material: Stainless Steel

Grainger

Material: Stainless Steel

SafeSupport

Pros:

- Sloped top to reduce attempts as a ligature point
- Stainless steel or powder coated surface
- Multiple fasteners to secure item to wall
- Approved for fire walls
- All units are keyed alike
- Cleanable surfaces

Cons:

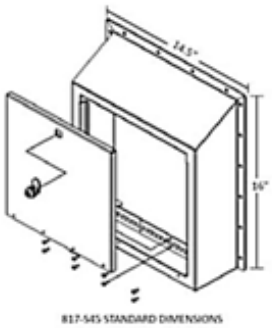
- Sharper corners
- Ensure that the gap for towel dispensing is small enough to prevent being a ligature point
- Paper towels could be used to clog toilets

PE	MC	ICI
☺	☺	☺

Flush Mount Paper Towel Dispensers

SafeSupport® SR paper Towel Dispenser
This is a surface mounter paper towel dispenser, this item requires c-fold towels

Material: Stainless Steel



Logica

Pros:

- "No touch" operation by electronic infra-red sensor, maximizes hygiene and economy of operation
- Infra-red sensor
- Fully automatic operation - switches off within 3 seconds of hand removal
- 100w induction motor & 2100w heating element
- Eliminates the possibility of paper towels used clog plumbing
- Surface mounted

Cons:

- Connected to AC power
- Infectious agents may be aerosolized

PE	MC	ICI
☺	😐	😐

Logica AC Powered Hand Driers (Flush Mount)

Logica LG03 stainless steel hand dryer

Company:
http://www.ribaproductselector.com/Docs/4/27434/external/COL475661.pdf

Material: Stainless Steel

Wallgate

Pros:

- Less than 0.3 liters of water is dispensed per cycle
- Less than 0.02 KWh is used per operation
- Instant water heater consumes power only when in use
- Washing and drying cycle can be completed in 30 seconds
- Drier has 3 speed setings
- Typically 90% savings compared with traditional washroom solutions
- No-touching of surfaces needed

Cons:

- Substantial installation required including utilities

PE	MC	ICI
☺	unknown	☺

Recessed Paper Towel Dispeners

Wallgate All in one hand-washer drier
The Thrii is a brand new and revolutionary all-in-one hand washer drier.
www.wallgate.com/thrii.php

Material: Solid surface material or Stainless Steel

Norva Plastics

Pros:

- Spindles are a tight fit between the toilet paper and side supports of the holder should reduce the contamination of the flexible spindles

Cons:

- A choking risk or other GI related complications could result if portions of the spindle were to be ingested by the patient. Note: Safety Data Sheet info: Ingestion: May be harmful if swallowed
- May require replacement spindles
- May impede on guidelines for Barrier Free Design

PE	MC	ICI
☺	☺	☹

Flush Mount Toilet Paper Dispensers

Norva Plastics

This Impact resistant solid surface material has no sharp edges. The spindles are made of flexible, breakaway extruded polyethylene foam rubber. Four screw holes are provided to ensure proper attachment to walls. This product may be installed on a fire rated wall. Available in one or two roll capacity. Easily cleaned and low maintenance.

Will reduce to clearance between the toilet and the dispenser, (may be a problem in existing facilities with limited space). May pose a problem with ADA. If the unit is not secured properly to metal wall studs, (tamper resistant caulk required) the unit may be stood on, kicked, or damaged and could separate from wall and exposing screws. Polyethylene foam rubber flexible spindle is an "Open" cell product. The surface and ends are highly textured with small pours that may be difficult to clean. Replacements parts may be required for contaminated spindles that cannot be adequately cleaned. Consultation with Infection Control Professionals for cleaning and replacement procedures for contaminated spindles is warranted.
Other facilities have reported that the flexible spindles could be flushed down the toilet, increasing the probability of a clogged toilet, resulting in water intrusion in the area.
A spindle could be used as an anchor point wrapped in a bed sheet on doors without top sensors. Spindle/sheet combination has a low profile, making harder to see by staff than a knotted sheet. Additionally, if a brown paper towel is wrapped over the spindle/sheet combination, the assembly becomes even more cryptic. Assembly will hold weight in excess of 200 pounds. (see photos in the Appendix for this product Page 68)

http://www.norvaplastics.com/suicide-resistant-toilet-paper-dispenser.asp

Material: Impact resistant solid surface material
Solid surface products are 100% acrylic, nonporous, and do not require sealing. Naturally resistant to heat, mold, mildew and most stains are easily buffed away. Material is renewable and repairable with inconspicuous, waterproof seams -- scratches are easily repaired.

Brey Krause

Pros:

- Easily cleaned and low maintenance
- Does not reduce clearance between TP holder and toilet to any appreciable amount.
- Corrosion restraint Stainless Steel
- Maybe installed on fire walls

Cons:

- If the spindle is bumped, toilet paper roll could fall on floor
- Reduced mounting surface area attached to wall, which would require less force per square inch to separate unit from the wall even with tamper resistant caulk resulting in exposing screws
- Infection control concerns – patients may have to handle the roll (slipping it off the spindle) to obtain toilet paper which could contaminate the entire roll, (removing the roll from the spindle)

PE	MC	ICI
☺	☺	😐

Flush Mount Toilet Paper Dispensers

Brey Krause,
http://www.breykrause.com/Anti_Ligature_Toilet_Paper_Holder_p/s-4045-ss.htm

Inspection:
Pin should be inspected to ensure that caustic cleaning agents or uric acid has not otherwise compromised pin break away function.

Material: Stainless Steel
Reference the materials sections for additional information on Stainless Steel characteristics

Cascade Specialty Hardware

Pros:

- Easily cleaned and low maintenance
- May be installed on fire walls

Cons:

- Will reduce clearance between the toilet and the dispenser
- May pose a problem with ADA
- May have difficulty securing to wall. May be kicked off the wall, exposing screws
- Scratches in powder coated surface will oxidize (rust)
- Scratches in the chrome plating on the aluminum spindle will oxidize from the uric acid
- Oxidization between the housing and the spindle may prevent the spindle from properly pivoting resulting in an anchor point

PE	MC	ICI
😐	😐	☺

Flush Mount Toilet Paper Dispensers

Cascade Specialty Hardware

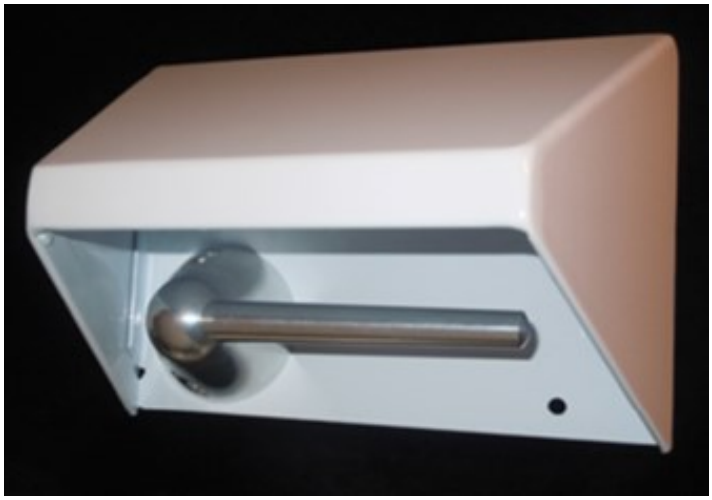
http://www.cascadesh.com/content/C-400b.pdf

Materials:

Powder coated steel housing if surface coating is damaged, unit may oxidize from uric acid.

Aluminum Spindle may oxidize from uric acid.

