

ST. CLAIR COUNTY COMMUNITY MENTAL HEALTH AUTHORITY

ADMINISTRATIVE PROCEDURE

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I. APPLICATION:

- SCCCMHA Board
- SCCCMHA Providers & Subcontractors
- Direct-Operated Programs
- Community Agency Contractors
- Residential Programs
- Specialized Foster Care

II. PURPOSE STATEMENT:

St. Clair County Community Mental Health Authority (SCCCMHA) shall provide psychiatric services for individuals of Community Mental Health or contractual agencies whose condition warrants assessment or treatment by a psychiatrist for mental illness or developmental disability. Psychiatric Services may be offered through SCCCMHA direct operated programs, through SCCCMHA contractual agencies, or through community referrals for those individuals with outside funding sources.

III. DEFINITIONS:

- A. Psychiatric Evaluation: A comprehensive evaluation, performed face-to-face by a psychiatrist or Psychiatric-Mental Health Nurse Practitioner-Board Certified (PMHNP-BC) that investigates an individual's clinical status including the presenting problem, the history of the present illness, previous psychiatric, physical and medication history, relevant personal and family history, personal strengths and assets, and a mental status examination. This examination concludes with a written summary of positive findings, a bio-psychosocial formulation and diagnostic statement, an estimate of risk factors, and initial treatment recommendations.
- B. Medication Review: Medication Review involves evaluating and monitoring medications, their effects, and the need for continuing or changing the medication regime.

IV. STANDARDS:

- A. SCCCMHA may offer Telepsychiatric services to individuals we service. The individual or their parent/guardian must sign form [#0134 Informed Consent to Participate in Behavioral Telepsychiatry Services](#). (See [Administrative Procedure #03-001-0105, Telepsychiatry](#).)

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- B. An individual who does not show (no shows) or cancels within 24 hours of their psychiatric evaluations will be re-scheduled 90 days out for their next psychiatric appointment ([Program Directive 12.0](#)).

V. PROCEDURES:

A. Initial Psychiatric Evaluation and Medication Review

Primary Caseholder/Hospital Liaison/ CIU Staff

1. Requests an appointment.

Medical Scheduler Clerical Staff

2. Schedules appointment.
3. Provides schedule to psychiatrist.

Primary Caseholder

4. Complete a Patient Status update initially and for all subsequent reviews. The form can be found in OASIS under the Health Service section. Ensures that an authorization for the Psychiatric Evaluation or Medication Review is in EHR (electronic health record). Using our current system, an automated call is made 48 hours prior to the appointment to remind the individual of their scheduled appointment.

Psychiatrist/Nurse Practitioner

5. Enters Psychiatric Evaluation or Medication Review information in EHR or dictates information for transcription for placement into EHR.
6. Makes treatment recommendations including medication recommendations.
7. Enters prescription into EHR.
8. Documents if a prescription is faxed, E-scribed, printed or phoned in and selects pharmacy name and phone number information from the list in the EHR, submits information for processing.
9. Completes Consent for the Use of Medication, which is the electronically generated informed consent form. See [Administrative Procedure #05-002-0010, Psychotropic Medications & Informed Consent](#) and [Administrative Procedure #04-001-0050, Medication Management](#).

Psychiatrist or Nurse Practitioner

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10. Gives individual slip with next appointment timeframe to give to medical scheduler clerical staff.

B. Follow-up Appointment

Medical Scheduler Clerical Staff

1. Schedules appointment.
2. Provides schedule to psychiatrist/nurse practitioner.
3. Documents individual’s cancellation or no show in EHR on individual’s calendar.

C. Follows protocol outlined below for Prescriber’s no shows

Primary Caseholder or Designee

1. Contacts the individual or group home supervisor or designee/AFC home supervisor or designee to follow up on the missed appointment within 48 hours of receiving the list of no shows.
2. Documents in a contact/progress note all contacts with the individual regarding a no show, prescription needs, medication review, etc.
3. Provides outreach to the individual (in addition to the automatic call back system) prior to next medication review regarding their appointment and problem solve any potential barriers for getting in for their appointment.
4. Reviews next appointment as needed.
5. Discusses approval of rescheduling the missed appointment with the prescriber when there have been two or more “no shows” or rescheduled appointments.

Medical Scheduler Clerical Staff

6. Reschedule appointments. Documentation in Oasis on contact note must be completed.

D. Verbal and Telephone Laboratory/ Medication Orders

Registered Nurse

1. Enters any verbal order given by a psychiatrist for labs and medications into the EHR.

Psychiatrist

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2. Reviews copy of the printed or electronic lab results. Enters electronic signature for medication verbal orders in EHR.

VI. REFERENCES:

- A. [#0134 Informed Consent to Participate in Behavioral Health Telepsychiatry Services](#)

VII. EXHIBITS:

None available.

VIII. REVISION HISTORY:

Dates issued 10/81, 10/84, 12/89, 02/90, 06/91, 08/92, 02/94, 07/97, 06/99, 08/99, 09/01, 09/03, 08/05, 08/07, 08/09, 05/12, 05/13, 05/14, 05/15, 05/16, 05/17, 05/18, 05/19, 09/20, 09/22.