

Forensic Mental Health Triage
Consultation and Expedited
Admission Guide for **Jail Staff**
2019-2020

**Behavioral Health
Administration**

Office of Forensic Mental Health Services
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Washington State
Department of Social
& Health Services

Transforming lives

ACKNOWLEDGEMENTS

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DISCLAIMER

This guide is not meant to replace the expertise and knowledge of medical and mental health professionals. This guide is to be used solely for navigating the triage admission process implemented by the Office of Forensic Mental Health Services (OFMHS) and increasing the efficiency of the process to identify individuals ordered for competency restoration or evaluation services and awaiting admission for those services whose current presentation necessitates consideration for expedited admission.

Forensic Mental Health Triage Consultation and Expedited Admission Guide for Jail Staff

Behavioral Health Administration
Office of Forensic Mental Health Services

WHO IS THIS GUIDE MEANT FOR?

The Washington State Department of Social and Health Services (DSHS) Behavioral Health Administration (BHA) Office of Forensic Mental Health Services (OFMHS) oversees the state psychiatric hospital admission process for persons court-ordered into competency evaluation and restoration services. In addition, OFMHS offers a Triage Consultation and Expedited Admission service that prioritizes the admission of *Trueblood* class members (defined as individuals who are court-ordered into competency evaluation and/or restoration services and who await those services in jail). Prioritized class members require rapid admission into inpatient psychiatric services because of risk of harm to themselves or others due to their high level of psychiatric symptoms. This user-friendly guide provides an overview of the triage system, details criteria for expedited admission and clarifies the process to submit a referral for consideration of an individual defendant's expedited admission. We hope that our jail-based system partners find this guide to be a useful tool to understand the triage system and its potential applicability to the people who are in their custody and court-ordered to competency evaluation and/or restoration services.

For questions and comments regarding Forensic Mental Health Triage, please contact the OFMHS Liaison and Diversion Specialist by email triageconsult@dshs.wa.gov or by phone at 360-725-2265.

Behavioral Health Administration
- Office of Forensic Mental Health Services

ABOUT THE FORENSIC MENTAL HEALTH SYSTEM

The DSHS's Office of Forensic Mental Health Services, with headquarters in Lacey, is responsible for the leadership and management of the Department's adult forensic mental health care system. The OFMHS provides forensic evaluations, competency restoration, Not Guilty by Reason of Insanity (NGRI) treatment services and liaison services to effectively coordinate efforts with system partners to meet shared goals. The OFMHS additionally provides ongoing training and technical assistance to improve quality and timeliness of forensic mental health services, data management and resource allocation, training and certification of evaluators, and quality monitoring and reporting. The OFMHS works in collaboration with community partners to implement robust diversion efforts to prevent individuals with mental illness from entering the criminal justice system. For more information regarding entities within the Washington State Forensic Mental Health System, please visit the OFMHS website: <https://www.dshs.wa.gov/bha/office-service-integration/office-forensic-mental-health-services>

Within the forensic system, OFMHS helps manage the referral process for the forensic units at our state psychiatric hospitals and forensic Residential Treatment Facilities. As part of that referral process, OFMHS operates a triage consultation and expedited admission system to facilitate the expedited admission of *Trueblood* class members who meet certain criteria that would justify prioritizing the person's admission to a state psychiatric hospital. Please note that the triage system is not appropriate for people in need of emergency medical services as those individuals should be appropriately assessed and referred for immediate medical attention.

CRITERIA FOR EXPEDITED ADMISSION

The criteria for a class member to be considered for expedited admission are:

- **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 for a sufficient period of time which could lead to medical consequences.**

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. If an individual is engaging in any of those behaviors, a request for expedited admission is recommended. When in doubt, please make the request.

Please be sure to consult with your nursing and medical staff if there are questions or concerns about the care provided to inmates in jail. *Trueblood* class members, as with any individual housed in a jail presenting with acute medical needs, should be appropriately assessed and provided the appropriate level of care they require. The state psychiatric hospitals are not acute medical hospitals and are never a substitute for appropriate and necessary urgent medical care.