Stainless Steel
Reference the materials sections for additional information on Stainless Steel characteristics



Best Care (Grainger)

Pros:

- Recessed mounted, harder for the patient to damage the unit or remove it from the wall
- Unit does not reduce the clearance between the toilet and the dispenser
- Corrosion restraint Stainless Steel (SS)
- SS pins hold the toilet paper roll in place, reducing infection control issues because patients are not holding toilet paper roll
- Pins will rotate/pivot to prevent anchor points
- Four screw holes are provided on the face plate to reduce the possibility of bending metal from wall thus ensuring proper attachment

Cons:

- Recessed mounted requires a hole cut into wall. Fire wall installations should be reviewed by appropriate safety personnel prior to installation

PE	MC	ICI
☺	☺	☺

Recessed Toilet Paper Dispenser

Best Care, products are distributed through Grainger on GSA Advantage, http://www.grainger.com/Grainger/BESTCARE-Anti-Ligature-Toilet-Paper-Holder-38C420?cm_sp=IO-_-IDP-_-RR_VTV70300505&cm_vc=IDPRRZ1

Inspection:

Pin should be inspected to ensure that caustic cleaning agents or uric acid has not otherwise compromised pin break away function.

Material: Stainless Steel
Please reference the materials section for additional information on Stainless Steel characteristics.

Acorn (Grainger)

Pros:

- Recessed mounted, harder for the patient to damage the unit or remove it from the wall
- Unit does not reduce the clearance between the toilet and the dispenser
- Corrosion restraint Stainless Steel
- Four screw holes are provided on the face plate to reduce the possibility of bending metal from wall thus ensuring proper attachment

Cons:

- Infection control concerns – patients will have to remove (handle) the roll to obtain toilet paper which could contaminate the entire roll
- Recessed mounted requires a hole cut into wall. Fire wall installations should be reviewed by appropriate safety personnel prior to installation
- Difficult to remodel or change to other designs (patch and painting to repair holes)
- Infection control concerns – patients will have to remove (handle) the roll to obtain toilet paper which could contaminate the entire roll

PE	MC	ICI
☺	☺	☹

Recessed Toilet Paper Dispenser

Acorn products are distributed through Grainger on GSA Advantage,
http://www.grainger.com/Grainger/ACORN-Toilet-Roll-Holder-5RME4?cm_sp=IO-_-IDP-_-RR_VTV70300505&cm_vc=IDPRRZ1

Material: Stainless Steel
Reference the materials sections for additional information on Stainless Steel characteristics

Seclusion Room

If a patient loses control of his or her behavior and becomes an imminent threat to self or others, it is necessary to relocate the patient from the milieu to a seclusion room where a patient can be safely contained and evaluated. Taking a potentially violent patient to a seclusion room reduces stimulation, protects the patient's privacy and dignity, and allows for a close evaluation of suicidal or homicidal ideation, treatment contracting, medication delivery, and other safety measures needed until the patient can regain control of his or her behavior and interact safely in a therapeutic milieu.

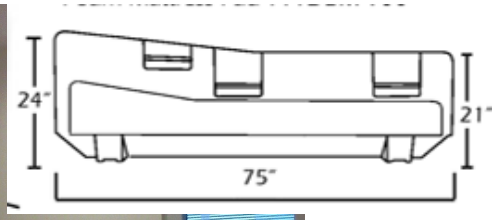
Although taking a patient to a seclusion room should be a last resort, seclusion rooms are necessary for the safety of the milieu and their use can be helpful for an acutely psychotic patient such as patients with chronic paranoid schizophrenia or who those are withdrawing from substances as well as patients who are demonstrating violent or potentially violent behaviors for undetermined reasons.

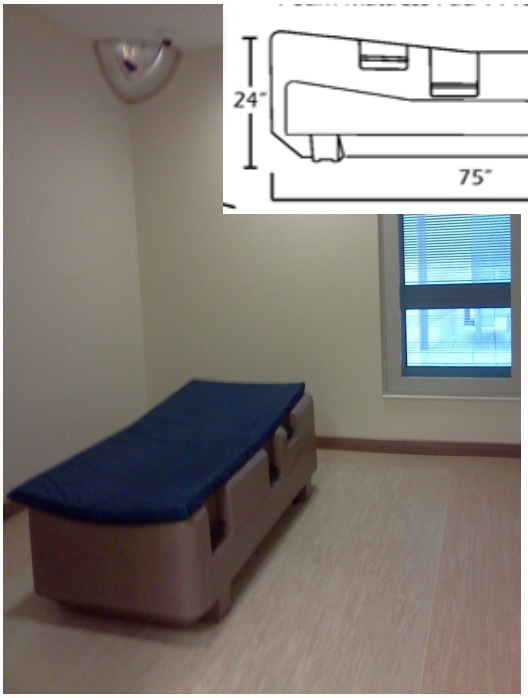
Accessories for Seclusion Rooms:

Waste Receptacles	No
Clocks	No
Artwork	No

Some of these items may be requested for an anteroom for staff who are observing patients in the Seclusion Room.

Furniture must be bolted to the floor. Consideration should be given to eliminate sharp corners as much as possible. It is very common for staff to need to physically contain a patient in this type of space. Cushioned floors or walls may be specified, therefore additional precautions should be taken when mounting furniture and mirrors to the walls and floors.





Seclusion room beds may need to have handles or bars for the use of patient restraints. This will vary from a facility level. Be sure to check with staff regarding their current policy and practices.

This bed is **Humane Restraint Isolation Bed** and provides a slight elevation for the upper body.

Humane Restraint—Isolation Bed

Pros
- Provides elevation for the head
- Provides bars for restraints if needed / used

Cons
- Limited styles and colors

PE	MC	ICI
☺	☺	☹

Humane Restraint—Duramax Bed

Pros
- Provides curved top of the bed
- Provides bars for restraints if needed / used
- May provide a better seal to the floor

Cons
- Limited styles and colors

PE	MC	ICI
☺	☺	☹

Humane Restraint Duramax Bed is another option with slightly different characteristics.

Both options from Humane Restraint require an additional purchase of the Anchor Kit for floor mounting.

Exam Room

Accessories for Exam Room:

Waste Receptacles	Yes
Clocks	Yes
Artwork	Yes

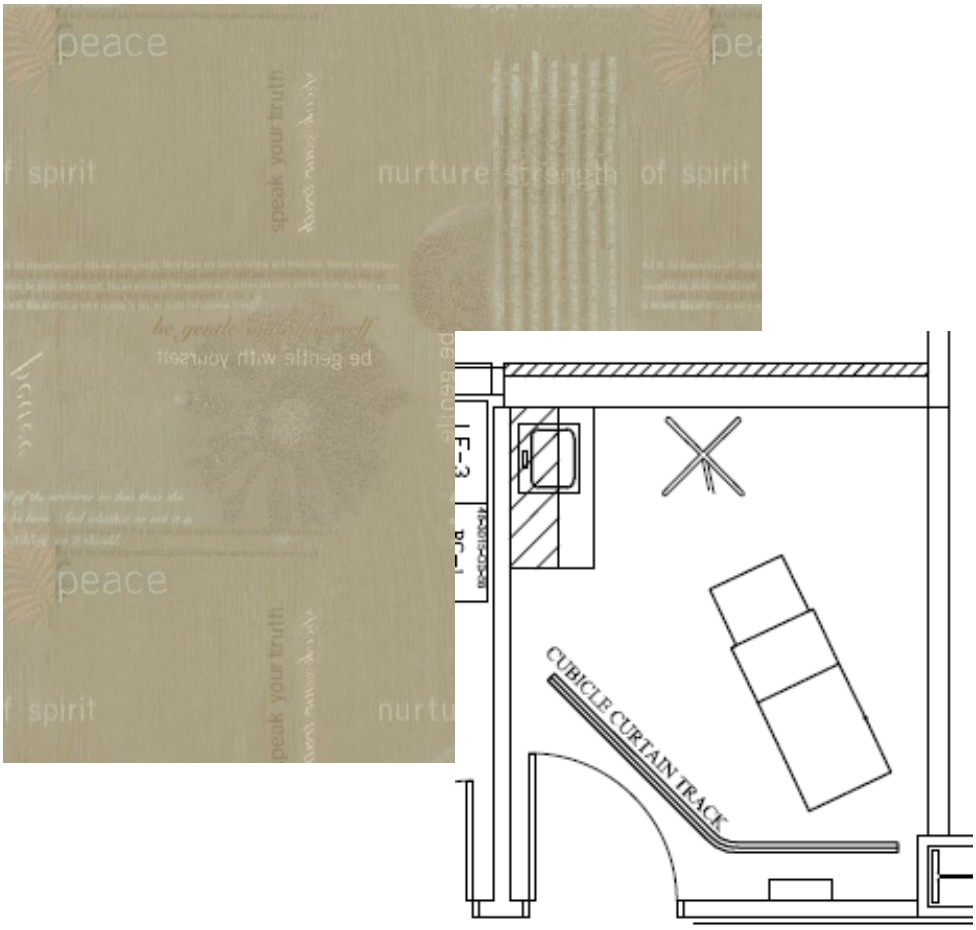
Exam rooms are among patient high-risk areas because they are typically small, closed spaces, that are necessary for privacy in examination, but may acutely exacerbate some psychiatric conditions. In addition, the Veteran may be unknown to staff. This is particularly stressful for the Veteran and could cause an increase in anxiety, confusion, or psychosis which subsequently increases the potential for unstable behaviors. Therefore, the same level of attention to detail is vital to maintain highest standards of safety for the patient, the practitioner, and staff who are involved in the exam of the patient.

