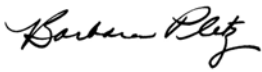




SMART PROGRAM PEDIATRIC PSYCHIATRIC ASSESSMENT AND DISPOSITION

APPROVED: 

EMS Medical Director



EMS Administrator

Guidelines and Information Needed

- Identify law enforcement officer in charge of the scene and make contact.
 - Obtain information regarding the client's behavior and events precipitating the call.
 - Identify who contacted 911 and the circumstances leading up to the call.
- Observe surroundings for syringes, blood glucose monitoring supplies, insulin, or other medical supplies.
- Complete and document medical and mental health assessment on the SMART Prehospital Assessment Record (PAR).
- Evaluate for changes in mental status: baseline status, onset and progression of altered state, preceding symptoms such as headache, seizures, confusion, trauma, etc.
 - Note: onset and progression of symptoms is critical in differentiating between dementia and delirium
- Evaluate the environmental surroundings relative to food, clothing and shelter.
 - Note if the patient is unable or unwilling to utilize these resources if they are present.
- Identify if a parent, guardian, or individual with consent authority is present on scene.
 - Determine whether any other individuals on scene have made an attempt to contact the parent or guardian regarding the current event
- Observe for any evidence of abuse or neglect
- Be aware of interaction with parents or caregivers

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Review Date: December 2006

Treatment / Disposition

Medical Emergencies

- If the paramedic assessment is abnormal the patient may be transported to an appropriate ED in accordance with existing patient care protocols. Consent may be granted by the parent or guardian or may be implied.
- If the patient is determined to be gravely disabled, or a danger to themselves or others, a 5585 hold may be placed by the paramedic or the peace officer and the patient will be transported to the appropriate medical ED.

Psychiatric Emergencies

- If based on the mental health exam it is determined that there is a possible psychiatric emergency, the patient's parent or designated decision maker may consent for the patient to be transported voluntarily to a psychiatric emergency department in the SMART vehicle.
- If the patient is in need of emergency psychiatric care and is not willing to be transported voluntarily to a psychiatric emergency department, disposition will be based on the mental health assessment.
- If the patient is determined to be gravely disabled, or a danger to themselves or others, a 5585 hold will be placed by the paramedic or the peace officer and the patient will be transported to the appropriate psychiatric ED
- The patient will be transported to the most appropriate facility if possible. The appropriate facility is defined as:
 - The facility when the patient is usually cared for and therefore has access to the medical record or
 - The facility of choice as designated by the patient or the parent guardian or designated decision maker, or
 - The psychiatric emergency facility that is closest to the point of contact.

Consultation

- The San Mateo Medical Center (SMMC) Psychiatric Emergency Services (PES) attending psychiatrist will be contacted for psychiatric consultation if the paramedic is unsure if the patient meets the criteria for a 5585 hold.
- The SMART Clinician or the PES attending psychiatrist may be contacted if the patient has significant behavioral or social issues, does not meet the criteria for a 5585 hold and will not accept voluntary transportation.
- If there is a concern for the safety of a minor patient or if there is any suspicion of abuse or neglect, Child Protective Services (CPS) should be contacted at (650) 595-7922.
 - A written and verbal report should be filed with CPS

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Consent Considerations

- If the patient is encountered at a camp, day care, school, clinic or similar setting, consent may be authorized by a form signed by the parent or guardian.
- A copy of the document should be transported with the patient if possible.
- If no parent, guardian or adult with signed parental consent is available, the paramedic will perform a mental health assessment and document the findings on the Prehospital Assessment Record to determine if the patient may be placed on a 5585.
- If it is determined a 5585 is not appropriate, every effort will be made to contact a parent or legal guardian. If no parent or legal guardian is available, the paramedic will evaluate the safety of the environment
 - If the child is not in a safe environment or if there is any suspicion of neglect or abuse Child Protective Services will be contacted at (650) 595-7922.
- The following patients may consent or deny care as if they were an adult:
 - At least 18 years of age or older
 - A minor (under age 18) that is lawfully married, divorced, or had an annulment
 - A minor on active duty with the armed forces
 - A minor who seeks prevention or treatment of pregnancy
 - A minor 12 years of age or older, seeking treatment related to a contagious or communicable disease or sexually transmitted disease
 - A minor who is the victim of a sexual assault (of any age or either sex).
 - A self-sufficient minor at least 15 years of age, living apart from parents and managing own financial affairs regardless of source or lack of source of income and regardless of parental consent or lack of consent to the separation
 - A legally emancipated minor with documentation provided by a court of law
 - If the patient is eligible to consent or deny treatment for psychiatric care, the paramedic will follow the adult criteria
- If the SMART paramedic or PES physician determines that there is no apparent emergency situation and the patient is in the care of a competent guardian designated by the parents or the courts, the patient will be left on scene and the guardian or designated care taker will sign the SMART Program Non-Transport form.
- If there the Paramedic has determined that there is no medical or psychiatric emergency, the patient may be left in the care of a responsible adult such as an police officer, adult relative or social worker. The name, badge number or relationship of the responsible adult will be documented in the PAR

Referral

Immediate:

- If the patient needs immediate intervention and does not meet criteria for mental health or medical transportation, the SMART Clinician will be contacted by pager or phone during business hours.
- If the SMART Clinician is unavailable, the Mental Health Support team may be contacted.
- Child protective services should be contacted if there is concern about the safety of the minor or if there is concern of abuse or neglect

Urgent (next business day):

- If the need for referral is urgent or routine, the Prehospital Assessment Record (PAR) will be faxed or e-mailed to the SMART Clinician. A voice contact should also be considered.
- All advice provided to the parent or designated medical decision maker should be noted on the PAR

Routine:

- If the patient needs a routine referral, based on the paramedic's assessment, consultation with the PES physician or consultation with the SMART Clinician, referral information will be provided to the patient and/or designated decision maker.
- Referral will be made to the appropriate community resource and written materials will be left with the parent, guardian or patient.

Documentation

- A Prehospital Assessment Record (PAR), which includes elements of the medical and psychiatric assessment of the patient, will be completed for all patients.
- If the patient is turned over to an ambulance for medical transportation the transporting paramedic will complete a patient care record (PCR). The SMART paramedic will complete the prehospital assessment record (PAR).
- If a 5585 form has been generated, it will be transported to the hospital with the patient.
- Copies of all forms and documentation completed by the SMART paramedic including the PAR, 5585 forms, abuse reports, will be forwarded to the SMART Clinician by the end of the SMART paramedic's shift.

Precautions and Comments

- Make every attempt to contact the parent or guardian early in the call. Determine if the law enforcement officer, or any other individual on scene has made a call to the parent or guardian.
- If the patient has been encountered in a special education situation, consider that the teachers and security staff have made a determination that they are not able to control the patient prior to the 911 call. Their

assessment of the situation should be strongly considered in the disposition decision.

- The history of the event should be documented on the PAR and/or 5585 form.
- Every attempt should be made to transport a family member, teacher, counselor or other appropriate adult with the child in the SMART vehicle
- Family members should be provided with the opportunity to complete a “San Mateo County Mental Health Information Provided by Family Member” form in compliance with Section 5008.2 of the Welfare and Institutions Code.