Washington State Department of Social and Health Services

Transforming Lives

Triage Consultation and Expedited Admission: Update and Training

DSHS Office of Forensic Mental Health Services

September 16, 2019

Washington State Department of Social & Health Services
Transforming lives

Learning Objectives

Participants will learn:

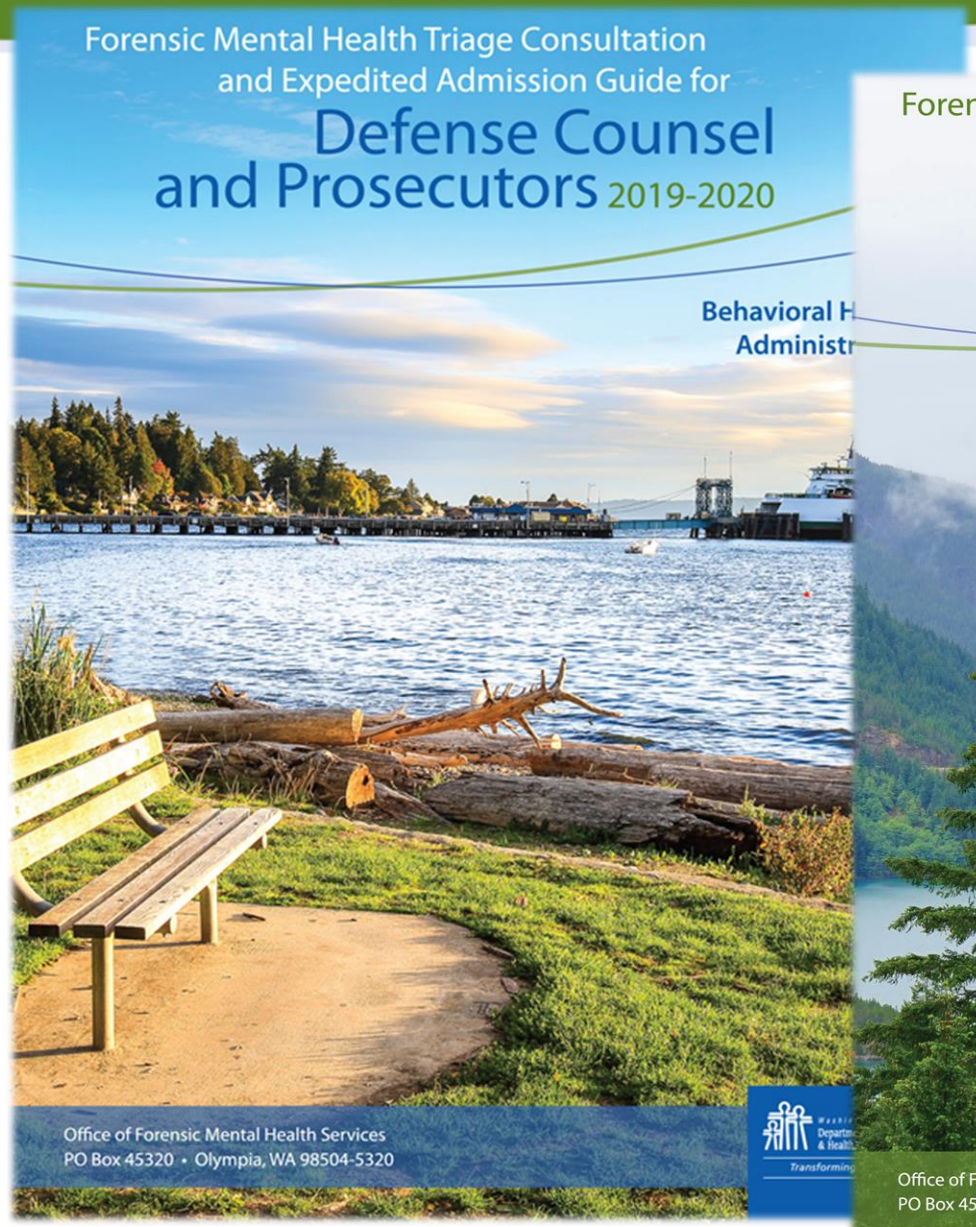
1. Purpose of the Triage Process
2. About the Triage User Guides and forms
3. Eligibility criteria for early admission
4. How to make an effective Triage request
5. How to get more information