Windows that are appropriate for psychiatric facilities provide natural light to aid in an exam and may possibly offer a natural view which will likely alleviate patient stress.

Medical instruments should be safely mounted to the wall and be as tamper-proof as possible although a patient should never be left alone in an exam room. Staff should always be present. Panic buttons should be accessible in the event a patient decompensates; desks and chairs should be given the same safety consideration as bedroom desks and should be placed closer to the exit than where the patient is. Exam tables should be sanitary and able to be easily cleaned as well as without anchor points; a sharps container should also be mounted on the wall for the convenience of lab technicians.

Effort should be made to introduce images or phrases to promote healing and peaceful behavior.

Sample cubicle curtain from Carnegie Textiles (Affirmation II)



Interview Room

Accessories for Interview Room:

Waste Receptacles	Yes
Clocks	Yes
Artwork	Yes

The Interview Room, as seen below, is also a high-risk area because it is intended to be a private and safe space for staff to ask questions about a Veteran's physical and mental health history as well as circumstances of present admission. Desks could have rounded edges and shelving and windows could be unbreakable and unable to be removed. The Interview Room should be arranged in such a way that both the Veteran and staff never feel "trapped." One way to achieve this is to have Veterans' chairs facing the door so they will be able to exit the room should their mental health crisis make continuing too difficult. Likewise, staff should have easy access to an emergency alert button, whether on the person or on the desk, and first egress should a Veteran's behavior escalate to where he or she is at risk of hurting others.

However, elements such as large, low windows looking out on green spaces can help to decrease anxiety as can restful colors and strategically placed and safely displayed artwork (Karlin and Zeiss, 2006). It is not necessary for all safety considerations to be implemented as the Interview Room is both a staff and patient area. There will likely be a computer, a corded telephone, and maybe even some plants to make the space functional for staff and more relaxing for the Veteran. Regardless, because all safety standards are not in-place as they would be for areas with the highest level of privacy, such as the bedroom or the bathroom, staff should never walk away, however briefly, and leave a Veteran alone in the Interview Room. This is particularly important as the Veteran is almost always in the most acute state with little or no medications on-board. If staff must leave before the interview is finished, the Veteran should be escorted from the room and the room should be locked and secured.

Dayroom

Accessories for Dayrooms:

Waste Receptacles	Yes
Clocks	Yes
Artwork	Yes

The Dayroom is designed to facilitate interactions among the patients as well as the patients and staff. Although safety is always paramount, these lower-risk areas are designed with color and flow of a room in mind as well as comfortable seating, a television with a protected cover, and sections for reading, artwork, and areas for more open groups.

Dayrooms

Pros

- Provide patients an area to engage with one another
- May provide a variety of activities
- May provide views with access to nature

Women Veterans' Dayrooms

Pros

- Provide a secure space for Women Veterans who may be affected by military sexual trauma (MST)

Cons

- Separate patients from staff or may require additional staff for this specific area

The Women Veterans' Dayroom offers extra privacy and a sense of security for female veterans, particularly those who have been affected by military sexual trauma. It will have the same comforts as the larger dayroom, except the door is locked for a sense of security and must be unlocked by staff.

Spec Dignity

Pros

- Side panels can be upholstered or laminated
- Seat and back attachment can be tight or provide an opening to eliminate the ability to hide contraband

Cons

- Upholstered side panels minimize gap and may allow for hiding contraband

PE	MC	ICI
☺	☺	☺

Seating

Seating in the dayroom should be comfortable yet free from anchor points or areas that increase the ability to hide contraband. Openings between seat cushions and side panels are available from multiple manufacturers. Seating should also be heavy and awkward to pick up—however weight needs to be considered for Housekeeping staff who will need to move the seating and tables for cleaning. If manufacturers offer a dolly for the product you specify consideration should be given to purchasing one if space allows for storage.

The Spec Dignity with laminate side panels provides a space on either side of the seat cushion. Spec has also introduced a dolly for ease in movement of this product.

Nemschoff Marsack II

Pros

- Hard surface side panels decrease areas where fabric can be torn
- Additional security panel under the seat eliminate access to the structure of the chair and increases weight

Cons

- Upholstered side panels minimize gap and may allow for hiding contraband

PE	MC	ICI
☺	☺	☺

Nemschoff Marsack II has been modified to meet the needs of the Behavioral Health Environment by adding weight to the chairs and removing access to the inside components of the seat by adding a plate secured with tamper resistant screws underneath.

Krug Zola Chair

Pros

- Variety of fabrics and finishes

Cons

- May provide crevices to hide contraband

PE	MC	ICI
😐	☺	☺

Krug Zola Chair was designed specifically for VA Mental Health. The base is made from a material that will not absorb or wick liquids.

Cabot Wrenn Turn Table

Pros

- Additional Weight made to be +/- 100 lbs.
- Angled underside reduces grip to allow patients to pick up the table

Cons

- Due to poor grip points, difficult for EMS to move for cleaning
- Must not be rolled due to interior balancing in the base
- Laminate base continues to the floor and may absorb liquids

PE	MC	ICI
😐	☺	☺

Krug Zola Table

Pros

- Drum shape decreases ability to pick up.
- Plinth base made of X will not absorb or wick liquids

Cons

- Due to poor grip points, difficult for EMS to move for cleaning

PE	MC	ICI
☺	☺	☺

Tables

Side tables should be provided in dayroom seating areas to provide patients with a location to place personal items when not in use. (reading glasses, books, magazines etc.)

Tables should be weighted and therefore difficult to lift in the event a patient has a mental health crisis. The base of the table should be made of a non-porous material so that spills and liquids are not absorbed from the floor.

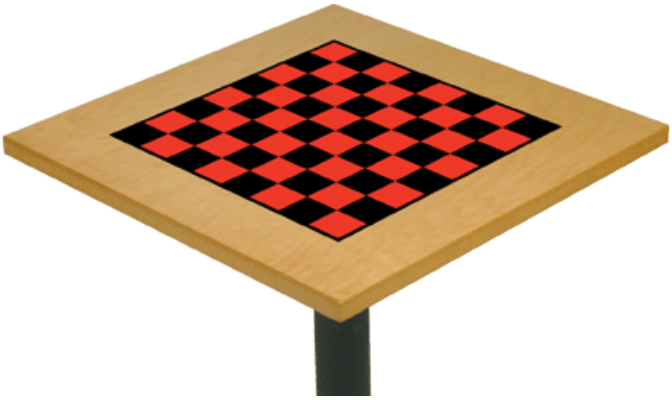
Cabot Wrenn Turn Table (modified)
Table is modified to have a cylinder base and is weighted. The top has an angled edge to eliminate grasp points.

