THE ROYAL AUSTRALASIAN COLLEGE OF MEDICAL ADMINISTRATORS



Inappropriate behaviour

2015 (November) – Day 2, Q5

Medical Leader	
Medical Expert	
Communicator	~
Advocate	•
Scholar	
Professional	٠
Collaborator	
Manager	•

You are the Director Medical Services of an outer metropolitan general hospital and are the executive on call for the week.

At 8am Sunday morning you are rung by the after-hours nurse manager to advise that a female patient had been found in the bathroom at around midnight 'fondling' an elderly male patient. The female patient absconded around 4am from the ward and has not returned.

The female patient is one that you already know about. She is a 40 year old homeless patient who requires long term treatment for a spinal abscess secondary to IV drug use. She has already absconded once this weekend and been brought back by police and on another occasion been found injecting through her IV site on the grounds of the hospital. You have already had a conversation the previous day with the admitting consultant who advised that the patient will become a paraplegic if she is not treated. He was talking of making her an involuntary patient under the Mental Health Act the next time she absconds. She is very disruptive on the ward.

The male patient is a palliative care patient with metastatic disease. He is confused and hallucinating. The wife has arrived to visit the patient and sits with him most of the day.

The ward nurse is concerned that the family will complain. The female patient had been admitted to a 4 bed ward with the other 3 patients being men. The male patient's wife and family members had already complained to nursing staff the previous evening about the female being admitted to the male ward, and her highly inappropriate behaviour.

Questions:

- 1. What are the significant issues in this situation?
- 2. What are your priorities for managing the situation?

RACMA

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Guidance for Censors

Issues to identify

- Management of patients' clinical conditions in setting of safety for both
- Patient safety
- Reputational risk to the hospital
- Adverse media
- Legal issues
- Bed flow policies

Management of the incident

- Notification of GM of incident
- Notification of police to locate and return patient
- Manage legal implications, consideration of reporting of incident to police
- Media management
- Incident reporting e.g. IMMs
- Review and/or development of policies on bed flow
- Staff training in bed flow management and management of patients with cognitive impairment, and/or behavioural issues



Assessment Rubric:

 Theoretical knowledge below basic specialist level and only 1 or 2 elements of managing the incident outlined. Only talks about what they do in their own situation without being able to demonstrate that they would be able to do it in another setting. Does not demonstrate an understanding of the elements of managing the incident Does not demonstrate understanding of legal, and duty of care issues 	 Does not demonstrate adequate skills in managing this type of situation. Only talks about what needs to be done from a theoretical point of view. Does not demonstrate that they have to take a leadership role in such a situation. 	 Does not demonstrate an understanding of how a medical administrator should handle him/herself in such a situation. Does not display appropriate concern about the seriousness of the incident.
 they do in their own situation without being able to demonstrate that they would be able to do it in another setting. Does not demonstrate an understanding of the elements of managing the incident Does not demonstrate understanding of legal, 	 needs to be done from a theoretical point of view. Does not demonstrate that they have to take a leadership role in such a 	appropriate concern about the seriousness of the
 Does not mention – even with prompting an understanding of the role of Mental Health Act or Guardianship, capacity to consent in patients with cognitive impairment Does not demonstrate understanding of data flow issues and implications of mixed wards Does not understand the significance of reporting up to a general manager. 		
 Only provides the most basics of elements of 	 Attempts to provide the answers that are required but leaves the censors with the impression that would struggle to manage such a situation. 	 With or without prompting the candidate only demonstrates a limited understanding of the challenges of managing this type of situation. Does not fully demonstrate that s/he appreciates the implications of the scenario
•	reporting up to a general manager. Only provides the most	reporting up to a general manager.Only provides the most basics of elements of being able to manage such a situation.• Attempts to provide the answers that are required but leaves the censors with the impression that would struggle to manage such



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			may cause problems if they managed in the way they described.	and staff.
Meets standard	3	 Must be able to demonstrate development of an appropriate management plan for the incident. Would need to demonstrate understanding of Mental Health Act and Guardianship, capacity, and cognitive impairment. Demonstrate understanding of clinical implications and impact on patient behaviour Demonstrate understanding of policies and procedures for bedflow and avoidance of mixed ward rooms Demonstrate an understanding of the elements of obligations of medical staff in managing patient care Understands legal reporting obligations 	 Be able to effectively manage incident and provide appropriate support services to patient and family Be able to support clinical staff in managing the situation Be able to manage issues of capacity and cognitive impairment in patients. Support clinical staff in developing a management plan for both patients to ensure optimal patient treatment inappropriate clinical setting Be able to review and develop policies and procedures on bed flow management of mixed ward rooms Manage media, reputational risk and external stakeholders such as the community, politicians, Ministry of Health Effectively communicates to staff appropriate management of bed flow to ensure mixed ward rooms are not used Demonstrate support for clinical staff involved in incident Manages legal risks 	 Understand the seriousness of the situation and implications for the patient, hospital and staff Demonstrates appropriate empathy and care for both patients