

North Sound Mental Health Administration

Regional Support Network for Island, San Juan, Skagit, Snohomish, and Whatcom Counties
Improving the mental health and well being of individuals and families in our communities

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NSMHA Contract Memorandum 2013-005

Date: August 6, 2013

To: Tom Sebastian, Compass Health
Donna Konicki, Bridgeways
Michael Watson, Lake Whatcom RTC
Jan Bodily, Whatcom Counseling and Psychiatric Center
Kathy McNaughton, Catholic Community Services Northwest
Claudia D'Allegri, Sea Mar
Ken Stark, Snohomish County Human Services Director
Phil Smith, Volunteers of America
Cindy Paffumi, Interfaith
Sue Closser, Sunrise Services
Christine Furman, Pioneer Human Services

From: Joe Valentine, Executive Director

Subject: Revised Policy

Policy 1555.00 – Freestanding Evaluation Treatment Facilities

This policy has been through the complete review and approval process. The Executive Director signed and approved this policy August 2, 2013.

Full implementation of this revised policy should occur no later than 60 days after this memo.

cc: Cindy Ferraro, Bridgeways
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Contract File

Effective Date: 7/31/2008; 11/23/2005
Revised Date: 5/18/2013
Review Date: 7/24/2013

North Sound Mental Health Administration
Section 1500 – Clinical: Freestanding Evaluation and Treatment Facilities

Authorizing Source: RCW 71.05, 71.24, and WAC 388-865, 246-337

Cancels:

See Also:

E&T facilities must comply with this policy and implementation
guidelines may be developed by CMHAs as needed

Approved by: Executive Director

Date: 8/2/2013

Responsible Staff: Deputy Director

Signature:

POLICY #1555.00

SUBJECT: FREESTANDING EVALUATION AND TREATMENT FACILITIES

PURPOSE

The role of this facility is to provide medically necessary inpatient evaluation and treatment services for acute psychiatric symptoms and is of short duration.

POLICY

The North Sound Mental Health Administration (NSMHA) contracts with Compass Health to operate one freestanding Evaluation and Treatment facility (E&T) in our region. All services are in accordance with:

- A. Revised Code of Washington (RCW) 71.05, RCW 71.24
- B. Washington Administrative Code (WAC) 388-865, WAC 246-337

This service is provided for individuals who pose an actual or imminent danger to self, others or property due to mental illness, or who have experienced a marked decline in their ability to care for self due to the onset or exacerbation of a psychiatric disorder.

The severity of symptoms, intensity of treatment needs, or lack of necessary supports for the individual does not allow him/her to be managed at a lesser level of care. This service does not include cost for room and board.

At a minimum, services include evaluation, stabilization and treatment provided by or under the direction of licensed psychiatrists, nurses and other mental health professionals, and discharge planning involving the individual, family and significant others so as to ensure continuity of mental health care.

The goal is to provide a 16-bed program to individuals with mental illnesses under 72-hour involuntary detention and/or 14-day commitment in accordance with the Washington State Involuntary Treatment Act, RCW 71.05.

The facility shall also provide Involuntary Treatment coordination to the Mental Health Professionals (MHPs), Designated Mental Health Professionals (DMHPs), and the Prosecutor's office in the form of consultation, testimony, records and reports, where required, at ITA proceedings for specific individuals. Compass Health shall also provide the MHPs, DMHPs, the Prosecutor's office and, where appropriate, the Court, with prior notice of release of detained persons. Compass Health specifically understands that all information and records in connection with performance of services pursuant to the Adult Involuntary Treatment Act, RCW 71.05, and the Community Mental Health Act, RCW 71.24 are strictly confidential and may only be released in accordance with the exceptions provided by state and federal law.

The E&T may provide evaluation and treatment services to adults on a voluntary admissions basis on a case-by-case basis in coordination with and approved by NSMHA care coordinators. This type of admission should be rare and should be part of the individual's crisis plan.

PROCEDURE

A. *Recipient Eligibility*

The E&T shall serve adult individuals with mental illnesses primarily from the North Sound Region.