Krug Zola Table has been modified for the Mental Health environment by adding weight and extending the cylinder to the floor to create a drum table. The base is a plinth base which will not absorb liquids.

The Dayroom may also include a table and seating area for patients to play games to work on puzzles depending on the population.

Shown in this photo is a standard table by Falcon with tamper resistant screws and the Spec Gravity Chair.

Custom graphics in table tops are another way to decrease risk of thrown objects and still allow patients the opportunity to participate in regular activities.



Computer Kiosks

Pros

- Provides safe computer access to Veterans

Cons

- OI&T support is required to ensure only appropriate material can be accessed
- Not aesthetically pleasing

Computer access through secure **Kiosks** will allow Veterans to stay connected with family and friends through email, if allowed, based on the specific facility.

Secure Computer access can be provided through Kiosks that meet the safety needs of the VA.

Kiosk Information Systems has many options available depending on the VA's specific needs. Models are available for standing and seated options, integrated or pull out keyboards, and with or without overhead signage. Special requests to replace the screen material with Lexan is recommended.

Kiosks should be mounted to the floor and connections to power and data should be closely coordinated to ensure minimal wiring is exposed . Attempts should be made to provide power and data through the base of the unit eliminating any exposed wiring.

PE	MC	ICI
😐	😐	☺

Dining Room

Accessories for the Dining Room:

Waste Receptacles	Yes
Clocks	Yes
Artwork	Yes

The Dining Room has chairs and tables that are comfortable and safer in their design because of their heaviness and difficulty in moving. Each table seats two or four, enabling small groups within the milieu to interact during meals.

As appropriate seating may be secured to the floor or not. If seating is secured to the floor it may be necessary to swivel to ease sitting down and getting out of a chair.

Jasper Seating

Pros

- Can be bolted to the floor
- Swivel to allow a patient to enter and exit the chair
- Available in a variety of finishes and colors

Cons

- Difficult to clean around
- Bolting to the floor creates an anchor point if something is looped around the back
- No clean out channel

PE	MC	ICI
☺	☺	😐

Jasper Seating shown above and the base shown here is available in a variety of fabrics and patterns. This item is used in the dining room and can be used in other spaces as appropriate. When bolted to the floor the back of this chair may create an anchor point.

Enwork Tables

Pros

- Can be bolted to the floor
- Variety of colors and laminates

Cons

- Difficult to clean around when bolted to the floor

PE	MC	ICI
☺	☺	☺

Enwork Tables with an appropriate base can also be mounted to the floor. Determining the maximum top size and shape to ensure stability over time is important to consider. The factory representative can provide dimension and base options to ensure the base size and top size are appropriate.

Section 4

Spec Gravity

Pros

- Available in a variety of fabrics and finishes to promote a therapeutic environment
- Open back allows crumbs and liquids to fall to the floor
- Moveable for easy cleaning or for patient access to the dining table

Cons

- Chair only weighs 30 lbs

PE	MC	ICI
☺	☺	☺

Spec Gravity Chairs are a freestanding option for Dining Rooms, they have limited horizontal brackets (just to attach the back to the frame) and the arms slope toward the back where they are not attached. When specified in vinyl they are easy to wipe clean and do not have enclosed backs so any crumbs will fall to the floor. The leg is a wall-saver style to minimize damage. Used as a freestanding chair, this item can be used to allow Veterans to get closer to the table or farther away as needed by the individual.

Norix Ultra-Max

Pros

- Chairs can be weighted with sand or bolted to the floor

Cons

- Limited styles and colors
- If not installed and sealed correctly sand can leak

PE	MC	ICI
☺	☺	☺

Norix Ultra-Max Chairs are able to be weighted with sand, bolted to the floor or ganged. There are no anchor points and seven colors to choose from. The Ultra-Max chair is available with or without arms.

Furniture Lab Tables

Pros

- Available in a variety of plastic laminates and finishes, including a faux wood leg
- Bumper style urethane edge is self-healing
- Custom graphics on table tops for gaming options

Cons

- If freestanding, although awkward they may be able to be picked up
- If bolted to the floor, the base may be difficult to clean around

PE	MC	ICI
☺	☺	☺

Furniture Lab tables can be freestanding or made to be bolted to the floor. Tamper resistant screws are used to connect the base to the top and the spider connection has been replaced with a flush mount connection to the underside of the table.

Four legged table (freestanding) will not collapse when patients sit on corners.

Floor mounted option has given consideration to the spacing to ensure a dust mop can maneuver between the bases. This option also slows for extra seating around the top without leg interference.

Furniture Lab Booths

Pros

- Uses table options noted above
- Individual sized units
- Open on both sides
- Smaller table tops allows for one single base bolted tot eh floor

Cons

- May require more space than table and chair options

PE	MC	ICI
☺	☺	☺

Furniture Lab Booths can also be freestanding or floor mounted. The floor mounted option includes blocks that allow the base to be lifted by two staff for cleaning underneath.

If booths are used, consideration to space and layout is important. Veterans in these units may not want to sit close to one another and may not want to sit between the wall and another Veteran. This may make them feel trapped.

Occupational/Recreational Therapy

Accessories for the Occupational / Recreation Therapy Room:

Waste Receptacles	Yes
Clocks	Yes
Artwork	Yes

The Occupational/Recreational Therapy Rooms

Pros

- Provides regular exercise for all patients
- Therapeutic for body and mind

Cons

- Equipment may have anchor points
- Veterans should never be left alone in this space

The Occupational/Recreational Therapy Rooms are designed to facilitate several recovery-oriented groups and activities. To accommodate the needs of different groups and activities, chairs and tables are movable by staff. Patients' artwork and writing is displayed to instill both a sense of personal accomplishment and pride as well as motivate and provide a sense of camaraderie from shared experiences among Veterans. (see Dining Room for appropriate tables and chairs for this area)

In some units exercise equipment may be available for patients with direct staff supervision. Other items within the space should be kept to a minimum and closed locking doors should be provided for any storage within the space needed by recreation staff. This will eliminate the risk of patients accessing items they should not have access to.

Equipment should be kept simple (bikes or treadmills) to allow patients to keep active, but eliminate weights and wires common in other types of equipment.

Sensory Modulation Room

Accessories for the Sensory Modulation Room

Waste Receptacles	No
Clocks	No
Artwork	No

Wieland Versant Motion Seating

Pros

- Provide a gentle motion controlled by the patient
- Variety of fabrics and finishes
- Mechanism is contained within the arm panel

Cons

- Rocking mechanism should be enclosed within the seating without providing access to the patient
- Tamper resistant screws may require modification from a standard model number
- Adding weight is not an option because it will create additional stress on the rocking / glider mechanism and void the warranty

PE	MC	ICI
☺	☺	☺

The Sensory Modulation Room has been integrated in the milieu because of strong, evidence-based support that helping patients engage their senses when they feel angry, anxious, or otherwise out of balance by looking at soothing digital images, listening to music, or enjoying the scent of lavender (and others) has positive physiological effects such as lowering blood pressure and increasing the brain's level of serotonin. A study done by Lynda Brettschneider, RN, MSN, Patient Safety Manager, has been incorporated into the Appendix Section of this guide. The overall concept of a Sensory Modulation Room was based on the concept of daycare timeout stations and was designed to provide privacy, decrease stimuli and promote relaxation using aromatherapy, massage pillows, weighted blankets, clay, squeeze balls, reading materials and a variety of audio/visual relaxation items

Equipment within the Sensory Modulation Room may include a projector or stereo system. These items must be secured from patient access yet able to be controlled by staff. Cabinets that allow speakers to project sound and a video projector to project images may need to be custom built if not included in construction.

