



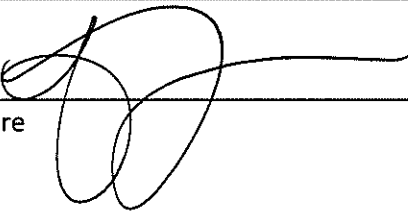
is needed for line of sight supervision and will require an order from a provider daily.

2. Review of the clinical record for Patient #2 showed that the observation records dated 12/15/19 and 12/16/19 indicated that Patient #2 was being monitored by Line of Sight.

3. Review of the clinical record for Patient #2 showed that there was no provider order for a Line of Sight level of observation for Patient #2 on either 12/15/19 or 12/16/19.

**South Sound Behavioral Hospital  
Plan of Correction for  
State Licensing or Medicare Hospital/Critical Access Hospital Survey  
2/6/2020**

Regulation Number	How the Deficiency Will Be Corrected	Responsible Individual(s)	Estimated Date of Correction	Monitoring procedure; Target for Compliance
WAC 246-341-1126(1)(b)	I. South Sound Behavioral Hospital policy "Observation Levels" revised to be consistent with the policy "Patient Rights" by adding the statement: "The order for Line of Sight must be renewed every 24 hours". The revised policy will be brought to PI Committee for review and approval. <ul style="list-style-type: none"> <li>• Following approval the revised policy will be uploaded to the policy intranet site for easy access</li> </ul>	Director of PI/Risk Management	3/11/2020	To be reflected in the PI Committee minutes
WAC 246-341-1126(1)(b)	II. Nurses to be educated on the need for 24-hour renewal for Line of Sight observation to assure consistent adherence to the policy	CNO	3/31/2020	Read and sign review by all nurses
WAC 246-341-1126(1)(b)	III. Orders for patients to be on Line of Sight observation will be renewed every 24 while needed	CNO	3/31/2020	Nursing night audits
WAC 246-341-1126(1)(b)	IV. Medical staff educated at Medical Staff/Directors meeting on the need to re-order Line of Sight observation every 24 hours when indicated	Medical Director and Director of PI/Risk Management	3/2/2020	Minutes and attendance record of meeting

Signature 

Title CEO

Date 3/4/2020



STATE OF WASHINGTON  
DEPARTMENT OF HEALTH

February 9, 2020

South Sound Behavioral Hospital  
605 Woodland Square Loop  
Lacey, WA. 98503

Re: Case Number: 2020-1044  
License Number: BHA.FS.60947570  
Acceptable Plan of Correction  
Date(s) of Investigation: 2/6/20

Dear Administrator:

This letter is to inform you that after careful review of the Plan of Correction (POC) you submitted for the investigation recently conducted at your facility, the Department has determined that the POC is acceptable. You stated in your plan that you will implement corrective actions by the specified timeline. By this, the Department is accepting your Plan of Correction as your confirmation of compliance.

Based on the scope and severity of the deficiencies listed in your statement of deficiency report, the Department will not conduct an unannounced follow-up compliance visit to verify that all deficiencies have been corrected.

The Department reserves the right to pursue enforcement action for any repeat and/or uncorrected deficiencies based on applicable statute and rules.

Investigator: 42124  
Department of Health  
HSQA/Office of Health Systems Oversight  
PO Box 47874  
Olympia, Washington 98504-7874