

Program Brief

Crisis Admission Workgroup – Athens County, Ohio

Problem Statement: Ohio Health O’Bleness Hospital is the only hospital in Athens County and serves as the primary after-hours access to mental health crisis care. Over a two-year period, the number of individuals brought into the Ohio Health O’Bleness 17-bed Emergency Department for medical clearance and pre-screening for psychiatric hospitalization increased significantly, and with that increase a need to address issues of communication, coordination, protocol and safety became apparent. Ohio Health O’Bleness assembled a group of stakeholders to discuss issues and concerns associated with patients presenting to the Emergency Department for medical clearance and pre-hospitalization screening, and in 2011 the Crisis Admission Workgroup formed.

Program Overview: The Crisis Admission Workgroup meets several times a year to address issues around crisis admissions, medical clearance, documentation and communication among stakeholder partners. Members represent:

- Mental health providers/agencies
- Law Enforcement agencies
- Emergency medical services
- Appalachian Behavioral Healthcare
- Athens-Hocking-Vinton Alcohol Drug Addiction and Mental Health Services Board (317 Board)
- Substance use treatment providers
- Southeastern Ohio Regional Jail
- OhioHealth O’Bleness hospital security and Emergency Department medical staff

Members discuss information pertaining to recent patients, and ongoing concerns and questions. Often there are specific issues to address; however, the group is convened on a regular basis whether there is a specific issue to resolve or not. The group has been beneficial for resolving issues and identifying creative solutions to problems; meetings will continue if the group continues to be relevant.

Outcomes: Protocols and procedures to improve collaboration and communication around the *Ohio Revised Code 5122: Hospitalization of Mentally Ill* were developed by the creation of a “blue slip” (application for emergency pre-screen, attached), which allows Law Enforcement to be compliant with the mandates of ORC 5122 without generating multiple pink slips for the same person. Even though Law Enforcement is authorized by law to generate a pink slip, the preference in this area of the state is for pre-screeners to do so. In addition, agreements regarding transportation and back-up safety needs have been addressed. For example, Hospital Protective Services officers transport patients to Athens Behavioral Health when their rapport with the patient allows. These transports can be less traumatic for the patients because they often have spent time with the transporting officers. Athens Police Department donated a cruiser for these transports; therefore, their time commitment for transports have significantly decreased. Local Law Enforcement agencies will provide support when needed. The workgroup is a means for continuous quality improvement by providing a regular channel for addressing roles, responsibilities and recent events.

To learn more about the Crisis Admission Workgroup, please contact:
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Athens County Blue Slip

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APPLICATION FOR EMERGENCY PRE-SCREEN in accordance with R.C. 5122.10		
Date and Time:		<input type="text"/>
To the Head of	<input type="text" value="O'Bleness Memorial Hospital"/>	
	(Facility Name)	
The undersigned has reason to believe that	<input type="text"/>	is a mentally ill
	(Name of person to be examined)	
person subject to hospitalization by court order under division (B) of R.C. 5122.01, and that this person represents a substantial risk of physical harm to him/herself or others if allowed to remain at liberty pending examination. This belief is based on the undersigned's determination that this person (check all that apply):		
<input type="checkbox"/>	(1) represents a substantial risk of physical harm to him/herself as manifested by evidence of threats of, or attempts at, suicide or serious self-inflicted harm.	
<input type="checkbox"/>	(2) represents a substantial risk of physical harm to others as manifested by evidence of recent homicidal or other violent behavior, evidence of recent threats that place another in reasonable fear of violent behavior and serious physical harm, or other evidence of present dangerousness.	
<input type="checkbox"/>	(3) represents a substantial and immediate risk of serious physical impairment or injury to him/herself as manifested by evidence that s/he is unable to provide for and is not providing for his/her basic physical needs because of his/her mental illness and that appropriate provision for such needs cannot be made immediately available in the community.	
<input type="checkbox"/>	(4) would benefit from treatment in a hospital for his/her mental illness and is in need of such treatment as manifested by evidence of behavior that creates a grave and imminent risk to substantial rights of others or him/herself.	
Therefore, it is requested that said person be admitted to your facility for examination pursuant to R.C. 5122.10.		
Is this person also under arrest for accompanying criminal charge(s)?		<input type="checkbox"/> YES <input type="checkbox"/> NO
STATEMENT OF BELIEF		
Must be completed by one of the following: a psychiatrist, licensed clinical psychologist, licensed physician, health officer, parole officer, police officer, sheriff or deputy sheriff, chief of adult probation, or adult probation officer with the approval of the chief for probation. Statement must include the circumstances under which the person was taken into custody and the reason for the undersigned's belief that hospitalization is necessary. The statement must also include a reference to efforts made to secure the person's property at his/her residence if s/he was taken into custody there. Every reasonable and appropriate effort should be made to take this person into custody in the least conspicuous manner possible.		
<input type="text"/>		
Signature	<input type="text" value="Deputy Sheriff"/>	<input type="text"/>
	Title/Position/Badge or License Number	Place of Employment
		<input type="text" value="Athens County Sheriff's Office"/>

Disposition: Email original to securityofficers@oblness.org, follow up with a call to 740.593.5551, and retain copy with case file

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