Projected Images may include aquariums, stars in the night sky, or snowy landscape scenes.

Motion Seating
Rocking or gliding mechanism in seating should be concealed within the chair without access to patients.
The **Wieland Versant** offers a hidden mechanism with locking feature to ease a patient when entering or existing the seating position.

Casework

Pros

- Product can be built to fit in the exact space needed to specific requests by the staff
- Speaker systems / equipment can be contained behind material that allows sound to penetrate without having the equipment accessible to the patient
- Unlimited styles and colors

Cons

- Careful consideration should be given to ensure the casework builder is familiar with the specific requirements of the space and specialty hardware needed for this space

PE	MC	ICI
☺	☺	☺

Custom built casework with clear door for projector and screened opening for speakers. Mounted to ceiling.

Equipment that must be accessed by staff should be in a location that would not put staff in a compromised position (behind a door, kneeling or bent over) in the event that the staff need to intervene with a patients behavior quickly.

Outdoor Courtyards

Pros

- Provides patient access to nature in a controlled environment
- Planters can provide visual interest in colors or the ability to plant and maintain a garden for additional therapeutic opportunities

Cons

- Consideration should be given to the type of plants in this space, nothing with sharp leaves or thorns. Plants that do not cause harm if ingested
- Be aware of the distance placed between furniture or planters to ensure patients are not able to climb on these items in order to climb the perimeter wall for escape or to jump from an elevated area
- Be aware of access to roof structures

Eco Walls

Pros

- Eco Walls can provide visual interest in colors or the ability to plant and maintain a garden for additional therapeutic opportunities

Cons

- Consideration should be given to the type of plants in this space, nothing with sharp leaves or thorns. Plants that do not cause harm if ingested
- Ensure the framework does not provide the opportunity for patients to climb the wall

Outdoor Courtyards are strongly encouraged to provide access to the healing aspects of nature. Even in urban settings access to nature can be provided by roof top courtyards surrounded by security fences.

Outdoor spaces also provide opportunities for recreation activities and cookouts for the patients during holidays or special occasions.

Patients should be supervised at all times in these areas.

Eco Walls provide an opportunity to add “Green Space” even if the courtyard is surrounded by buildings. All plants should be reviewed carefully to ensure they are not harmful if eaten and are free from thorns or sharp pointed leaves. The Eco Wall must not provide opportunities for climbing.

Labyrinths
Pros
- When produced in flooring, provides no objects that can be used for self harm
- Provides an opportunity for movement and meditation for actives Veterans

Cons
- Requires dedicated space

Labyrinths promote meditation and self reflection. Many community organizations and retreat centers make Labyrinth available for use for prayer, meditation, contemplations or personal growth. The labyrinth walk is popular with a growing number of people because of its simplicity and the ability to approach its paths on your own terms.

Private Office

Accessories for Private Offices:

Waste Receptacles	Yes
Clocks	Yes
Artwork	Yes

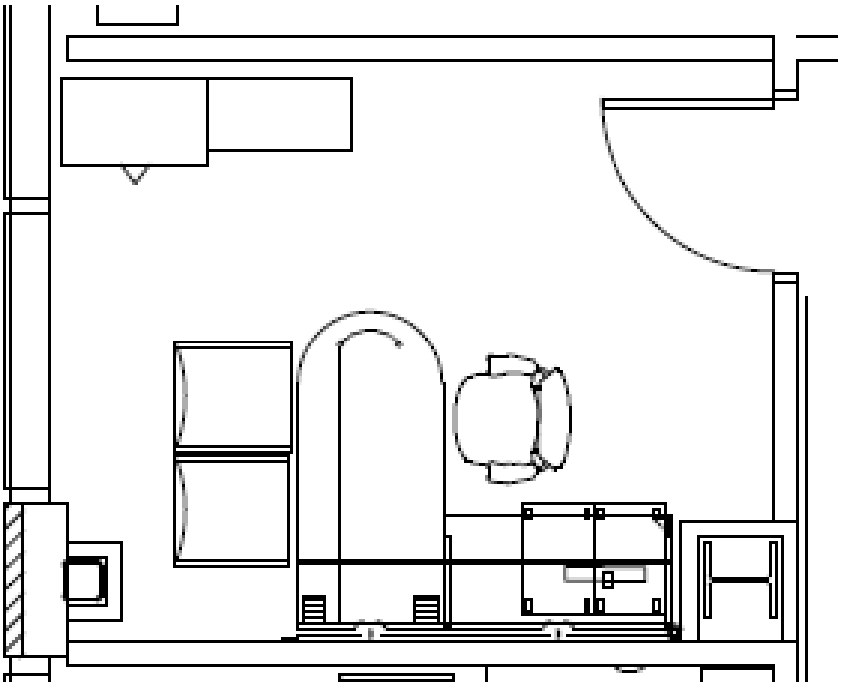
Pros
- Staff are provided first egress if a patient is interacting with staff in this area
- Standardized furniture can be used and oriented to the specific room

Cons
- In some cases computer screen may be visible from the entry door
- Staff may need to sit with their back to the door in order to provide first egress
- Staff may choose to keep office door closed to promote privacy of information on the computer which in-turn creates an unfriendly environment

Staff may have private offices on or near inpatient units. Although these spaces are not intended for staff and patient interaction, they should still be designed to meet safety risks. Staff should always maintain first egress in the event of escalated behavior.

Standard healthcare office furniture used throughout the medical facility may be used in these spaces. Consideration may be given to sharp corners or desk edges.

Photo taken from entrance / exit door of office.



Section 5

Staff Area

Accessories for Staff Areas

Waste Receptacles	Yes
Clocks	Yes
Artwork	Yes

Staff Area inside locked unit

Pros

- Staff are close to the patient area if an emergency should arise

Cons

- Opening the door at an inopportune time may provide a patient access to the staff space and access to the potential weapons within the space

Staff Area outside locked unit

Pros

- Greatly reduces the possibility of a patient gaining access to the space
- Provide staff farther removal from the unit in order to rejuvenate

Cons

- Staff are farther away and have additional barriers to be in a position to assist other staff in the event of an emergency

Staff greatly benefit from a designated area that offers safety, privacy, and aesthetics but is within the behavioral health unit should a crisis arise. This area could include conveniences such as a refrigerator, a microwave, coffee-maker, an eating area, and comfortable chairs for relaxation. Access to windows and natural light and even adding live plants is particularly worthwhile as these elements contribute to the reduction of stress, fatigue and, subsequently, increased job satisfaction (Karlin and Zeiss, 2006). Best of all, a staff-only area facilitates times for staff to rejuvenate their bodies and minds, and ultimately translates to improved patient care. Karlin and Zeiss describe this synergy of safety and appealing design as a "physical ethos" that sends "… a message of expectations for improvement ," (2006).

Karlin, B.E. & Zeiss, R.A. (2006). Best practices: Environmental and therapeutic issues in psychiatric hospital design: Toward best practices. *Psychiatric Services*, 57(10).

Resources

Information within this document has been compiled from the following resources. Additionally these references will serve as additional Resources for information

VA Office of Construction and Facilities Management

Mental Health Design Guide
http://www.cfm.va.gov/til/dGuide/dgMH.pdf

VA National Center for Patient Safety

Mental Health Environment of Care Checklist
http://www.patientsafety.va.gov/professionals/onthejob/mentalhealth.asp

VHA Safety Alerts
http://www.patientsafety.va.gov/professionals/alerts/index.asp

Published Articles

Karlin, B.E. & Zeiss, R.A. (2006)

"Environmental and therapeutic issues in psychiatric hospital design: Toward best practices." *Psychiatric Services*, 57(10): 1376-1378

Dalke, H., J. Little, et al. (2006)

"Colour and lighting in hospital design." Optics and Laser Technology 38(4-6): 343-365.