1. Admission Criteria: Individuals must meet admission criteria per NSMHA Policy 1542, E & T Facilities Criteria Admission Medical Clearance Criteria including medical clearance and required diagnostic tests to be eligible for admission.
2. Ineligible for admission:
 - a. Sexually violent offenders being detained pursuant to RCW 71.09 or high risk sex offenders classified by the local law enforcement agencies will not be served by the E&T. Per state law, RCW 71.09 individuals who have been committed or have been convicted of any sex offense shall register with the County Sheriff for the county of the individual's residence. The level of risk is assigned by local law enforcement agencies when an individual is required to register following conviction of a sexual offense. Level III sex offenders are the highest risk and shall be excluded from the E&T. Level I and Level II sex offenders shall be considered on a case-by-case basis prior to admission. The DMHP, in consultation with the E&T staff, shall make the determination regarding Level I and Level II sex offenders as to the level of danger and appropriateness for admission.
 - b. Any individual with any pending (not dismissed or otherwise disposed) felony charge shall be excluded from admission. (Note: individuals released from jail on a Temporary Release (TR) may be considered on a case by case basis by the facility, after consultation with the DMHP).
 - c. Any DMHP within the NSMHA service area, in consultation with the E&T staff and in adherence with established admission criteria, will review pending detentions for medical care needs, safety and security to insure appropriate admissions. This shall be done in collaboration with E&T staff that may require basic medical clearance and or consultation with a physician prior to accepting an admission. If medical care, safety or security needs cannot be met by the E&T, per the E&T's licensed independent practitioner, the individual will be detained at an appropriate facility elsewhere (refer to NSMHA Policy 1577 E & T Refusal and Review Process).
 - d. Aside from the limitations above, the E&T will have a no decline policy for any referrals from any DMHP within NSMHA service area, provided the individual being referred meets the criteria for the population to be served under this section.

B. *Program Components*

1. Individuals will be detained initially for a 72-hour evaluation and treatment period by a DMHP and, if indicated, will be committed by a Superior Court Judge or Commissioner for a 14-day period, including any subsequent period pending 90-day judicial proceedings. Individuals shall also be detained pursuant to RCW 71.05 on a non-emergency basis when ordered by the Superior Court. Other admissions will occur when consumers are revoked from a Less Restrictive Court Order (LR) or Conditional Release (CR) under RCW 71.05.340 and WAC 388-865.
2. Pre-Admission Screening: All individuals referred for admission will be screened according to NSMHA Policy 1542, E & T Facilities Criteria Admission Medical Clearance Criteria. All referrals

will be documented in a referral log including name, date, referral source and disposition. Declined referrals will be noted with rationale. If the decline is due to medical care, safety or security, the name of the E&T licensed independent practitioner who declined the referral shall be documented (refer to NSMHA Policy 1577, E & T Refusal and Review Process). Aggregated data on referrals, admissions, and declines will be reported to the NSMHA on a monthly basis.

3. Evaluation and Treatment: Evaluation and treatment components shall include physical examination, psychosocial assessment, and mental status examination.
 - a. Each admitted individual shall be provided with an intake assessment by the E&T staff in accordance with WAC 388-865 requirements.
 - b. An individual treatment and discharge plan as required by WAC 388-865 and 246-337.
 - i. For individuals currently enrolled in outpatient services, the therapist, case manager or other appropriate professional will be contacted upon admission and involved in the development of the discharge plan. If outpatient services are being provided by NSMHA providers, the E&T will ensure that discharge planning occurs in accordance with NSMHA contract standards and policies.
 - ii. For un-enrolled individuals eligible for NSMHA outpatient services, the E&T staff will contact Access to schedule an intake appointment in accordance with NSMHA contract standards and policies.
 - c. A structured, daily program of activities and services.
 - i. Mental health treatment, including individual, group and family therapy to be available at a minimum of five hours per day.
 - ii. Related ancillary services and activities to include socialization and recreational activities and exercise.
 - d. Medications, medication evaluation and monitoring and medical education.
 - e. Mental health related laboratory services, as required.
 - f. Routine medical service within the limits of medical resources available at the E&T to include nursing assessments as needed and defined in WAC 388-865-0541 and NSMHA Policy 1542. Individuals requiring medical treatment in excess of this will be transferred to an appropriate hospital for treatment.
 - g. Services to address the needs of individuals with special needs as defined in WAC 388-865-0541.
 - h. The capability of detaining individuals dangerous to themselves and others with use of seclusion rooms and following WAC 388-865-0545 procedures.
 - i. The right to the least restrictive alternative to maintain health and safety when detaining individuals dangerous to themselves or others as established in NSMHA policies regarding care during seclusion and restraint and in accordance with WAC 388-865-0545 requirements.
 - j. Individuals shall be discharged from the E&T with appropriate transportation arrangements provided.
 - k. Any individual who is allowed to convert to a voluntary status during the involuntary admission shall legally consent to and follow all conditions applied to involuntary individuals.
 - l. Individuals converting to voluntary status shall have the right to request discharge at any time and, if discharged, will have transportation arrangements provided.
 - m. Court Evaluation and Testimony: Court may be held within the E&T. When Superior Court judicial proceedings occur at the E&T, these proceeding shall have priority over all other uses

