



COUNTY OF SAN BERNARDINO
STANDARD PRACTICE

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BY Ralph Ortiz, MFCC

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DEPARTMENT

BEHAVIORAL HEALTH

SUBJECT

PROCEDURE FOR
UNSCHEDULED APPOINTMENTS

APPROVED

Dick Dwyer

Dick Dwyer, Interim Director

I PURPOSE

To outline how each DBH Clinic will provide services to clients who are unscheduled and who have an immediate need.

II POLICY

All DBH programs shall have a plan in place to provide outpatient services for individuals who present themselves for services and are in need of immediate services and are unscheduled.

III PROCEDURE

Each program shall utilize the following structure in planning for the provision of unscheduled services.

1. Clinic

First Level Intervention:

Clerical and Clinical staff who initially intervene with an individual are to elicit needed information from the individual as to why they are presenting themselves to the clinic. The clinic clerk will run a MHS 140 to determine if the individual is open in the DBH system and if so where (in order to coordinate follow-up care).

Second Level Intervention:

This is an intervention by clinical staff where the individual will be evaluated using the following criteria:

- Dangerousness (to self or others) and grave disability
- Medication needs (including the length of time that the individual has been without medications) in consultation with the Clinic Psychiatrist if available.
- Homelessness
- Substance Abuse
- Emotional/Mental status
- Living situation/support systems

Following the evaluation the clinician will determine which of the following services the individual will need to resolve the presenting problem:

- Individual session to stabilize the individual and arrangement for follow up care.
- Referral to DBH or community resource (e.g. Homeless program, Salvation Army, DPSS, etc.)
- Referred to Clinic Psychiatrist for medication evaluation.
- Placement of individual on a 5150.
- No immediate service needed but a follow-up later appointment to be made.

Third Level Intervention:

The Clinic Supervisor will be consulted when there may be a need for a 5150, one has been written, there is unavailable psychiatrist time in that particular region, or any other circumstance that requires supervisory level intervention (e.g, a referral is refused by an agency).

2. Program Level

If it is determined that a psychiatric intervention is necessary and a psychiatrist is not available at the clinic, the Clinic Supervisor will contact other clinics in the region/program, to determine if there is psychiatric time available. If there is no psychiatrist time available within the program, the clinic supervisor will contact clinic supervisors in other programs to inquire as to the availability of psychiatric time. If there is a lead psychiatrist assigned to the region he/she will be consulted about the need for emergency medication services.