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## Patient Care Manual

Subject: Behavioral Health Services: Scope of Services for Professional Services  
for PRMC Behavioral Health Services

**Effective Date:**

**Approved by:**

**Responsible Parties:**

**Revised Date:**

**Reviewed Date:**

**Keywords:**

### Policy

Peninsula Regional Medical Center Behavioral Health Services provides a continuum of behavioral healthcare services which include: acute inpatient care for adults, adolescents, and children; partial hospitalization services for adults; and outpatient services for adults, adolescents, and children. PRMC provides trauma-informed services and treatments that are patient and family centered. The services and care, which are provided are sensitive to the cultural and ethnic diversity of the community served.

1. It is our responsibility to care for the total person in the knowledge that pathology in one area affects the level of functioning in another. We believe that the human being is a delicate balance of emotional, intellectual, and physical dimensions. Psychiatric disorders result in disturbances in thought, behavior, and affective process. These disturbances impair the ability to perform basic life roles and severely disruptive family, social and educational relationships, which can be ameliorated by effective psychiatric care.
2. PRMC is committed to providing quality behavioral healthcare to our community. This commitment is demonstrated through the facility's mission and supported through effective strategic and fiscal planning. Resources are utilized to meet patient, family, and staff goals.
3. PRMC provides a therapeutic environment through an individualized treatment program, developed by an interdisciplinary team. Care is centered upon a holistic philosophy. Resources are organized around each patient through the development of an individualized plan and drive treatment from admission to discharge.
4. Clinical services are developed in partnership with patient and family. Care focuses on promoting the patient's ability to cope with life challenges and facilitating recovery.

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## Organization

## Programs

1. PRMC provides clinical care based in a foundation of therapeutic relationships and therapeutic environment. Each program is designed to provide clinical services appropriate to the scope and level of care required by the unique patient population served.
2. A multidisciplinary staff provides an individualized treatment program to improve the individual's ability to manage illness and facilitate recovery. Clinical services may include: medication management, individual therapy, group therapy, family therapy, psychoeducation, substance abuse education, discharge planning and educational services. Qualified professional staff delivers therapeutic services. Services that are not available within the facility may be provided through referral, consultation or contractual agreements with area professionals and other healthcare facilities.
3. The focus of treatment is to restore the individual to the highest level of functioning. The patient's goals, strengths, and discharge needs provide that basis for care from admission to discharge.

### A. Adult Acute Inpatient Services

The adult psychiatric programs are designed for the treatment of adult patients, age 18 and over, with a primary psychiatric diagnosis. Patients may have a secondary substance abuse diagnosis.

The Adult Inpatient Psychiatric Unit is a 13-bed unit specializing in the treatment of both voluntary and involuntary admissions with acute psychosis and homicidal or suicidal ideation.

Individuals who would not be considered for adult acute admission include those with a primary diagnosis of substance abuse, individuals with cognitive and/or physical impairments which render them unable to function at minimally acceptable levels within the treatment program, and medically unstable patients whose safety requires treatment in a medical/surgical unit.

#### **AREAS OF ASSESSMENT**

Psychiatric evaluation  
Medically-managed detoxification  
Nursing assessment  
History and physical exam  
Medical/Surgical consults  
Dietary consults  
Psychosocial assessment  
Continuing care planning  
Spiritual assessment  
Activities therapy assessment  
Pharmacological assessment  
Management

#### **SERVICE PROVIDERS**

Provider  
Provider  
Registered nurses  
Provider  
Consulting provider  
Dietician  
Licensed therapist  
Care Manager  
Pastoral Care  
Expressive therapist  
Psychiatric pharmacist

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## B. Child and Adolescent Acute Inpatient Services

The unit is designed for the treatment of children and adolescents, with serious emotional disturbances ages 5 through 17, with a primary psychiatric diagnosis and possibly a secondary substance abuse diagnosis. The developmental needs of the child and adolescent population are integrated into the individualized plan of care. Individuals with developmental disabilities are generally not accepted into the program. The clinical program is family centered and recovery oriented. Medication management combined with family centered therapy provide the framework for care.

### **AREAS OF ASSESSMENT**

Psychiatric evaluation  
Medically-managed detoxification  
Nursing assessment  
History and physical exam  
Medical consults  
Dietary consults  
Psychosocial assessment  
Continuing care planning  
Spiritual assessment  
Activities therapy assessment  
Pharmacological assessment  
Management

### **SERVICE PROVIDERS**

Provider  
Provider  
Registered nurses  
Provider  
Consulting provider  
Dietician  
Licensed therapist  
Care Manager  
Pastoral Care  
Expressive therapist  
Psychiatric pharmacist

## C. Adult Partial Hospitalization Program

The Adult Partial Hospitalization Program specializes in the treatment of adults with serious emotional disturbances that are safely managed in the community. The program partners with the family and community support network to provide care. The program provides two primary functions: intense outpatient care as clinically indicated and a transition from inpatient care or as an alternative to inpatient care. This program is in operation five (5) days per week, eight (8) hours per day.

