

 <p style="text-align: center;">County of Sacramento Department of Health Services Division of Behavioral Health Services Policy and Procedure</p>	Policy Issuer (Unit/Program)	BHS-CMH-YDF
	Policy Number	06-06
	Effective Date	10/2009
	Revision Date	07/2017
Title: Psychiatric Hospitalization		Functional Area: Clinical Care
Approved By:		
Matthew Quinley, LCSW Health Program Manager		Christopher Eldridge, LMFT Mental Health Program Coordinator

Background/Context:

Title 15, Section 1437.5 requires the Youth Detention Facility (YDF) health administrator/responsible physician, in cooperation with the behavioral/mental health director and the facility administrator, to establish policies and procedures to provide behavioral/mental health services that shall include the provision for timely referral, transportation and admission to a licensed mental health facility, and follow-up for youth whose psychiatric needs exceed the treatment capability of the facility. Youth who appear to be a danger to themselves or others or to be gravely disabled due to a mental health condition shall be evaluated either pursuant to applicable statute or on-site licensed health personnel to determine if treatment can be initiated in the juvenile facility.

Title 15, Section 1408 requires the health administrator, in cooperation with the facility administrator, to establish written policies and procedures to assure that a health care summary and relevant records are forwarded to health care staff in the receiving facility when a youth is transferred.

Purpose:

The objective of this policy and procedure is to establish the protocol by which Juvenile Justice Institutions Mental Health Team (JJIMHT) members will coordinate the timely referral, transportation and admission to a psychiatric facility for youth detained in the YDF whose needs exceed the treatment capacity of the facility.

Details:

1. Assessment and Notification(s)
 - A. Upon request of Probation staff for an evaluation or within the standard process of providing mental health services to youth detained in the YDF a JJIMHT clinician concludes a youth meets criteria for W&I Code 5150, the clinician shall consult with the JJIMHT Program Coordinator and/or program psychiatrist.
 - B. Following consultation and determination the youth exceeds the treatment capacity of the facility, the JJIMHT clinician will inform the Supervising Probation Officer (SPO) of the intention to transfer the youth to a psychiatric facility.

- C. The JJIMHT clinician having made the assessment of the youth will complete the Application for Assessment, Evaluation, and Crisis Intervention or Placement for Evaluation and Treatment (5150) form.
 - D. The JJIMHT clinician having made the assessment of the youth will complete the Declaration in Support of Emergency Removal of Minor from Juvenile Hall (Juvenile Court Local Rule 8.17) form and make 4 copies. The original form must be provided to the Court for inclusion in the youth's court file. Copies to be distributed as indicated on the form.
 - E. The JJIMHT clinician having made the assessment of the youth will contact the Juvenile Correctional Health clinic (875-5015) and request medical staff complete the Inter-Facility Transfer form pursuant to Title 15, Section 1408 due to an impending transfer to a psychiatric facility.
 - F. The JJIMHT clinician having made the assessment of the youth will be the point of contact for all communication regarding the process. In the event the assessing clinician is unavailable, the JJIMHT Program Coordinator or Clinician of the Day will assume the role of point of contact.
2. Preparation of Admission Packet
- A. The JJIMHT clinician will obtain an envelope, mark the envelope "confidential," make a copies of the completed 5150 form and ensure the original form accompanies the youth in the envelope. One copy will be scanned into the youth's electronic mental health record (EHR) and a copy distributed to the SPO.
 - B. The JJIMHT clinician will obtain the completed Inter-Facility Transfer form from medical staff and place the form in the envelope.
 - C. The JJIMHT clinician will print relevant clinical documents from the EHR such as, recent progress notes, psychiatric notes, JV220 (if applicable) and place in the sealed envelope.
 - D. The JJIMHT clinician will obtain relevant information from Probation to complete the Mental Health Transfer Summary form to ensure the receiving facility has contact information for any legally authorized individual and an on-duty SPO.
3. Contacting Psychiatric Facilities
- A. Between the hours of 10:00 and 19:00, the JJIMHT clinician will contact the Intake Stabilization Unit (ISU) at 875-1114 to present the case. The Mental Health Transfer Summary and relevant documents will be faxed to the ISU at 875-0764. When possible, the JJIMHT program psychiatrist will consult with the ISU psychiatrist to discuss the possibility of sending the youth directly to a psychiatric hospital and bypassing the ISU.
 - B. Outside of the hours of 10:00 and 19:00, the JJIMHT clinician will contact psychiatric hospitals directly to inquire about bed availability:
 - I. For youth aged 12 years or younger, contact:
Sutter Center for Psychiatry at 386-3620, fax 386-3634
St. Helena Center for Behavioral Health at (707)649-4040, fax (707)647-4089
 - II. For youth aged 13 or older, in addition to the above, contact:
BHC Heritage Oaks Hospital at 489-3336, fax 972-0444

