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North Sound Behavioral Health Administrative Services Organization, LLC

Section 1700 – Integrated Crisis Response Services (ICRS): ICRS Outreach Safety Screening for Dispatching for Behavioral Health Crisis

Authorizing Source: North Sound BH-ASO and ICRS Management, RCW 71.05.700 and 71.05.715, WAC 246-341-0900 -905, -910, -0915, -0920 and -0810, DCR protocols, WAC 246-341-0510, 0515

Approved by: Executive Director Date: 9/14/2021 Signature:

POLICY # 1702.00

SUBJECT: ICRS OUTREACH SAFETY SCREENING FOR DISPATCHING FOR BEHAVIORAL HEALTH CRISIS SERVICES

PURPOSE

To ensure a standardized safety screening is conducted by Integrated Crisis Response System (ICRS) providers in the delivery of crisis services in the North Sound Region.

POLICY

Mobile Crisis Outreach providers will follow and maintain safety protocols as described in Revised Code of Washington (RCW) 71.05, Washington Administrative Code (WAC) 246-341-0910, Health Care Authority (HCA) Designated Crisis Response (DCR) Protocols and have participated in safety and violence prevention training described in RCW 49.19.030 and 71.05.705.

North Sound Behavioral Health Administrative Services Organization's (North Sound BH-ASO) Delegate has the responsibility of determining the need for a face-to-face outreach and dispatch of crisis outreach staff to a community location. Crisis outreach staff may not decline a referral for outreach from North Sound BH-ASO's delegate but shall decide if further investigation, crisis behavioral health services or other community services are appropriate.

Once a referral for crisis outreach has been made by North Sound BH-ASO's delegate, crisis outreach will continue information/fact gathering and provide ongoing coordination with the referent or other collateral contacts.

Crisis outreach providers who operate co-response programs and conduct an initial screening for response, are required to follow agency safety protocols, conduct a safety screening for risk and check on any available history as required in WAC 246-341, RCW 71.05 and 71.34.

PROCEDURES – Safety Screening

North Sound BH-ASO's Delegate and crisis outreach staff will conduct a safety screening prior to conducting an outreach at any community or unstaffed location.

1. If the individual is an immediate risk to self or others and unable to maintain safety for up to two (2) hours, 911 must be called to initiate law enforcement response.
2. If the individual is an immediate risk to self or others and unable to maintain safety for up to two (2) hours and Law enforcement does not respond when requested, crisis outreach staff are not required to conduct a face-to-face outreach at an unstaffed or private location if safety needs cannot be ensured under 71.05.700.

3. If the risk is elevated, but not immediate, a more thorough risk assessment must be completed. Crisis outreach staff are not required to conduct a face-to-face outreach at an unstaffed or private location if safety needs cannot be ensured under 71.05.700.
4. For unstaffed community referrals in which safety cannot be ensure under 71.05.700, Crisis outreach staff shall consider other outreach options, attempt to arrange to see the individual at a staffed location, implement telehealth technologies if avaiable to make contact with the individual or continue to follow up with the referrents and/or law enforcement to support the individual in crisis.
5. Depending on the clinical assessment, degree of risk and the individual's needs, the individual may be referred to the appropriate services, which could include 911 follow up, hospital emergency department, Crisis Stabilization or Traige faciltiy, crisis appointment, or other community services as appropriate.
6. If the individual is able to maintain safety, per assessment of risk, a crisis outreach may be considered.
7. Crisis outreach staff must determine (based upon evaluated risk) how and where to see the individual.
8. Ongoing safety screening by crisis outreach staff shall continue to occur during the crisis outreach.
9. Crisis outreach staff who have received areferral for dispatch will contact North Sound BH-ASO's Delegate regarding changes in dispatch due to elevated risk concerns.

Ongoing Risk Assessment

Upon outreach to an unstaffed location, crisis outreach staff will continue to perform an ongoing risk assessment. Crisis outreach staff must assess risk factors, which can include:

1. Location;
2. Access to weapons;
3. History (i.e., watch);
4. Volitility;
5. Consistency of known information;
6. Ability to summon assistance if needed (i.e., cell phone coverage);
7. Time of dispatch;
8. Gender;
9. Age;
10. Presence of others at the location;
11. History of crisis contacts;
12. Presence of animals; and/or
13. Presence of drugs and/or alcohol.

Options to consider to increase safety to conduct an outreach include:

1. Arranging for family members or significant others to be present;
2. Moving the location of the outreach to a safer community setting; and/or
3. Conducting the outreach with a second individual to inlcude a law enforcement officer, a mental health professional, a mental health paraprofessional who has received training under RCW 71.05.715, or other first responder, such as fire or ambulance personnel.

Substance Use Indicated

1. If the individual's judgment is significantly impaired and they are at risk to themselves or others and are unable to maintain safety, 911 must be called to initiate law enforcement response.
2. When alcohol or drugs are present, crisis outreach staff may provide outreach services, after completing a safety screening assessment, but must consider the risk factors noted above.

3. If the outreach is not appropriate, arrangements will be attempted for the individual in crisis to go to a staffed location, the hospital emergency department, or Crisis Stabilization or Triage facility.

Private Locations

1. No crisis outreach staff shall be required to respond alone to a private home or other private location to stabilize or treat an individual in crisis, or to evaluate an individual for potential detention under the state's involuntary treatment act.
2. When determined to be necessary for safety, clinical staff who provide outreach to individuals shall engage the use of a second person to accompany them. .
3. Crisis outreach staff will be provided with wireless phones for the purpose of emergency communications described in RCW 71.05.710 and participate in annual safety training.
4. Crisis outreach staff will have a written plan for training, staff back-up, information sharing and communication for a staff member who responds to a crisis in a private home or a non-public setting

Mobile Crisis Outreach staff will have a written plan for training, staff back-up, information sharing and communication for a staff member who responds to a crisis in a private home or a non-public setting.

No retaliation may be taken against crisis outreach staff who, following consultation with the clinical team supervisor, on call supervisor, or individual professional acting alone based on a risk assessment of potential violence, refuses to go to an unstaffed location or home visit without an appropriate second trained individual available to accompany them.

ATTACHMENTS

1702.01 ICRS Outreach Safety Screening for Dispatch Screening Form