### **AREAS OF ASSESSMENT**

Psychiatric evaluation  
Nursing assessment  
History and physical exam  
Dietary consults  
Psychosocial assessment  
Continuing care planning  
Pharmacological assessment  
Management

### **SERVICE PROVIDERS**

Provider  
Registered nurses  
Provider  
Dietician  
Licensed therapist  
Care Manager  
Psychiatric pharmacist

## D. Outpatient Clinic

The Outpatient Clinic (OP) provides outpatient behavioral healthcare for children ages four and older, adolescents, adults, and older adults with a primary psychiatric diagnosis. Services include psychiatric evaluations, psychosocial evaluations, psychotherapy, psychoeducation, and medication management. The OP cannot accommodate the following: forensic evaluations, patients that require extensive case management, patients that require team-based treatment better provided in a psychiatric rehabilitation program or partial hospitalization program, patients with

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chronic, severely debilitating mental health symptoms requiring treatment at least three days a week, patients in early stages of recovery from a substance abuse disorder or actively abusing substances. Mild cases of substance abuse if actively enrolled in a substance abuse treatment program are accepted. Individuals with a primary diagnosis of developmental disabilities are not accepted.

## **AREAS OF ASSESSMENT**

Psychiatric evaluation  
Psychosocial assessment

## **SERVICE PROVIDERS**

Provider  
Licensed therapist

### Inpatient Level of Care Only

#### **Screening for Level of Care**

PRMC accepts referrals for acute care from the professional Behavioral Health community, primary care providers, managed care companies, court systems, community agencies, education systems, self-referrals, and significant others. Qualified masters-prepared staff, clinical supervisory staff, registered nurse or active members of the medical staff perform intake screenings and evaluations 24 hours per day, seven days per week. The staff provide a recommendation for the level of care according to the clinical needs of the individual. PRMC accepts both voluntary and involuntary patients. Patients are admitted under the care of an attending provider. The staff works with the individual and or referral source to identify community-based resources as needed.

#### **Assessment and Evaluation Process**

Assessment is initiated at the time of evaluation and continues from admission until discharge. Treatment planning creates an individualized plan of services developed in partnership with individuals and their support system. Initial assessments include the following:

The attending provider performs the Psychiatric Evaluation within 24 hours of admission. The evaluation includes a history of the presenting problem, family history, review of medical history, mental status exam, diagnostic impression, strengths, and weaknesses.

The provider performs the Medical History and Physical Evaluation within 24 hours of admission. The evaluation includes review of systems, history of previous medical problems, present illness, family and medical history, and growth development. The provider consults with the attending provider or hospital consultant on complex medical conditions.

The Nursing Assessment is performed by a registered nurse within 8 hours of admission and includes the patient's physical and mental health status, mental status safety risk factors, present illness and need for special precautions.

A licensed therapist performs the Psychological Assessment within 72 hours of admission on the acute unit. The assessment includes a review of present illness, past hospitalizations, psychiatric history, family dynamics, cultural needs, strengths, problems and disposition needs.

Based on the data obtained from the assessment process, the attending provider may order a Chemical Dependency Assessment.

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Based on the data obtained from the assessment process, on the acute care unit a Spiritual Assessment may be requested.

The attending provider or other provider orders the Nutritional Consult based on the data obtained from the assessment process.

The attending provider or other provider may order specialty medical evaluations as necessary. The care management team coordinates with payors and consultations to schedule the evaluation. The hospital may elect to utilize the services of the contracted Hospitalist.

## **Therapy Groups**

Patients are involved in therapeutic modalities based on clinical needs. Core components of the treatment day may include:

### Group Therapy

The group process is utilized to help reduce interpersonal and social dysfunction, improve communication, and develop relationship skills. Other goals of the group include development of group cohesion and interpersonal learning.

### Family Therapy

Implicit in the treatment philosophy is the partnering with family and support systems. The family is involved in treatment to address the pertinent issues within the family system. The goal is to strengthen and stabilize crisis and restore functioning to the family system.

### Activity Therapy

The activity program assists the individual in working on psychological and physical development through involvement in structured therapeutic activities including music, art, and recreational therapies.