Measurements

The following units of measure are taken from the National Center for Patient Safety Mental Health Environment of Care Checklist (MHEOCC)

MHEOCC Tab
Item #
Measurement

Bathrooms
#59
Are shower curtains hung from ceiling mounted tracks with curtains designed to tear away when a static load of **5 pounds** or more is applied?

General Criteria
#13.00-1.00-36.00—PSAT
Cords should be too short to use to wrap around a neck and hang from any securing point **(maximum of 12 inches)**

#36 further states that "Cords of any length are not recommended for seclusion rooms."

Materials

List of materials and definitions for use in a Mental Health Patient Unit

Bleach

Bleach (5 – 10% sodium hypochlorite plus Sodium hydroxide) is very caustic (rust, pit, or permanently damage) to stainless steel and should be avoided for all stainless steel items. There are other non-bleach sanitizing cleaners approved by VHA for cleaning health care areas. Bleach is a strong oxidizing agent. Reacts with other household chemicals such as toilet bowl cleaners, rust removers, vinegar, acids or ammonia containing products to produce hazardous gases, such as chlorine and other chlorinated species.

Liquid Nails

Liquid Nails is a construction adhesive for interior drywall construction. It is fast acting and provides a strong bond between drywall and several materials such as steel, wood, foam , and other materials.

Loctite Threadlocker

Loctite Threadlocker Loctite® Threadlocker Blue 242® is designed for the locking and sealing of threaded fasteners which require normal disassembly with standard hand tools. The product cures when confined in the absence of air between close fitting metal surfaces. It protects threads from rust and corrosion and prevents loosening from shock and vibration. Loctite® Threadlocker Blue 242® is particularly suited for applications on less active substrates such as stainless steel and plated surfaces, where disassembly is required for servicing.

Glass Substitutes / Plastics

Glass Substitutes / Plastics, (a.k.a. Polycarbonate, Polystyrene, Plexiglas) **-** Not all plastics are created equal and careful use of terminology is very important in assuring the correct product is install in Lock Down units. For the nonprofessional, it is very important to ensure that polycarbonate plastic is specified for mental health applications. Additionally, physical applications and environmental factors should be considered to ensure that the design does not exceed the application; i.e., product failure due to cold temperatures or excessive large surface areas may warrant thicker material of additional bracing.

Polycarbonate

- **Polycarbonate (PC) a.k.a. Lexan®,** (required by MH EOC Checklist). Polycarbonate is temperature resistant, high impact-resistant, scratch-resistant thermoplastic polymers. It also has good optical properties. Due to its susceptibility to environmental stress cracking, its use is limited to low-stress applications. For use in applications exposed to weathering or UV-radiation, a special surface treatment is needed. Polycarbonate monitoring for surface or installation cracking, and damage should be performed on a regular schedule. Additionally, common failures with the product is from the use of improper fasteners for the product; e.g., wood fasteners used with polycarbonate materials.

Polystyrene

- **Polystyrene (PS),** is a synthetic aromatic polymer which is a clear, hard and brittle polymer. Polystyrene is flammable. The installation of Polystyrene does not meet the MH EOC Checklist requirements

Plexiglas

- **Plexiglas,** Poly(methyl methacrylate) (PMMA) is the synthetic polymer with limited strength. PMMA has an impact strength significantly lower than polycarbonate plastic. The installation of Plexiglas does not meet the MH EOC Checklist requirements.

Environmental Stress Cracking

- **Environmental stress cracking** is the most common causes of unexpected brittle failure of thermoplastic (especially amorphous) polymers known at present. Environmental stress cracking may account for around 15 -30% of all plastic component failures in service.

Temperature and surface area

- **Temperature and surface area**, consideration should be given to application where low temperatures and large surface areas are encountered. Product failure may be encountered when protecting windows that have large surface area and cold temperatures on the material. A risk assessment may indicate a thicker polycarbonate sheet or additional bracing on window.

Plastic Laminates

Plastic Laminates — Plastic laminates (Formica®, Wilsonart, Nevamar, Pionite) are durable and inexpensive. One of the most common problems with them, though, is the failure of the glue that binds them to the substrate. This typically happens at the edges and seams. If the bond is weak at any point, moisture can invade and start the process of delamination.
Avoid:

- DO NOT use cleaners nor compounds containing strong acids or strong bases on laminate surfaces. These may mar, etch, corrode and/or permanently discolor or damage laminate surfaces.
- Damage caused by abrasion or scratches is irreversible.
- Fluid contact (quantity vs. duration) to the wood center of the plastic laminate will cause bubbling in the plastic laminate which, if left untended, can permanently damage or ruin the entire plastic laminate sheet, requiring it to be replaced.

Stainless Steel

Stainless steel does not readily corrode, rust or stain with water as ordinary steel does, but despite the name it is not fully stain-proof, most notably under low oxygen, high salinity, or poor circulation environments. There are different grades and surface finishes of stainless steel to suit the environment the alloy must endure. Stainless steel is used where both the properties of steel and resistance to corrosion are required. Depending on the quality of SS (carbon content), slight surface oxidation may be visible after long term use and exposure to moisture and uric acid. This surface oxidation can be cleaned with many commercially available cleaning agents without harm to the item.

Solid Surface Products

Solid surface products are 100% acrylic, nonporous, and do not require sealing.

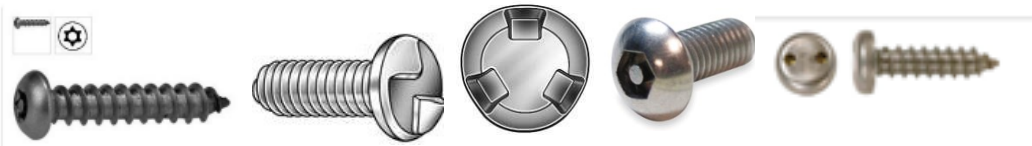
- Naturally resistant to heat, mold, mildew and most stains are easily buffed away.
- Water resistant
- Material is renewable and repairable with inconspicuous waterproof seams.
- Scratches are easily repaired.
- Wilsonart® Solid Surface is approved by the FDA and for food contact and preparation areas.

Tamper Resistant Caulk

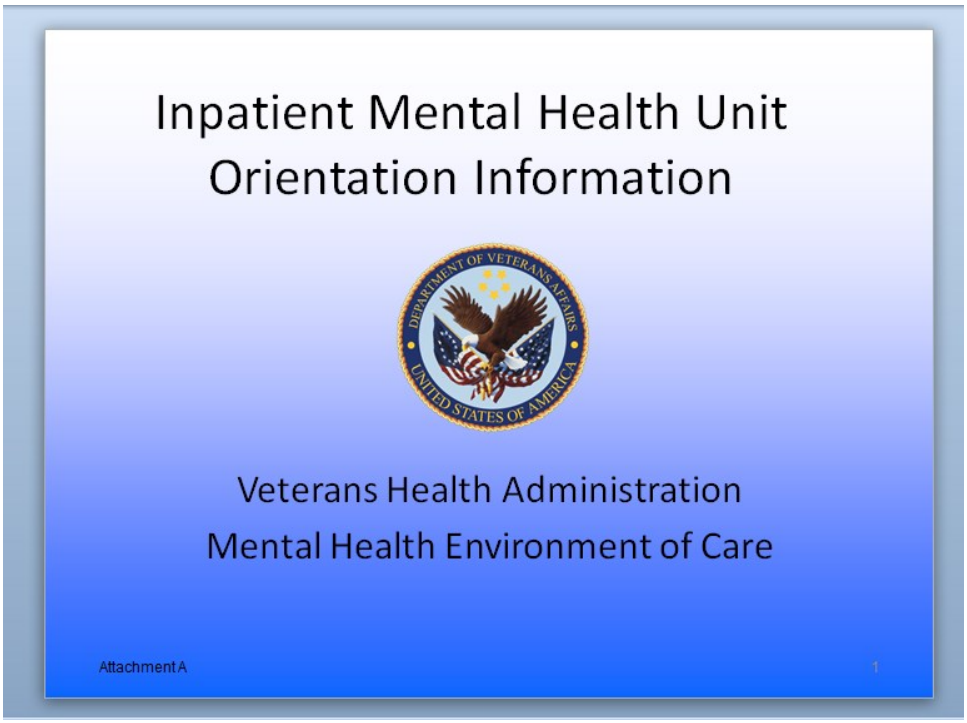
Tamper resistant caulk should be used in all mounting assembles to ensure that firm attachments are achieved. Caulks are available from 3M Scotch-Seal, Sika, DynaFlex, etc.