NOTE: If an individual is at imminent risk of harm due to a mental disorder, and is legally eligible for possible release from jail into an Evaluation and Treatment facility, the local Designated Crisis Responder (DCR) should be contacted to evaluate the individual and, if needed, to facilitate emergent admission to a psychiatric facility. DCRs are available 24/7 to evaluate for risk of harm.

PROCESS FOR REFERRAL FOR EXPEDITED ADMISSION

For referrals from jail staff, please follow the instructions provided in the Request for Triage Consultation and Expedited Admission form (double click on the icon above to open). A confirmation regarding receipt of the referral for triage will be sent within 24 hours (excluding weekend and holidays) to the jail staff that referred the individual for consideration.

Below is a description of the essential information needed to complete the referral?

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

This section describes how the criteria are met. Please provide information about the person's symptoms, behaviors and anything else that would be helpful in showing how the person is at risk of harming themselves or others, or unable to meet their basic needs. Please avoid the use of vague statements and jargon in this section.

- b. Please describe interventions/supports that have already been attempted in this facility and the outcomes (including diversion eligibility).

This section describes any interventions/supports that have been implemented by the facility. For example, if psychiatric medication is provided to the person, please provide information regarding the medication(s), dose, adherence and changes to the person's condition during the course of the medication trial. Information about the medication(s) from a Medication Administration Record (MAR) can be included in the referral packet. If counseling or psychotherapy has been offered to the person, please provide information regarding the level of adherence, techniques used and the person's response. Counseling or psychotherapy notes can be included in the referral packet.

- c. Relevant recent history.

This section provides any recent history that is relevant to the referral. For example, if police records show that the person likely attempted suicide immediately before (s)he was detained by police three days ago, this information is considered recent and relevant to the person's psychiatric functioning so it is appropriate for this information to be included in this section.

- d. Logs for the duration of the inmate's current stay at the jail facility detailing special observation/administrative segregation/disciplinary segregation.

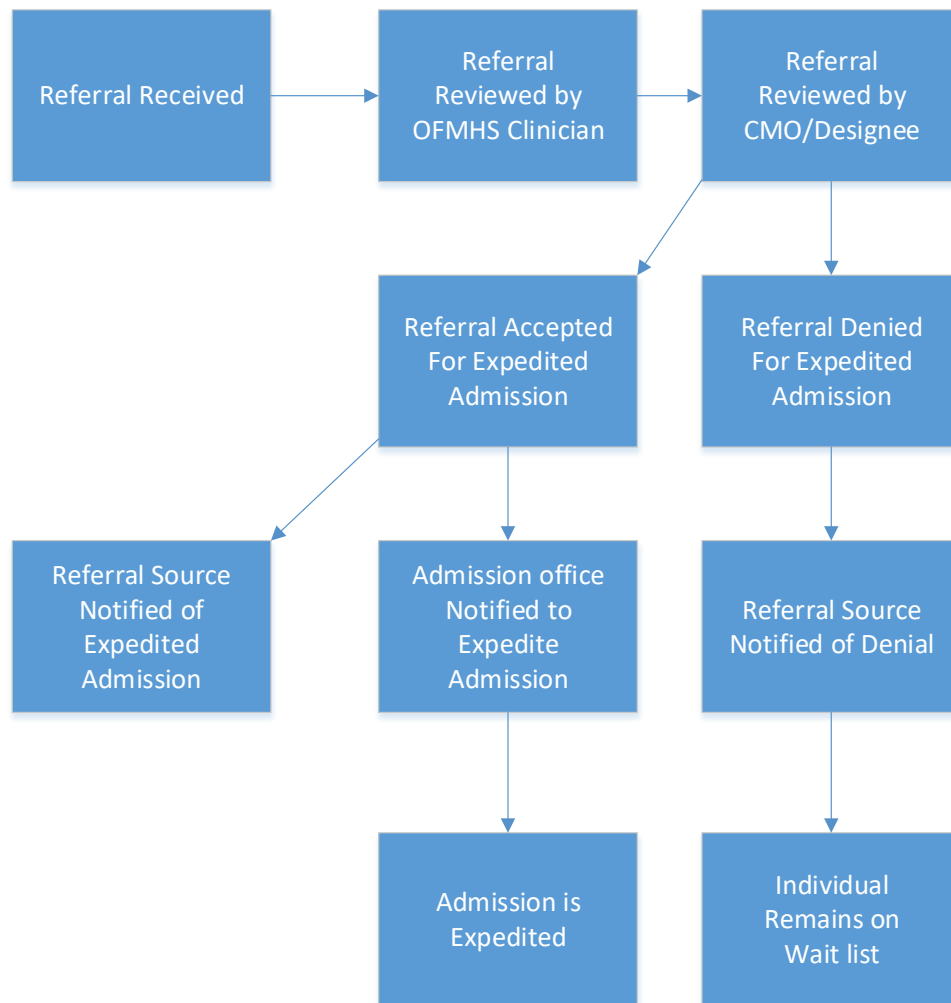
If the person's behavior necessitated security actions such as administrative or other type of restrictive or segregated housing, emergency physical or mechanical restraint, restraint chairs or other similar or related methods to help manage disciplinary concerns, please include records regarding the use of the techniques and any records resulting from ongoing use of the restriction.

