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## **North Sound Behavioral Health Administrative Services Organization, LLC**

Section 1700 – Clinical: Single Bed Certification (SBC)/Inpatient Resource Availability

Authorizing Source: WAC 388-877-0810, RCW 71.05, 71.34, DCR protocols

Approved by: Executive Director      Date:                      Signature:

### **POLICY # 1728.00**

### **SUBJECT: SINGLE BED CERTIFICATION (SBC)/INPATIENT RESOURCE AVAILABILITY**

#### **PURPOSE**

The availability of a certified Evaluation and Treatment (E&T) bed or secure detox facility bed will not be a factor in determining whether or not to conduct an involuntary investigation for mental health or substance use disorders (SUD). Nor shall it influence the determination if an individual meets detention criterion.

The purpose of this policy is to outline the process for requesting an SBC from Western State Hospital (WSH) delegate for Health Care Authority (HCA) when there is a need for an individual to be detained to a facility not certified under Washington Administrative Codes (WAC) 388-865-0500 to provide **involuntary** mental health treatment to an adult.

The SBC request is also used when there is a need for a community facility to provide treatment to an adult on a 90- or 180-day inpatient involuntary commitment order for a maximum of 30 days; or to a facility not certified under WAC 388-865-0500 to treat an involuntarily detained or committed child until the child's discharge from that setting to the community or until he or she transfers to a Children's Long-Term Inpatient Program (CLIP).

An SBC will not be available for individuals detained due to SUD until July 1, 2026.

The purpose is also to define and provide direction to Designated Crisis Responder (DCR) staff in our region when they are unable to find an appropriate placement in a certified E&T facility.

#### **DEFINITIONS**

**Single bed certification (SBC)** refers to the process for requesting an exception to be granted to allow a facility that is willing and able, but is not certified, under WAC 388-865-0500 to provide timely and appropriate, involuntary inpatient mental health treatment to an adult on a 72-hour detention or 14-day commitment, or for a maximum of 30 days to allow a community facility to provide treatment to an adult on a 90- or 180-day inpatient involuntary commitment order (RCW 71.05.745, WAC 388-865-0526).

For involuntarily detained or committed children, this exception may be granted to allow timely and appropriate treatment in a facility not certified, until the child's discharge from that setting to the community or until they transfer to a bed in a CLIP facility (WAC 388-865-0526).

**Attestation** means the facility confirmed it is willing and able to provide adequate treatment services and will provisionally accept placement upon receipt of the approved SBC.

**No-Bed Report (also Unavailable Detention Facilities Report)** refers to when a DCR determines a person meets criteria for involuntary inpatient treatment but is unable to detain the person at risk due to the lack of an available bed at an E&T facility or the person cannot be served by using an SBC. The DCR is required to make a report to the Department within 24 hours.

**Substance Use Disorder (SUD)** means a problematic pattern of use of alcohol and/or drugs that causes a clinically and functionally significant impairment, such as health problems, disability and failure to meet major responsibilities at work, school or home.

**Mental disorder** is any organic, mental, or emotional impairment, which has substantial adverse effects on an individual's cognitive or volitional functions (RCW 71.05.020).

## **POLICY**

SBCs must meet all requirements as outlined in this policy. The facility that is the site of the proposed SBC confirms it is willing and able to provide directly or by direct arrangement with other public or private agencies, timely and appropriate mental health treatment and the request describes why the individual meets at least one (1) of the following criteria:

1. The individual is expected to be ready for discharge from inpatient services within the next 30 days and being at a community facility would facilitate continuity of care, consistent with the individual's treatment needs.
2. The individual can receive appropriate mental health treatment in a residential treatment facility, as defined in WAC 246-337-005.
3. The Residential Treatment Facility (RTF) is a certified E&T (if RTF is not a certified E&T, the SBC will need an attachment documenting how the RTF will meet the person's E&T needs per WAC & RCW).
4. The individual can receive appropriate mental health treatment at a:
  - a. Hospital with a psychiatric unit;
  - b. Hospital that can provide timely and appropriate mental health treatment; or
  - c. Psychiatric hospital.
5. The individual requires medical services that are not generally available at a facility certified under WAC 388-865-0526.
6. The individual is awaiting transportation to an identified bed at a certified E&T and the Emergency Room is willing and able to provide mental health treatment in the interim.

## **PROCEDURE**

1. When conducting an Involuntary Treatment Act (ITA) investigation in circumstances which result in a Single Bed Cert, the DCR and Volunteers of America (VOA) will proceed as follows:
  - a. DCR determines whether or not the person meets detention criteria following all applicable Washington State laws for the ITA or Less Restrictive Alternative (LRA) process.
  - b. When the DCR determines the individual meets emergent detention criteria, but has exhausted the list of beds provided by the VOA Triage Clinician at the time of the initial dispatch, the DCR will call the VOA Triage line at 800-747-8654 to report the case resulted in a SBC and hand the case off to VOA for bed placement follow-up.
  - c. The VOA Triage Clinician or Placement Coordinator will call the attesting hospital to alert them when a bed becomes available on a daily basis.

2. If there is no E&T bed located and the DCR makes a determination the individual's treatment needs can be met via attestation with an SBC (defined above), the DCR will complete the detention.
  - a. The DCR will complete and fax the SBC form to WSH.
  - b. The DCR/DCR offices will ensure the attesting facility has a copy of the approved SBC.
  - c. The DCR will call in the disposition in to the VOA Triage line and speak directly to the Placement coordinator.
3. If an E&T bed has not been located and the hospital cannot attest to being able to meet the individual's treatment needs, the DCR will notify the hospital of the inability to detain. The patient is now referred back to the hospital's care. The DCR is expected to do the following:
  - a. Document the individual has met detention criteria (RCW 71.05.150, 71.05.153, 71.34.700, or 71.34.710), but there are not any appropriate beds available and will leave documentation to that effect. The DCR will also leave "the hospital call list" which includes the number for the VOA Placement Coordinator for further follow up and possible placement.
  - b. Fax the completed "DCR report of a Person Meeting Detention Criteria and no available E&T beds or LRAs" (DCR no bed report) to HCA at 360-725-3480 or send via **secure encrypted** email to [BHSIABedRpt@dshs.wa.gov](mailto:BHSIABedRpt@dshs.wa.gov) , with the fields completed within 24 hours of the determination the individual has met detention criteria.
  - c. Shall then re-contact the VOA Placement Coordinator (or triage clinician), in person, with the disposition. VOA will need name, location, date and time the investigation was completed, what facilities were contacted, what the hospital has advised they are going to do with the patient. The DCR/DCR offices shall also send copy of the DCR report to North Sound BH-ASO, via fax by the next business day.
4. VOA will, the next business day, re-contact the Emergency Department (ED)/hospital, through the Placement Coordinator, to check on the individual's status.
  - a. VOA will continue to coordinate daily with the ED/hospitals and DCR office on re-evaluation if the individual continues to meet criteria for detention.
  - b. The DCR office will attempt, regardless of location, to re-evaluate the individual on a daily basis to determine if the individual continues to meet criteria for detention.
  - c. When LRAs to detention are viable, the DCR will ensure the appropriate less restrictive occurs.
5. HCA will be sharing the (DCR no bed) report with North Sound BH-ASO to monitor those cases closely.
6. North Sound BH-ASO will continue to attempt to engage the individual for appropriate services for which the person is eligible and report back those attempts to HCA within seven (7) days.
7. North Sound BH-ASO will provide an annual clinical audit/review to ensure adherence to sourced WAC and relevant RCW standards utilizing current related audit/review tools.

## **ATTACHMENTS**

None