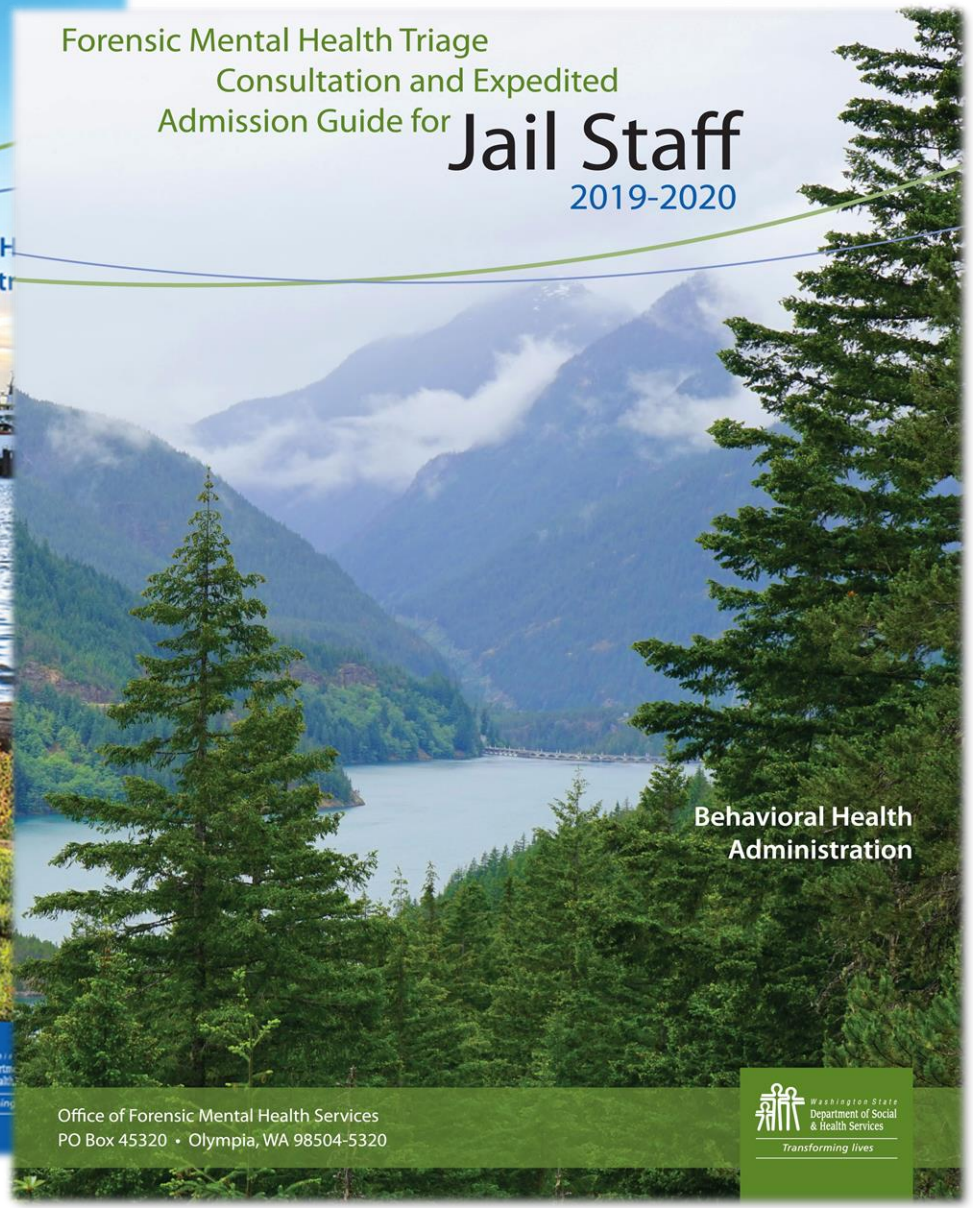
Overview

- The OFMHS oversees the admission process into DSHS operated facilities for persons court-ordered into competency evaluation and restoration services.
- Presently our inpatient facilities include Eastern State Hospital, Western State Hospital, and DSHS operated competency restoration residential treatment facilities.

Purpose

- The Triage Consultation and Expedited Admission service is for *Trueblood* class members who require rapid admission into inpatient psychiatric services because they are at risk of harm to themselves or others as a result of their high level of psychiatric symptoms.
- The Triage program allows those persons most at risk to move up to the top of the admission lists at the DSHS inpatient facilities, where otherwise they would have to wait their turn in the waitlist queue.