- e. Medical and psychiatric records from the jail facility, including:

- Medication Administration 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;
- If available, status of a court order for administration of involuntary medications.

NOTE: An order for forced medication by itself is not a condition for expedited admission and would not by itself automatically trigger a request for consideration for expedited admission.

Once the referral packet has been received from the jail, within 24 hours (excluding weekends and holidays) an OFMHS clinician will review the information provided and then make a recommendation as to whether the individual meets the criteria for expedited admission. Within 24 hours of the clinician's review, the referral will then be forwarded to the respective state hospital's Chief Medical Officer (CMO) or designee for the decision of expedited admission. The CMO or designee then makes a decision within 48 hours of receipt. If the CMO or designee decides to accept the case for expedited admission, the admission staff at the state hospital is notified of this decision and coordinates with the jail to arrange for the earliest possible admission to the psychiatric hospital's forensic unit. OFMHS will also notify the defense counsel and prosecutor of the expedited admission. If the CMO or designee decides to deny the referral, then OFMHS is notified of this denial per the CMO or designee and then informs the jail of the denial, along with the defense counsel and prosecutor. The following flow chart (Figure 1) represents the usual steps involved in the process:

Figure 1: TRIAGE Process

NOTE: A referral for expedited admission can be submitted at any time even if a previous referral for the same person was denied.

If after the referral has been submitted new information becomes available that would inform/supplement the referral, please send the material to the submission email, triageconsult@dshs.wa.gov, as soon as possible.

If you have questions, comments, suggestions or any other information pertaining to Forensic Mental Health Triage, please contact the designated OFMHS Liaison and Diversion Specialist at 360-725-2265.

ADDITIONAL RESOURCES

The following resources provide general information and are not specifically associated with the Triage process.

Substance Abuse and Mental Health Services Administration, GAINS Center. Trauma Training for Criminal Justice Professionals [website](#).

Substance Abuse and Mental Health Services Administration. Trauma-Informed Care in Behavioral Health Services [website](#).

The treatment of persons with mental illness in prisons and jails: a state survey. Treatment Advocacy Center and National Sheriff's Association [website](#).

Washington State Administrative Office of the Courts [website](#). The site provides forms that are used statewide in Washington Courts.

Washington State Legal System Guide to Forensic Mental Health [link](#).

Washington State Forensic Mental Health Consultant Review Final Report [website](#).

Washington State Office of Forensic Mental Health Services [website](#).