

Effective Date: 9/3/2008; 6/23/2004
Revised Date: 1/27/2010
Review Date: 1/27/2010

North Sound Mental Health Administration
Section: 1500 - Clinical: Accessibility, Engagement and Utilization of
Services for High Need Individuals Not Engaging in Treatment

Authorizing Source: NSMHA

Cancels:

See Also:

Providers must "comply with" this policy

Responsible Staff: Quality Manager

Approved by: Executive Director

Date: 2/3/2010

Signature:

POLICY #1502.00

SUBJECT: ACCESSIBILITY, ENGAGEMENT AND UTILIZATION OF SERVICES FOR HIGH-NEED INDIVIDUALS IN OPEN EPISODES NOT ENGAGING IN TREATMENT

PURPOSE

To encourage accessibility, engagement and utilization of services for consumers in open episodes who are high-need and resistant to/not engaging in treatment as a result of symptoms of their mental illness.

POLICY

Clinicians will consult with their supervisors regarding appropriate interventions when consumers engage in behaviors that indicate that they are high-need and resistant to treatment as a result of symptoms of their mental illness, or appear to be at risk due to a deteriorating mental health condition and disengagement from treatment.

PROCEDURE

Supervisory consultation will be sought when consumers engage in behaviors that indicate that they are high-need and resistant to treatment or appear to be at risk due to a deteriorating mental health condition and disengagement from treatment. Behavioral indicators may include (but are not limited to) current or historical instances of:

- Repeated contact with law enforcement as a result of mental illness;
- Repeated visits to Emergency Departments to seek mental health treatment, including psychiatric medications;
- Repeated instances of losing housing as the result of mental illness;
- Repeated psychiatric hospitalizations;
- Individuals on Less Restrictive Alternatives (LRAs) or Conditional Releases (CRs) who do not attend the intake/assessment appointment;
- repeated no-shows and/or cancellations of appointments

Potential interventions which may be considered during supervisory consultation include (but are not limited to):

- Outreach to the consumer; including calls, welfare checks, and/or two-person outreach to the home;
- Filing of a Crisis Alert with Volunteers of America;
- Facilitating access to an emergency psychiatric appointment;
- Requesting an evaluation for involuntary treatment (if the person appears to be becoming gravely disabled and/or a risk to self or others secondary to a mental disorder and **is** at imminent risk); or
- Requesting revocation of a Less Restrictive Order or Conditional Release Order (if the consumer is on such an order).

ATTACHMENTS

None