Tamper Resistant Fasteners

Tamper resistant fasteners should be used in all mounting assembles to ensure that firm tamper resistant attachments are achieved. There is a plethora of styles and materials to select from. Fasteners are available from Grainger, Fasten all, Lowes, Home Depot, etc.



An orientation PowerPoint for non-clinical staff who may access the Inpatient Mental Health Unit can be found at:



http://vaww.vhaco.va.gov/EPS/Mental%20Health/Inpatient%20Mental%20Health%20Unit%20Orientation%20Information.pptx

Mental Health Patient Safety Acknowledgement

Patients on Inpatient Mental Health Units pose unique safety challenges. Patients include mixed ages from 18-95+, mixed gender, mixed diagnoses, voluntary and involuntary. Specific concerns include: flight risk, suicidal or homicidal tendencies, patients with a history of violence, including self-mutilation, poor impulse control, and people who are actively responding to auditory or visual hallucinations. For example, a plastic bag could be very quickly swiped by a patient who wishes to suffocate him or herself. A screw could be used for self-mutilation or a weapon. An extension cord could be used as a noose. Over 50% of completed inpatient suicides are by hanging. It has been observed that if you turn your back on equipment for just a moment a patient can take it. If you observe a patient watching intently or acting strange notify a staff member.

1. All closed, locked doors must remain closed and locked. These doors may not be propped open for any reason. (Add any specific doors for your unit)

2. Using a ladder is a two person job. One to climb up the ladder the other to keep the individual safe. (A person who is angry or has impulse issue's, or homicidal tendencies, could knock you and the ladder over)

3. Never let anyone in or out of the Unit. If someone, even a visitor, or someone wearing an ID badge is requesting that you open a door for him or her, refer the person to, or notify Nursing staff. (A patient who is a flight risk could try to take advantage of this)

4. Keys must always remain on your person at all times. Never leave keys in a lock or set them down. Preferably use a lanyard or any device that keeps your keys attached to your person.

5. Equipment of any kind may never be left unattended; this would pose a serious risk to staff as well as patients. Always keep equipment in line of sight. A patient could take a plastic bag, any type of liquid, glues, extension cord, equipment cord, screwdriver etc. very quickly. (Plastic bags can be used for asphyxiation, any liquid or glue could be ingested, cords used for hanging devices, hammers, screw drivers or any other tool can be used as a weapon to self or others)

6. Before entering the Unit a PRE-COUNT of all equipment which includes, and is not limited to: power extension cords, screwdrivers, nails, screws, bolts etc., any equipment you bring with you should be on a list of items which you check off when you leave. This is a very serious issue. Do not leave any remnants of your job behind. (Nuts, bolts, washers can be swallowed. Nails and screws can be used for self mutilation or as a weapon)

7. Never exchange money or any kind of goods with a patient, this includes food items.

A downloadable copy of this document can be found at http://vaww.vhaco.va.gov/EPS/

8. Breaks should be taken off the unit.

9. Do not engage a patient in conversation; you may un-knowingly set a patient off, or they may accuse you of something you did not mean or say. If a patient attempts to talk with you refer them to a staff member.

10. Remember that all patient information (even the fact that someone is on an inpatient Psychiatric unit) is **CONFIDENTIAL.**

Before any construction worker, EMS personnel, contractors, or any other personal coming on to an Inpatient Psychiatric Unit they will receive this training. A designation will be adhered to their badge so staff will know if they have received the training. No one will be allowed on the inpatient unit without the sticker. (Identify designation here)

Signature of employee_____

Signature of Trainer_____

Date_____

A downloadable copy of this document can be found at http://vaww.vhaco.va.gov/EPS/

Before entering the Mental Health Unit a PRE-COUNT of all equipment which includes, and is not limited to: power extension cords, screwdrivers, nails, screws, bolts etc., any equipment brought with you should be on a list of items which you check off when you leave. This is a very serious issue. Do not leave any remnants of your job behind.

Equipment list	
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A downloadable copy of this document can be found at http://vaww.vhaco.va.gov/EPS/

Decreasing Assaults on a Locked Mental Health Unit through the Creation of a Sensory Modulation Room

Identified as a Best Practice during 2011 Office of Inspector General Combined Assessment Review

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❖Introduction

VA Pittsburgh Healthcare System (VAPHS) is a three-division, integrated healthcare system that proudly serves the Veteran population throughout Pennsylvania, Ohio and West Virginia. University Drive serves as the acute care facility and has 146 operating beds distributed among medicine, surgery, neurology and critical care. This also includes a large primary care outpatient clinic. VAPHS is affiliated with the University of Pittsburgh Schools of Medicine, Dental Medicine, and various allied health programs. The Highland Drive division houses 79 inpatient behavioral health beds. The H. John Heinz Division is home to a 262-bed community living center, has a complete adult day health care center and offers a variety of outpatient services. Heinz also has a 65-bed Veterans recovery center and 31 psychiatric residential rehabilitation treatment beds.

❖Abstract

The Assault Aggregate Root Cause Analysis Team at VA Pittsburgh completes a yearly review of assaultive patient behavior in the Acute Care, Long Term Care, and Behavioral Health Divisions. The team recognized that the largest percentage of assaults (77%) occurred on the extended psychiatric unit treating Veterans for resistant psychiatric diagnoses. A creative opportunity for improvement was recognized following review of the environment. Escalating and aggressive patient behavior was handled without privacy and in full view of other Veterans. A Sensory Modulation Room based on the concept of daycare timeout stations was designed to provide privacy, decrease stimuli and promote relaxation using aromatherapy, message pillows, weighted blankets, clay, squeeze balls, reading materials an a variety of audio/visual relaxation items. After initiation of this room, the assault rate on the extended psychiatric unit dropped dramatically by 50%.

❖Objectives

1. The participant will define what a sensory modulation room is and the rationale behind its utilization.
2. The participant will describe the design, costs, and benefits of a sensory modulation room on a locked inpatient mental health unit

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Decreasing Assaults on a Locked Mental Health Unit through the Creation of a Sensory Modulation Room

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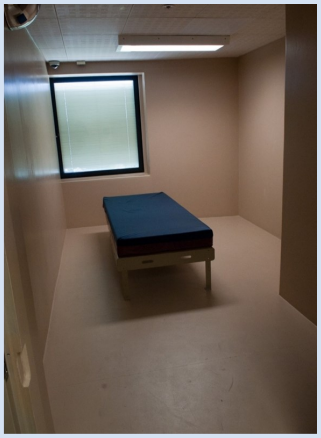
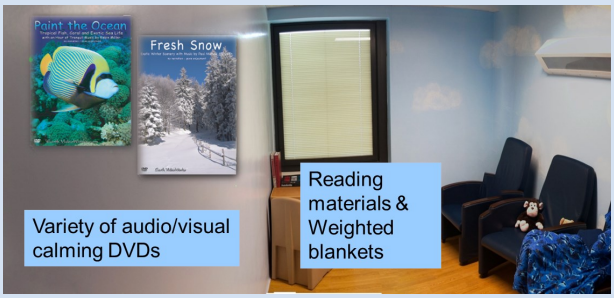
❖Plan

In January 2010 a Sensory Modulation Room (SMR) was opened on 3 East. It has shown to be a significant intervention with a decrease of assaults on that unit. Research has shown that psychosis and excessive sensory stimulation have been major precipitants in assaultive behavior on psychiatric units. Many of the Veterans on 3 East have treatment resistant illness in which medications have not effectively treated their delusions and hallucinations. Sensory modulation rooms have been shown to decrease anxiety and agitation in dementia and the pervasive developmental disorder population. Elderly patients present special problems. There are factors that complicate the assessment and treatment especially those with psychiatric symptoms. Cognitive impairment increases with age and can also be a major impediment to assessment or treatment (Liptzin 1987). Ambulatory demented patients who are combative may victimize other non-ambulatory patients. This may elicit combative responses in return by behaving in an intrusive, bothersome manner-for example by pulling at blankets, singing, or yelling loudly, or simply entering another patient's room (Mayers 1994). Although such rooms have been successfully implemented in various psychiatric facilities throughout the United States, very little research regarding their effectiveness in psychiatry has been documented.