### Education Services

Learning opportunities are provided to the adolescent patients in the acute care unit.

### Milieu Therapy

Provides a predictable, structures, and safe treatment setting. The focus is on reinforcing consistent structure throughout the day to assist patients in the management of their behaviors. Clinical staff act as role models and help patients through daily routines. Interpersonal skills in building and maintaining appropriate relationships with peers and authority figures are stressed. The child and adolescent acute care programs utilize a level system in order to promote a clear reflection of the patient's progress and provide specific feedback to the patient.

### Multi-Family/Education/Support Group

Facilitated by clinical staff to foster positive interactions between the youth and caretakers through structured activities.

### Daily Community Meeting

Facilitated daily by nursing staff and designed to enhance the patient's ability to function in social setting with both adults and peers. Morning and/or afternoon community meetings are utilized to establish and evaluate goals set by each patient.

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## Psychoeducation

A nurse, social worker, provider, or counselor facilitates psychoeducation. Topics include medication education, grief, humor, self-talk, and self-help.

## Medication Education Groups

A board-certified psychiatric pharmacist educates on common use and side effects of medication in group and on an individual basis.

## **Pharmacotherapy**

Can be initiated for the treatment of severe emotional disturbance or chemical abuse/addiction upon written order of the attending provider. The use of medication is judiciously individualized for each patient. Providers, registered nurses, and licensed practical nurses may administer medications. Licensed nurses may accept verbal or telephone orders from a qualified provider. The provider must countersign any such order within the timeframe specified by PRMC. The attending provider and nursing staff provide medication education to the patient and family. Informed consents are obtained for minors receiving medications.

## **Treatment Planning**

The nurse initiates the initial treatment plan upon admission. It is based on the admission assessment and includes the following:

- a) Identification of initial problems, symptomatic behavior of the problem and assessment of the cause.
- b) Goals of treatment
- c) Measurable short-term objectives based on the goals of treatment
- d) Therapeutic approaches (interventions) to be used with the patient

The interdisciplinary treatment plan is formulized within 72 hours (acute care) after admission. The treatment plan is a reflection of our philosophy of treatment and reflects the input of patients and family members (when provided) and interdisciplinary team members. It includes the following:

- a) Identification of physical, psychological, and social problems the patient is experiencing.
- b) Achievable long and short-term goals of treatment.
- c) Measurable objectives stated in behavioral terms that will reflect progress towards goal achievement.
- d) Therapeutic approaches used by each discipline to assist the patient in meeting the treatment goals.
- e) The individual or discipline accountable for assisting the patient with therapeutic approaches.
- f) Patient progress in meeting the treatment plan goals is documented in the progress notes.

## Discharge Planning Process

Consideration of discharge plans for the patient is an integral part of the treatment planning process. Discharge criteria are established during the treatment planning conference and are reviewed and revised, as necessary or as met, during treatment. Projected discharge dates and post-treatment goals are discussed as the patient moves toward achieving the criteria set for discharge. The clinical team coordinates the discharge arrangements with the patient and family. Dispositions may be considered for the patient, including a return to the home, placement in a therapeutic group or foster home, or an institutional placement; partial hospitalization; and/or continued outpatient therapy.

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## Clinical Care Evaluation: Program Evaluation and Follow-up

Clinical care evaluation of the patient is conducted by ongoing treatment review by the interdisciplinary team, by concurrent review by care management staff, and patient satisfaction monitors. The Medical Director and medical staff evaluate selected admissions based on a random selection process or based on lengths of stay criteria and documentation. Notification of appropriateness of admission, treatment, and length of stay is carried out according to approved criteria related to the patient's severity of illness and the intensity of the services provided. PRMC provides an environment that supports the participation of providers, professional nurses, and healthcare professionals to practice and participate in standing organizational committees, governing structure and institutional review process.

## **Consultative Services**

### Consultations and Referrals

The attending provider is responsible for requesting consultations when indicated. Members of the consulting staff are utilized for these services unless the services are not immediately available or additional outside expert opinions are needed.

### Diagnosis Testing

Diagnostic tests, including EEG, radiology, emergency and laboratory services are provided by contracted services.

### Dietary Services

Dietary services are available to all patients seven days a week with three meals per day during regular scheduled hours. Nutritious snacks are also available on the units. Patients are served nutritionally balanced meals in accordance with the written orders of the attending provider. Individual patient food preferences, nutritional need, ethnic and religious specifications are identified and accommodated. The dietary staff provides consultation and education for patient on special diets.

### Dental Services

On-site dental services are not available, but emergency services are arranged as the need arises.