of the conference/hearing room in the E&T. Compass Health shall, for court evaluation and testimony:

- i. Provide legal documents pertaining to the involuntary detention of individuals at the E&T, as required by the NSMHA Counties' Superior Court systems.
 - ii. Provide records and court testimony at probable cause hearings or trials by other professional staff employed at the E&T as requested. These records and testimony shall be provided, as needed, pertaining to the individual's behavior during detention at the E&T.
- n. Provide support to the DMHPs, County Prosecutor's office and State Attorney General's office in the form of consultation, live and telephonic testimony, records and reports, where required, at ITA proceedings for specific individuals. When necessary for judicial proceedings, Compass Health shall promptly supply a certified copy of all medical and psychological records and make available, if necessary, a records custodian capable of testifying in order to introduce medical and psychological records per RCW 5.45.020 and the civil rules of Washington State Superior Court.
- o. Accompany and provide care of individuals during court proceedings away from the facility.
- p. Evaluation and expert witness testimony for court purposes by a licensed physician, psychiatrist or licensed psychologist will be arranged and provided by the Snohomish County Human Services Department/Involuntary Treatment Office. Treating physician records and testimony shall be provided where necessary per RCW 71.05 and 71.34.

Initial screening and evaluation (and court testimony as needed) for court hearings will be done by the Snohomish County DMHP staff. Coordination of probable cause hearings will occur through the Snohomish County Involuntary Treatment Office. A court hearing room is located in the E&T where court hearings and non-jury trials shall occur.

C. *Personnel*

Compass Health will provide the necessary personnel at the E&T in the number, quality, professional backgrounds and licensure needed to assure compliance with state law.

Compass Health shall designate a physician or other mental health professional as the professional person in charge of the E&T for the following clinical purposes and responsibilities:

1. All decisions concerning medical or psychiatric treatment for persons in the E&T.
2. Prescriber with responsibility for treatment.
3. Explanation of rights to refuse medical treatment 24 hours prior to hearings.
4. Compliance with rights notifications to persons admitted to the E&T and ensuring rights afforded under statute and law to persons admitted to the E&T.
5. All transfers and/or referrals to appropriate facilities for alcohol or medical treatment after admission to the E&T.
6. Temporary releases under RCW 71.05. When transported off site, individuals are to be in the custody and care of an E&T staff and/or other mental health agency staff at all times. This includes residential facility screening visits for individuals who are ready for discharge and are considering placement at such facilities or for medical appointments. At no time shall individuals be given temporary passes from the facility.
7. To complete requirements that less restrictive alternatives be considered and to provide research of less restrictive alternatives to involuntary hospitalization and discharge planning.

8. Determining and coordinating with the DMHP, conditional releases and/or releases to less restrictive alternative to inpatient treatment.
9. Unconditional releases, including transportation and other assistance to released persons.
10. Notification under RCW 71.05.