Forensic Mental Health Triage Consultation
and Expedited Admission Guide for
Defense Counsel
and Prosecutors 2019-2020
Office of Forensic Mental Health Services
PO Box 45320 • Olympia, WA 98504-5320


Forensic Mental Health Triage
Consultation and Expedited
Admission Guide for Jail Staff
2019-2020
Behavioral Health
Administration
Office of Forensic Mental Health Services
PO Box 45320 • Olympia, WA 98504-5320
Washington State
Department of Social
& Health Services
Transforming lives

STATE HOSPITAL

TRIAGE CONSULTATION & EXPEDITED ADMISSION REQUEST

(Please type)

PATIENT INFORMATION

Patient's last name: | First: | Middle: | Cause Number:

Interpreter required ☐Yes ☐No | Language: | Disabilities: | Birth date: | Age: | Sex: ☐ M ☐ F

Last known street address: | SSN: | Home phone: ( )

P.O. box: | City: | State: | ZIP Code:

Guardian: ☐ Yes ☐No: Name: phone: | Attorney Assigned: Name: phone:

☐ Felony charges individual awaiting: ☐ In jail evaluation ☐ Inpatient evaluation ☐ competency restoration
OR
☐ Misdemeanor charges individual awaiting: ☐ In jail evaluation ☐ Inpatient evaluation ☐ competency restoration

Date of arrest: Click here to enter a date. | Date of most recent court order: Click here to enter a date.

What about the individual's condition, behavior or presentation is prompting this referral?

Please describe interventions/supports that have already been attempted in this facility and the outcomes:

Relevant recent history:

Does the individual currently have a prescription for medications to treat mental health symptoms? ☐ Yes ☐ No
If No, has the individual expressed a willingness to take medications if prescribed? ☐ Yes ☐ Not discussed ☐ No, unwilling

Is the individual currently taking medications to treat mental health symptoms? ☐ Yes☐ No
If No, please describe efforts to administer medications:

JAIL INFORMATION

Referring jail: | Referring Jail administrator: | Primary contact for this case: | Primary contact number: ( )

Additional Comments:

MENTAL HEALTH PROVIDER

Name agency or clinician currently treating client: | Primary contact name: | Title/Position: | Phone no.: ( )

The above information is true to the best of my knowledge.

Referral Completed by: | *Date of referral:* Click here to enter a date.

- This completed form should be emailed to: triageconsult@dshs.wa.gov
- This email box is checked at 10am daily Monday through Friday.

You will receive a confirmation receipt that contains the link to upload copies of the documents you are including. At a minimum your packet must include the following:

☐ A completed copy of the Triage Consultation & Expedited Admission Request
☐ A copy of the valid court order for admission to a state hospital;
☐ Medical and Psychiatric Records from the jail facility;
☐ Medication records for the last 72 hours;
☐ Logs for the duration of the inmate's current stay at the jail facility detailing restraint and seclusion/special observation/administrative segregation/ or disciplinary segregation; and
☐ If available, status of a court order for administration of involuntary medications. **An order for the administration of involuntary medications is NOT required for referral for expedited admission.**

Eligibility

The criteria for a defendant who is court-ordered into competency evaluation and/or restoration services to be considered for expedited admission are as follows:

- Active suicidal intent, or actions such as suicide attempts or serious self-inflicted injury; and/or
- Inability to meet basic needs that puts the individual's health at risk, such as not eating or drinking.
- The criteria are based on the rationale that people who meet these criteria are at particularly high risk of harm to themselves or others and require expedient admission into an inpatient psychiatric care setting.

Triage training scenario #1

24-year-old male with recent onset of schizophrenia and severe depression was found attempting to hang himself in his jail cell with his bed sheet. The jail has addressed the immediate risk but believes this individual has ongoing urgent clinical treatment needs.

Likelihood of meeting criteria for expedited admission (Scenario #1)

HIGH

- Life-threatening situation due to recent suicide attempt and possible ongoing intent to harm himself.

Triage training scenario #2

30-year-old female with a history of mania has refused her mood stabilizing medications about 50% of the time over the past 2 weeks. She is found pacing in her jail cell and, when engaged in conversation with jail staff, rambles about how she does not need mental health treatment and how she perceives the jail to be a dirty place. She is eating and sleeping and presents no safety issues.