### Emergency Services

The medical staff provides emergency psychiatric and medical services 24 hours per day.

### Medical Services

The provider or hospitalist may provide medical services in consultation with the attending provider. A laboratory work-up and other clinically-appropriate diagnostic tests will be provided as indicated from the medical history and clinical evaluation. Some may be deferred for aftercare.

### Nursing Services

Nursing care services are organized as defined in the hospital plan for nursing care. Nursing care is provided by registered nurses, licensed practical nurses, certified nursing assistants, and psychiatric technicians who are qualified by education and experience to assume the responsibilities for patient care under the supervision of a registered nurse. The primary goal of nursing services is to provide planned, comprehensive, therapeutic, safe and consistent nursing care 24 hours a day, seven days a week. Psychiatric nursing is a specialized area of professional nursing practice, which employs theories of human behavior and interpersonal relationships.

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## Psychiatric Services

Each program is directed by a board-certified or board-eligible provider who is responsible for the planning, supervision, and implementation of clinical services for patients. This provider is responsible for the equality of the total treatment delivered to patients of the program. The director works with other qualified providers that directly treat, supervise, and participate in management and/or staffing conferences and collaborates with the multidisciplinary team responsible for the patient's care.

## Social Services

Social workers assume a responsible role in the delivery of clinical social services. Clinical services are provided in cooperation with and under supervision of an active medical staff member who has ultimate responsibility for patient care.

## Pharmacy Services

Licensed pharmacist provides pharmaceutical services.

## **Professional Nursing**

### Professional Nursing Practice

Professional nursing services at PRMC are delivered under the supervision of the Chief Nursing Officer.

The nurse executive participates in the governing body, reports to the President/CEO and has the authority and accountability for all nursing or patient care delivery, financial resources and personnel in the hospital.

Nursing care at PRMC manifests a philosophy of clinical care emphasizing quality, safety, interdisciplinary collaboration, continuity of care, and professional accountability.

Nursing staff has input into policy development and operational management of issues related to clinical quality, safety and clinical outcomes, Nursing staffing patterns are maintained to provide an adequate number of qualified nurses to meet patients' needs, including the complexity of patient care.

Nursing is represented on organizational committees that govern policy and operations and budgetary decisions. Nursing staff assumes responsibility and accountability for their own nursing practice.

PRMC has a formal program of performance improvement that includes a focus on nursing practice, safety, and continuity of care and outcomes.

PRMC BH demonstrates professional development support for nurses. Professional and continuing education opportunities are available and supported. Support is provided for advanced education in nursing including Registered Nurse (RN)-to-Bachelor of Science in Nursing (BSN) completion of programs and graduate degree programs and for licensed practical nurses and non-nurse healthcare personnel to pursue RN/BSN.

Nursing care is assessed, provided, and coordinated according to programmatic and patient acuity needs by licensed nurses. Members of nursing staff include registered nurses, licensed practical nurses and non-licensed psychiatric technicians.

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Adjustments to the core staffing levels are made on the basis of more severe patient acuity. Staffing adjustments are made daily based on patient's individual needs and census.

## **Staffing Qualification and Competency**

PRMC BH actively maintains on-going process to assure that qualified and competent staff provides patient care. Each employee performs duties according to criteria-based job descriptions that reflect patient age and population-specific needs and define required qualifications and competency standards. A performance appraisal is conducted for each employee at least annually and included clinical staff's completion of competency requirements.

Credentialing for members of the medical staff and affiliate staff is provided through the medical staff credentialing and privileging process for appointment as previously noted. The Medical Staff Credentialing Plan, as part of the Medical Staff Bylaws, defines the credentialing and privileging processes.

## **Evaluation**

Patient care is monitored for effectiveness through a formal peer review process, performance improvement activities, and the patient safety program; see PRMC Patient Safety Plan. The Medical Executive Committee is responsible for the ongoing monitoring and evaluation of clinical programs and patient care. Data and analyses are presented and reviewed to determine appropriateness of care, evaluation of problems, and identified concerns as well as safety and opportunities for improvement of services and patient care.

This plan for provision of patient care is reviewed annually and revised as necessary. The following elements are taken into consideration in conducting the annual review:

1. PRMC Vision and Mission.
2. Strategic and budget planning process.
3. Data analysis and recommendations from performance improvement, risk management, patient safety committee, and utilization review
4. Evaluation of patient and community demographics.
5. Clinical needs/acuity trends and implications for staffing.
6. Staff recruitment and professional development activities.

Findings from the annual review will be reported to the Medical Executive Committee and the Governing Body.