Oregon State Hospital

Office of the Deputy Superintendent

Tina Kotek, Governor

September 12, 2024



To all OSH staff,

This Administrative Directive modifies and adds to Oregon State Hospital policy number 1.003, "Incident Reporting" and 6.054 "Critical Values or Results." To establish Randomized Urinary Drug Screening (UDS), improve investigative documentation, expand reporting expectations and to improve patient safety, it is my directive that, effective Monday September 16, 2024:

Patient Randomized Urinary Drug Screening (UDS) Procedures

- See attachment 1 for the Random Urinary Drug Screen process overview.
- OSH will implement random Patient UDS every business day, Data and Analytics will generate the random patient selection. The number of samples are as follows:
 - 10 random samples will be selected in Salem
 - o 3 random samples will be selected in Junction City
- The unit will receive the orders on the unit printer on the day of the randomized UDS with the list of patients being generated into the morning communication tool to ensure completion.
 - Staff must inform the patient of the random UDS. Patient will be restricted to the unit until the sample is collected or for 72 hours.
 - Nursing staff must follow guidance outlined in Nursing standard work "Urine Drug Screen Collection with Direct Observation" located in the I: Drive (I: Drive> OSH Nursing Services Standard Work Manual> Standard Work Processes) for proper sample collection, handling, and response.
 - All Randomized UDSs must have direct observation.
- After the sample is collected, unit staff or OS2s must bring the sample to the Laboratory as soon as possible. If the sample was collected outside of Laboratory hours (Monday – Friday, 0630-1500), contact the Program Nurse Manager (PNM).
- Results will be delivered to the unit via the printer.

- Staff must do the following in response to a non-negative result awaiting confirmation:
 - The patient's IDT must monitor the patient while awaiting confirmed results when a result is non-negative for potential drug use.
 - o Behaviors to monitor may include unexpected sedation, change in behaviors, contraband concerns, and other notable behaviors outside of baseline. Patient is to remain on morning communication tool until results are confirmed.

Response to Alert Values

- Alert Values refer to random UDS results that are confirmed unexpected positives and confirmed unexpected negatives.
 - Confirmed results may take up to 10 days.
- Unit clinical staff must review all confirmed results and determine if any are Alert Values.
- Notification
 - Upon the receipt of Alert Value results, Nursing must notify:
 - The attending psychiatrist or psychiatric mental health nurse practitioner (PMHNP) within 30 minutes of receiving the results,
 - If there is no attending psychiatrist/PMHNP, the RN is to call the covering psychiatrist on duty (POD).
 - If the psychiatrist on duty is not able to be reached, call the medical physician on duty (MOD).
 - The Program Director,
 - The Director of Nursing Services (DNS), and
 - The Director of Security.
 - Lab must document any Alert Value and notify the unit during business hours, if any results are received outside of business hours, Lab must confirm the receipt of the result to the unit as soon as possible.
- Documentation and Reporting
 - Unit staff who receive the result must do the following in response to a confirmed unexpected positive:
 - Document the result and the completion of the incident report on the morning communication tool.
 - Lab staff and unit staff must complete processes outlined in Procedures A of OSH policy 6.054 "Critical Results or Values."

- Follow procedures outlined in OSH policy 8.019 "Staff Response to alleged criminal acts and contraband" for confirmed positive results of illicit substances.
- Complete and incident report per OSH policy 1.003 "Incident Reporting,"
 Staff must indicate if the positive result is for an OSH prescribed drug or illicit substance.
- Unit clinical staff who receive the result must do the following in response to a confirmed unexpected negative:
 - Document result and the completion of the incident report on the morning communication tool
 - Complete and Incident report per OSH policy 1.003 "Incident Reporting" for diverted medication.
- Units must track progress of the test results in the morning communication tool.

1.003 Investigative Requirements

- Reportable UDS results will be investigated as follows:
 - o Confirmed unexpected negatives: Level 1
 - Confirmed unexpected positive for a drug prescribed at OSH: Level 1
 - Confirmed unexpected positive for a drug not prescribed at OSH: Level 2

This directive will remain in effect until OSH Policies and Procedures are updated or the directive is otherwise rescinded.

Sincerely,