

CONNECTICUT VALLEY HOSPITAL OPERATIONAL PROCEDURE MANUAL

SECTION II:	ORGANIZATION FOCUSED FUNCTIONS
CHAPTER 7:	Management of the Environment of Care
PROCEDURE 7.34:	Pressure Sensitive Alarms
REVISED:	03/08/08; 03/13/08; 04/13; 1/25/16; Reviewed 06/18
Governing Body Approval:	04/25/13; 2/11/16; 06/27/2018(<i>electronic vote</i>)

PURPOSE: The purpose of this procedure is to ensure the effectiveness of the Pressure Sensitive Alarms to mitigate against suicide risk by hanging where walls do not fully extend to the ceiling. These alarms are activated by applying downward pressure placed on the pressure strip on top of partitions and sound an alarm to initiate an appropriate staff response.

SCOPE: Battell Hall

POLICY:

Pressure Sensitive Alarms are used to mitigate against suicide risk in patient bedroom hallway(s) where walls do not fully extend to the ceiling. Specifically, this includes units: Battell 4N; Battell 4S; Battell 3N; Battell 2N; Battell 2S.

It is imperative that these alarms are maintained in good working order and audible in the patient care staff areas at all times. When the Pressure Sensitive alarm is activated, staff will respond immediately to identify the cause of the alarm, take any necessary emergency measures, ensure the safety of the patients and process the incident with patients on the unit.

PROCEDURE:

- I. Preventive Maintenance and testing of Alarms
 - A. The Director of Plant Operations oversees the testing, preventive and ongoing maintenance of the Pressure Sensitive Alarms per established guidelines.
 - B. Alarm system zones shall be tested every Wednesday on second shift by nursing staff and documented on the Routine Observation form.
 - C. Dorm alarm systems shall be tested twice annually during MEC inspections. All alarm system zones shall be tested quarterly by Plant Operations staff. Documentation of alarm system testing will be forwarded to the Director of Facility Operations.
 - D. For testing, alarms should be activated by applying downward pressure on top of sensor strip by applying a sheet, shoelace, belt or by pressing downwards with your hand. To verify the system is operating properly each alarm display should read "system active".
 - E. The Pressure Sensitive Alarms will not be disabled at any point in time without the authorization of the Hospital Safety Director.

- F. Unit staff will be assigned to monitor the dormitory hallway at all times when it is necessary to disable the Pressure Sensitive Alarms and/or at any time there is a problem or malfunction with the alarm.
 - G. During Census checks nursing staff will observe each alarm strip and inspect for evidence of tampering. An example of this would be duct tape removal. This shall be done twice an hour and documented on the Routine Observation form with staff initials.
 - H. Trouble alarms or active alarms that are unable to be cleared will be immediately reported to the Telecommunications Dispatchers to contact vendor for repairs. Affected dorms will be immediately monitored by unit staff until the alarm system has been repaired.
 - I. Alarm systems keypads at each Nurses station will be inspected and documented during census check, twice an hour to assure the keypad display reads "System Active". Any blank screen indicates the system is not functional and will require immediate staffing of monitors in the dorms. Telecommunications Dispatchers will be immediately notified to contact vendor for repairs.
- II. Staff Response to Alarm
- A. Unit staff will respond immediately to the identified zone(s) when the Pressure Sensitive Alarm sounds to identify the cause of the activation.
 - B. Staff will inspect for items placed over the door frame above the entry door that may have triggered the alarm. The hallway and all patient bedrooms will be thoroughly checked in the dormitory.
 - C. Staff will provide necessary emergency measures in response to any (attempted) hanging, initiating a medical emergency response.
 - D. The Pressure Sensitive Alarms will not be silenced or cleared until the cause of the alarm activation has been identified. A census check of all patients is conducted as a part of this evaluation.
 - E. Staff will be assigned to continuously monitor the area until the alarm is reset.
 - F. As appropriate, a Suicide Risk Assessment for patient(s) deemed at risk in the area will be conducted by a Registered Nurse who will confer with the Attending/On-call Psychiatrist regarding the need for increased observation.
 - G. A Focused Treatment Plan Review (F-TPR) will be conducted for all patients exposed to the trauma of any (attempted) hanging and resulting medical emergency response. The F-TPR will be documented per procedure.
 - H. A community meeting will be held with all patients to process the incident, assess the current state of the unit and identify any additional patient care needs.
 - I. The Attending Psychiatrist and Unit Director will be notified of all occurrences of the Pressure Sensitive Alarms sounding.