

PROGRAM OPERATIONS DIRECTIVE

47.0

SUBJECT: Hospital Discharge/ Psychiatric Evaluations//Med Reviews/Refills

ISSUED: 11/15/2022

PURPOSE:

To clarify the process for psychiatric evaluations and prescription writing post hospital discharge.

POPULATION:

All

PROCESS:

All hospital discharges will be scheduled with a CMH prescriber within 14 days of discharge.

If a person no -shows for their hospital discharge appointment:

1. To obtain a refill they must come in to meet with a nurse to complete informed consents for medications.
2. The nurse will then put in for a two-week refill, with the blurb to inform the prescriber that the person did follow through with their meeting with the nurse.
3. The person will then receive two weeks worth of medication and be put on a cancellation list to get in for a psychiatric evaluation.

****Medication refills will not be written more than one time and will not be written without a meeting with a nurse.****

If a person is on a court order for treatment:

The assigned case holder should immediately notify the court, and make record of court notification, if an individual no shows for the psychiatric evaluation (or any other appointment with their CMH team).

If a person chooses to not attend appointments with their case holder / clinician:

Our current procedure for people served who chose not to attend appointments with the case holder/clinician, is to cancel appointments with the prescribers. This procedure will continue, however medication refills will not be written without the person being seen. Individuals should be educated by treatment team members that refills will not be written if they do not keep appointments. Individuals will need to either keep their prescriber appointments or request refills from their primary care physician (who may or may not prescribe the medication). The person can be re-scheduled and/or be put on a cancellation list for a medication review once they resume appointments with the case holder/clinician.

**** Clinical judgement should be utilized regarding canceling an individual's appointment with a prescriber. Ideally, the case holder should make every effort to engage the individual on the day of their scheduled psychiatric appointment- meet them at the door- meet them before the session due to the difficulty in getting re-scheduled in a timely fashion due to the scheduling demands. If it is habitual, or a fluke should be taken into account.****

This is a culture change and all treatment team members will need to be involved in educating individual's served on these changes.

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