Likelihood of meeting criteria for expedited admission (Scenario#2)

LOW

- Situation could lead to ongoing symptoms of mania/moderate risk of continued illness or possibly deterioration. There is no immediate danger to the person.

Triage training scenario #3

58-year-old male is anxious and aggressive, disinhibited and, although he speaks coherently, does not follow directions and rules of the institution at times, causing problems for himself with the jail staff, who have several times segregated him for infractions. He has difficulty relating to others, and perseverates on questions to fellow inmates, leading to fights. He was in segregation two weeks ago and while in segregation (continued on next slide)…

Training scenario #3 continued

…he began to injure himself by scratching his arms and cheeks but the scratches did not require medical intervention. He does have periods when he follows staff directions and institution rules and is currently showing compliance with staff and rules but he has been yelling at staff lately making statements about how frustrated he is with being in jail. He is currently not doing anything to injure himself.

Likelihood of meeting criteria for expedited admission (Scenario#3)

MEDIUM

- Situation may be caused by brain injury or cognitive impairment and could lead to injury to self or others as a result of other inmate aggression or physically coercive staff intervention.

Triage training scenario #4

43-year-old female with schizophrenia with predominantly disorganized symptoms is found with her feces on her face and in her food as she is eating the meal.

Likelihood of meeting criteria for expedited admission (Scenario #4)

HIGH

- Situation could lead to medical compromise

Jail Staff: How to make a request

- Download and fill out the Request Form (available at: https://www.dshs.wa.gov/bha/triage-consultation-and-expedited-admission-tcea)
- Collect supporting information. This should include:
  - Copy of valid court order for hospital admission
  - Medical/MH records from the current stay in jail.
  - Medication records for the last 72 hours (if available)
  - Logs from current stay detailing use of restraint, seclusion, special observation, segregation, etc.
- Fill out all requested fields of the TCEA referral form (can be handwritten or typed)
- Email completed form and all above documents to: triageconsult@dshs.wa.gov.

Attorneys: How to make a request

- Legal counsel can request expedited admission of an individual by submitting an email to: triageconsult@dshs.wa.gov
- Information may be written in paragraph form
- The request should fully articulate why the attorney believes the individual meets the criteria for expedited admission
- The request should include the individual's legal status (e.g. felony charges: individual awaiting in jail evaluation)

Helpful tips

- Provide information to support the concerns you describe in your request. Remember who you are "speaking" to (licensed clinicians), and try to anticipate their questions about the health and behavioral status of the defendant.
- For instance, if you describe that the patient is not taking food because they believe the food is poisoned, the reviewers will wonder *"Has the patient lost weight? If yes, how much and over what period of time?"* This type of specific information should be included in the Request Form if it is available.
- In scenarios where the defendant may have refused medical or mental health assessment or treatment, please indicate the refusal and include dates and times that assessment or treatment were attempted and refused.

What happens next

1. The OFMHS Triage Consultant reviews the application for completeness within 24 hours, excluding weekends and holidays, and advances the request for review by OFMHS licensed clinician.

   NOTE: If more info is need, the Triage Consultant will contact the referrer
2. OFMHS licensed clinician completes clinical review of the request and documents their recommendation as to approval, or not, of the request for expedited admission.
3. The OFMHS Triage Consultant then advances the case to the Chief Medical Officer (CMO) at the State hospital, who is a licensed psychiatrist, for their review and decision regarding expedited admission.
4. Within 24 hours, the CMO either approves or does not approve expedited admission. The CMO notifies the Triage Consultant of the decision.
5. The Triage Consultant notifies the referrer of the decision.
6. State Hospital admissions staff coordinates admission with the jail.

What happens next (Cont.)

- With approved expedited admissions, the defendant is admitted as soon as a bed is available.
- If expedited admission is denied, the standard waitlist protocol is followed.
- If the health or behavioral status of the defendant changes after a TCEA denial, please resubmit following the same procedures.

What questions do you have?

In order to request an expedited admission please submit the required material to:

triageconsult@dshs.wa.gov

For additional assistance or training on this process please email us at:

jailtechnicalassistance@dshs.wa.gov

Thank you!

Please don't forget to complete our training evaluation survey at https://www.research.net/r/KRD8QY8

A downloadable PDF version of this training and video is available at our website:

https://www.dshs.wa.gov/bha/office-forensic-mental-health-services/jail-technical-assistance-program