



STATE OF WASHINGTON  
DEPARTMENT OF HEALTH

**NOTICE OF IMMEDIATE JEOPARDY**

Facility Name: Providence Sacred Heart Medical Center

Facility Credential Number: HAC.FS.00000162

DOH Team Lead Investigator: [REDACTED]

Date & Time presented to facility representative: 04/30/25 8:00PM

Facility Representative: [REDACTED]

Patient Safety Risk Components	Yes/No	Observations and evidence that support findings
<b>Noncompliance:</b> Has the entity failed to meet one or more State health, safety, and/or quality regulations?	Yes	<p>WAC 246-320-226 (3) (d) Patient Care Services</p> <p>Hospital must adopt, implement, review, and revise patient care policies and procedures designed to guide staff that address patient safety measures.</p> <p>Interviews and medical record reviews showed that the hospital failed to develop and implement effective policies and procedures for caring for 4 of 8 patients who were identified to have suicidal ideation (SI) during their admission and failed to ensure that staff provided a safe environment for patients with SI.</p>
<b>AND</b>		
<b>Deficient practices or conditions have placed the health and safety of patients at risk for serious injury, serious harm, serious impairment or death (immediate jeopardy):</b>	Yes	<p>Document review of the hospital's policy and procedure titled, "Suicide Screening and Risk Mitigation in Non-Psychiatric Departments," PolicyStat ID 16083101, last approved 11/20/24, showed the following:</p> <p>The Columbia Suicide Severity Rating Scale (C-SSRS) screening tool will be completed on admission for all patients 12 and older by nursing staff or a licensed provider.</p> <p>All patients who are identified as low risk for suicide must have close observation.</p> <p>All patients who are identified as moderate risk must have a constant observer.</p> <p>All patients who are identified as high risk must not</p>