D. *Training*

1. Training for all staff shall meet WAC 388-865 and 246-337 requirements. At a minimum, all staff will receive mandatory training in the following:
 - a. Managing assaultive behavior and use of seclusion and restraints per WAC and medical/ethical standards.
 - b. Nursing assessment review requirements for all licensed nurses.
 - c. Individual civil rights and ITA due process procedures.
 - d. Confidentiality of records/information.
 - e. Notification requirements.
2. Compass shall have an employee trained in cardiopulmonary resuscitation and emergency first-aid will be present at all times.
3. Compass shall establish training of E&T staff including temporary or on-call staff. Training shall include a planned, documented orientation for each new employee and an ongoing program of in-service training for all clinical staff designed to maintain and update competencies needed to perform assigned duties.
4. Compass shall conduct orientation and in-service education plans; plans will be maintained and attendance documented in each employee's personnel record.

E. *DMHPs*

Snohomish County DMHPs will be responsible for the following:

1. Screening decisions concerning whether a person should be excluded from the facility as a Level III sex offender, a mentally ill offender or in need of medical treatment at another facility prior to admission at the E&T.
2. Decisions on initial detention, provisional acceptance and admission at the E&T.
3. Decisions on commencement of 14-day petitions under RCW 71.05 with concurrence of Compass Health.
4. Decisions on commencement of 90-day petitions under RCW 71.05 with the concurrence of Compass Health.

F. *OTHER REQUIREMENTS*

1. Certification and Licensure: Compass Health is responsible for establishing certification or licensure. The E&T shall be certified as an E&T (Involuntary Component) by the Department of Social and Health Services (DSHS) and any other state required E&T certification or licensure. Compass Health shall comply with and meet all state and local health, fire and safety codes and regulations.

Certification as an E&T by DSHS requires compliance with certain Department of Health facility licensure standards; however, this facility is not required to be licensed under the current Department of Health WACs regarding private establishments. Compass Health is responsible for complying with applicable facility standards for E&T certification, and, at its discretion, may elect to obtain licensure it deems necessary or advantageous for insurance, third-party reimbursement or other such purposes or to meet other obligations. Compass Health shall be responsible for all

costs of such licensure. If the state develops licensure requirements for freestanding E&Ts or state licensure becomes applicable to this facility, Compass Health agrees to obtain such licensure.

2. Clinical Records: Shall be in accordance with WAC requirements and NSMHA policy.
3. Information System: Compass Health shall implement and maintain a system of fiscal, individual and program data collection and shall provide DSHS and NSMHA with such information and in such form as may be required by these agencies.
 - a. Data shall include bed utilization, length of stay and individual demographic data.
 - b. Compass Health shall cooperate with and provide information required for NSMHA's individual tracking system.
4. Notification Requirements: Compass Health shall be responsible for complying with all notification requirements of RCW 71.05 and with developing procedures to trigger adequate notification to identified persons and law enforcement and proper records disclosure.
5. Community Linkages: Compass Health shall establish and maintain ongoing working relationships with all elements of the NSMHA involuntary/voluntary mental health treatment systems for the purpose of facilitating the admission and discharge of individuals participating with these systems in problem solving and systems development activities. In addition, Compass Health shall be involved in the following Snohomish County Community efforts:
 - a. Participation on the Snohomish Crisis Oversight Committee.
 - b. Collaboration with local law enforcement, Mukilteo Police Department, Snohomish County Sheriff's Office and local Fire Department.
6. Length of Stay: Compass Health shall develop and implement policies and procedures to affect the timely discharge of these individuals.
7. Service Agreements: Compass Health shall maintain service agreements with DSHS, hospitals, Department of Developmental Disabilities (DDD), law enforcement, outpatient mental health providers and other community supports. Such agreements shall be updated on an annual basis.
8. Monitoring and Evaluation: All programs shall meet the criteria as set forth in this amendment, as well as meet the criteria of WAC 388-865 and 246-337. Compass Health shall cooperate with NSMHA and Snohomish County in monitoring and evaluation activities deemed appropriate by NSMHA and Snohomish County.
9. Critical Incidents: Compass Health will report all critical incidents in accordance with the NSMHA Critical Incident policy.
10. Disruptions in Service: Compass Health will notify NSMHA of any potential disruption in service.

G. REPORTING

1. Compass Health shall send the following data on a daily basis to NSMHA:
 - a. Number of admissions
 - b. Number of discharges
 - c. Midnight census (median)
 - d. Seclusion and restraint data
2. Compass Health will maintain a database to track and monitor use of seclusion and restraint in a format approved by NSMHA.

ATTACHMENTS

None