❖Do

This pro-active intervention can decrease stimuli and promote relaxation in an anxious or agitated patient. "Nurturing therapeutic environments and sensory based treatments are effective as prevention strategies in avoiding the use of restrictive interventions and in promoting recovery oriented mental health treatment environments."[1] It was visualized that staff and eventually the patient would recognize escalation in aggressive or agitated behaviors, placing the patient in the room for de-escalation. Tools such as a weighted blanket, stuffed animals, massage pillows, squeeze balls can be chosen by the patient. Also a variety of audio/visual calming DVD such as the sound of ocean waves breaking on the shore line or birds singing in the rain forest can be utilized by the patient. A debriefing session with the Veteran was to be conducted once the intervention was complete. The debriefing would include whether the intervention was early enough, lasted long enough, what item was most beneficial, during the intervention and would the patient use this intervention again. It was also anticipated that the Veteran would rate their levels of stress before and after the use of the room along with any suggestions for relaxation items that could be considered for future use.





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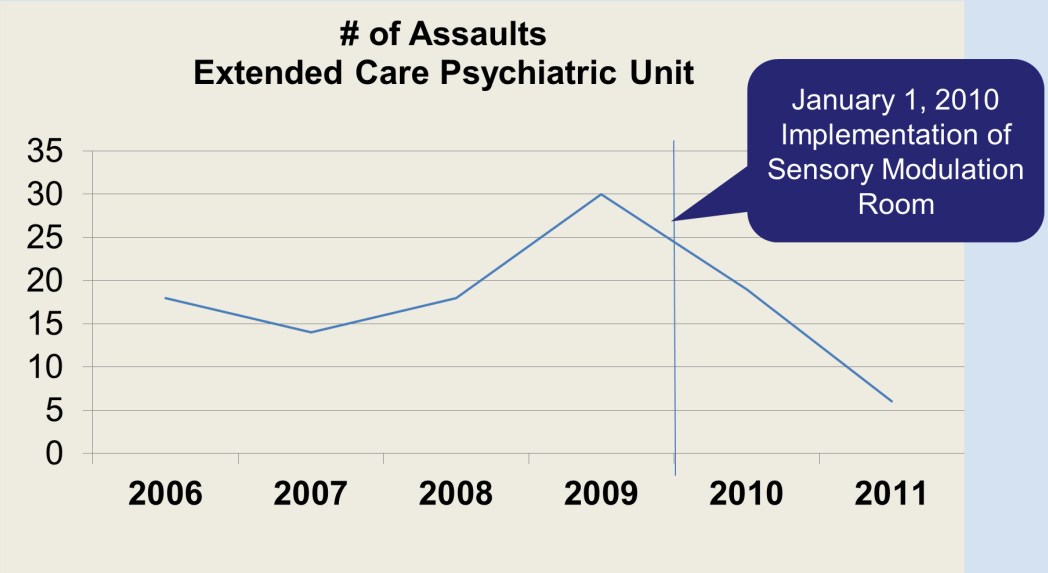
Decreasing Assaults on a Locked Mental Health Unit through the Creation of a Sensory Modulation Room

Identified as a Best Practice during 2011 Office of Inspector General Combined Assessment Review

❖Check



❖Act

It became apparent early on that the anticipated outcome measures were not able to be collected on this unit due to the Veteran population. The Veterans quickly recognized the value of the sensory motor activities available in the Sensory Modulation Room and the calming effects. Within weeks, patients began to self-refer to the SMR room. The room is open for use 24/7 and patients have unrestricted access. Activities such as the audio/visual relaxation DVDs are regulated by staff at the patient request. This can occur as often as 4 times in a shift.

A debriefing note is completed after an assault on every unit. The post assault note in the patient electronic record is intended to standardize documentation of the assault along with identifying the date, time, location, description of the assault, precipitating factors, type of assault, team intervention post assault (including consult to Psychiatry, 302 commitment, redirection), provider notification, staff debriefing and treatment plan updates after the assault.
The RCA Assault Aggregate team completes an evaluation during the annual review regarding the use of the post assault note to see if it improves documentation of care and communication of assaultive behaviors between providers.

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❖Conclusion

Currently under construction at VAPHS is a state of the art Consolidation Building that will house three inpatient mental health units that will allow for a safe, calm, private, therapeutic atmosphere for recovery. Each new unit will contain a SMR to continue to provide a retreat for individuals with aggressive behaviors or those who require sensory distractions on the extended psychiatric unit.

❖References

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2. Staal, Jason "The Effects of Snoezelen(Multisensory Behavior Therapy) and Psychiatric Care on Agitation, Apathy, and Activities of Daily Living in Dementia Patients on a Short Term Psychiatric Inpatient Unit" *Int'L. J. Psychiatry In Medicine*, Vol. 37(4) 357-370, 2007
3. Quanbeck, Cameron David, MD. "Categorization of Aggressive Acts Committed by Chronically Assaultive State Hospital Patients" *Psychiatric Services*, Vol 58 No. 4, April 2007
4. Liptzin Benjamin. The Geriatric Patient and General Hospital Psychiatry. General Hospital Psychiatry 9:198-202, 1987
5. Mayers Kathleen. Managing the Combative Demented Resident,
6. www.thefreelibrary.com 1994. Medquest Communications, LLC

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Graphics

For more information on items that may be purchased during construction please reference the CFM MH Design Guide or the MHEOC Checklist.

The images below represent some potential solutions (VA/VA GC/GC, VA/GC)
On site modifications for potential anchor points. No market ready product.

Fire Safety

Pull Stations

Fire Extinguisher Cabinets

Flush Mount

Exit Signs

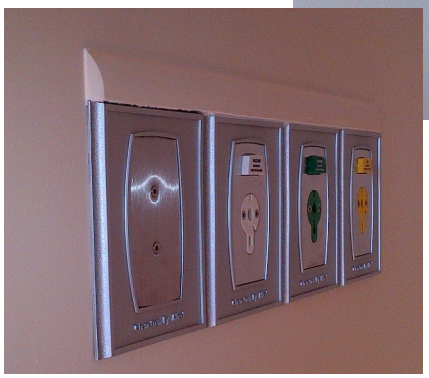
Perpendicular Mount

Section 6

Medical Gas Panel Control Station

Flush Mount

Patient bedroom



Card Reader

Nurse Call

Television Enclosures

Control Covers

Recessed Light Covers

Cabot Wrenn Lisbon

Nemschoff Laminate Nightstand

Norva Plastics—Foam Spindle used to create an anchor point—low profile on exterior of door may not grab the attention of staff immediately.

Photos of Norva Plastics spindle used to created an anchor point.

U.S. Department of Veterans Affairs

2014

For questions regarding this guide please contact:

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810 Vermont Avenue
Washington, DC 20420