BHC Sierra Vista Hospital at 288-0300, fax 622-5440

- C. If the intake department reports having a bed available provide the intake department with the necessary information, confirm the fax number and fax the Mental Health Transfer Summary for review. If, upon review of the information, the hospital requests a doctor to doctor consultation, contact the JJIMHT program psychiatrist with the contact information and request he/she call the hospital.
 - D. If the JJIMHT clinician experiences difficulty in obtaining a bed and/or acceptance of the youth in a psychiatric facility (all of which have the right of refusal), contact the JJIMHT Program Coordinator for assistance.
 - I. If necessary, the JJIMHT Program Coordinator will contact the Program Manager for assistance with the hospitalization process.
 - E. All youth aged 18 and above shall be transported to the nearest Emergency Department.
4. Transportation
- A. Upon acceptance of the youth at the ISU or psychiatric facility, the JJIMHT clinician will inform the SPO of the name, address and phone number of the accepting facility.
 - B. The JJIMHT clinician will ensure the sealed, confidential envelope containing the necessary information is sent in care of the probation escort(s) with instruction to provide the envelope to the accepting facility.
 - C. The JJIMHT clinician will advise the accepting facility of the estimated time of arrival based on SPO advice.
5. Coordination with Psychiatric Facility
- A. The JJIMHT Program Coordinator or his/her designee will maintain communication with the psychiatric facility staff, the JJIMHT program psychiatrist and Probation staff during the hospitalization.
 - B. The JJIMHT Program Coordinator or his/her designee will advise the JJIMHT program psychiatrist of changes in treatment during the course of the hospitalization and keep all disciplines advised of pending discharge date.
 - C. If appropriate, the JJIMHT Program Coordinator his/her or designee will attend staffing and/or discharge planning meetings during the course of the hospitalization.
6. Return to and Stabilization in YDF
- A. The JJIMHT Program Coordinator his/her or designee will be the point of contact for all communication regarding return of the youth from the psychiatric facility.
 - B. Upon return from the psychiatric facility, the youth will be assessed by JJIMHT clinical staff prior to being sent to a living unit (if possible). The clinician will consult with the JJIMHT Program Coordinator, program psychiatrist and SPO to formulate coordinated treatment planning and care.
 - C. The youth will be added to the Daily Unit Rounds List to ensure JJIMHT clinicians check-in daily with the youth supervision staff regarding the youth's stabilization progress or lack thereof. The youth will be removed from the list when the program psychiatrist has cleared the youth for regular programming.
 - D. The youth will be seen by the JJIMHT program psychiatrist at the earliest opportunity.

- E. The youth will be referred to the Special Needs Meeting for review of progress toward stabilization, treatment planning and coordination of care.
- F. The youth will be returned to regular daily activities when he/she has been assessed by the JJIMHT program psychiatrist and deemed sufficiently stable.

Reference(s)/Attachment(s):

Superior Court of California, Declaration in Support of Emergency Removal of Minor from Juvenile Hall, Juvenile Court Local Rule 8.17 Form

JJIMHT Mental Health Transfer Summary Form

Related Policies:

BHS-CMH-YDF-02-02-Confidentiality

BHS-CMH-YDF-04-05-5150 Application

BHS-CMH-YDF-06-07-Daily Unit Rounds

BHS-CMH-YDF-06-08-Special Needs Meeting

BHS-CMH-YDF-07-02-Emergency Administration of Psychotropic Medication

BHS-CMH-YDF-08-04-Documentation Guidelines

BHS-CMH-YDF-08-06-HIPAA Complaints and PHI/EPHI Breach Protocol

BHS-CMH-YDF-08-09-Release of Protected Health Information

Contact Information:

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