On Wednesday, May 30, Mercy Medical Center – Des Moines filed a Certificate of Need application with the State of Iowa requesting approval to construct a 100-bed freestanding inpatient behavioral health hospital in Polk County. The proposed facility would serve children, adolescents, adults and seniors experiencing acute behavioral health issues.

“As demand for behavioral health services in our community has increased, the number of patients in need of treatment has exceeded our current capacity,” said Mary Thompson, director of behavioral health services at Mercy. “Patients and their families frequently experience unacceptably long waits for care and sometimes must travel hundreds of miles across the state, or even out of the state, to find care. The construction of a new facility is needed to address the current need for inpatient behavioral health care and continue providing these vital services well into the future.”

The proposed location for the behavioral health hospital is 1500 NW 114th Street in Clive, a site adjacent to the Mercy West clinic building and across the street from the newly constructed Mercy Rehabilitation Hospital. The proposed hospital, estimated to cost $5.5 million, would be an approximately 73,300-square-foot structure with a one-story clinical and support services area and a three-story bed unit. If the proposal is approved without changes, construction could begin as early as April 2019.

"The construction of a new facility is needed to address the current need for inpatient behavioral health care and continue providing these vital services well into the future." -Mary Thompson

"By improving access to essential behavioral health services, we have a unique opportunity to transform the way our patients receive care through focused case management and the implementation of evidence-based treatments,” said Sasha Khosravi, D.O., medical director, Mercy Behavioral Health. “Expanding our facilities will give us the resources we need to develop superior clinical protocols and clinical programming customized to each patient’s individual needs, ensuring the most acute patients are receiving the highest quality treatment possible.”

The new hospital will be owned and operated through a joint venture organization created by Mercy and Universal Health Services (UHS), one of the largest health care management companies in the United States. UHS operates more than 300 behavioral health hospitals in the United States and the United Kingdom and has substantial experience and expertise in the field of behavioral health care that will enhance the level of care provided to patients.

The proposed behavioral health hospital will offer inpatient and intensive outpatient services. It will also provide treatment through existing Mercy behavioral health programs to ensure continuity and alignment across the proposed behavioral health system of care. Mercy’s existing behavioral health units – including an 18-bed adult unit and a 16-bed child/adolescent unit – will remain on the downtown Des Moines Mercy campus and be operated by the joint venture.
Beginning July 1, 2018, Mercy will transition to using ClinicalKey by Elsevier for the national integrated evidence-based content solution and decision support reference tool. ClinicalKey, which is currently active and available on InsideCHI, replaces Up-To-Date, which will not be available after July 1.

This change will likely have a significant impact with the physicians and providers who currently use the Up-To-Date tool for evidence based-knowledge. Other clinical roles – including nurses and therapists, will also be affected by this change.

Adopting ClinicalKey will ensure our patients receive instructions, medical and pharmacological information that is integrated and from the same source, whether the patient receives these materials from a provider, clinician or pharmacist. Many clinicians already use ClinicalKey for the Nursing and Clinical Pharmacology platforms, so this change will create a system-wide solution for both providers and clinicians.

ClinicalKey has similar functionality to Up-To-Date, and providers will still be eligible to earn Continuing Medical Education (CME) credits through the new platform. ClinicalKey will also be available from within the electronic health records (EHRs) on July 1.

In preparation for the transition to ClinicalKey on July 1, CHI will host two live demos to provide training and additional information about the new platform. Individuals in all clinical roles, including physicians, providers, nurses and therapists, are encouraged to take part in one of these sessions:

• Tuesday, June 12: 1 p.m.  
  Join the Meeting
• Tuesday, June 19: 1 p.m.  
  Join the Meeting

To participate in the live demo sessions, click the “Join the Meeting” link above, and connect via conference call by dialing 1-855-733-3266 and entering access code: 246 133 5973.

Users can view this guide to learn more about ClinicalKey, or specific questions can be directed to Alison Mason, National Director-Quality Informatics, at alisonmason@catholichealth.net.

QUALITY RECOGNITION

Medication reconciliation techs and transitional pharmacists were recently recognized by the quality management team for achieving 100 percent compliance with completion of patients’ home medication lists for the last six quarters. The transitional pharmacists were also recognized for their commitment to patient safety as they review patient discharge medication orders for any possible adverse drug events. Quality management routinely recognizes departments for excellent outcomes with quality metrics by delivering treats for the staff. Other departments recently recognized include:

• 6 North – 100 percent compliance with all stroke core measures
• Labor/Birthing – 100 percent compliance with elective delivery core measure
• 8 North – 100 percent compliance with immunization core measure for first month of flu season
• 9 South – 100 percent compliance with immunization core measure for first quarter of flu season
• 8 South – 100 percent compliance with immunization core measure for second quarter of flu season
• MWL 5 – 100 percent compliance with critical results documentation and timeliness
• 5 South – 100 percent compliance with venous thromboembolism (VTE) prophylaxis for five months and 100 percent critical lab documentation
• 5 North – 100 percent compliance with VTE prophylaxis for four months
• NICU – 100 percent compliance with NICU central line care from June 2016-August 2017
• 7 South – Zero central line-associated bloodstream infection (CLABSI) and zero catheter-associated urinary tract infection (CAUTI) for calendar year 2017

TRANSITION TO CLINICALKEY

Extra! Extra! Tell us all about it!

Information is only helpful if you 1.) receive it, and/or 2.) know how to find it. What would make getting the news you need at work work better for you? Tell us by filling out the 2018 internal communications survey, sent via email this week. A link to the survey will also be available in “Mercy News Briefs” through Tuesday, June 19.

Our PR and Marketing department is always on the lookout for new ways to effectively reach our Mercy colleagues, meeting your wide variety of needs, wants and interests. Help us continue to improve and enhance communications by sharing feedback and ideas.

CONTACT US

The Bulletin is published weekly for staff and friends of Mercy Medical Center, 1111 6th Ave., Des Moines, Iowa 50314-2611.

If you are interested in submitting information to be printed in the Bulletin, send it to PR and Marketing or call 515-247-3050.

FOLLOW US: