SUMMARY & PURPOSE: To delineate a response to respond to a psychiatric emergency. Any “individual,” (patient, visitor, or employee) experiencing a psychiatric emergency may receive treatment with or without their consent as governed by applicable Florida Law. The purpose of this policy is to provide healthcare professionals and staff at the HWCOM clinical locations with a framework for providing the necessary interventions in the management of patients with suicidal behaviors and/or risks in compliance with the Florida Mental Health Act (Baker Act) statute: 394.45 1.394.4789, which governs voluntary and involuntary mental health treatment.

SCOPE/APPLICABILITY: This policy applies to the HWCOM Clinical Locations: FIU Health Modesto Maidique, Green Family Foundation NeighborhoodHELP Mobile Health Centers and Household visits and the Linda Fenner 3D Mobile Mammography Center where HWCOM staff members (faculty, student and/or staff) provide care to patients. HWCOM faculty and/or staff members working in affiliated clinical locations shall abide by the policies and procedures addressing psychiatric emergencies and involuntary examinations in that location and as defined by the Florida Mental Health Act statute.

POLICY: HWCOM understands that during providing routine patient care, psychiatric emergencies may arise. The organization strives to provide services to individuals experiencing psychiatric emergencies, therefore each HWCOM clinical location will have an emergency response plan as outlined in the procedure section of this policy. Each HWCOM clinical location will have in their care, custody or control, the necessary documentation for certifying an individual for an involuntary examination. HWCOM healthcare professionals with the authority to execute a Certificate of Professional Initiating Involuntary Examination (Baker Act) have knowledge of the Florida Mental Health and Crisis Intervention statutes.

DEFINITIONS:
HWCOM Clinical Locations:
For the purposes of this policy, HWCOM clinical locations refers to FIU Health Modesto Maidique ("MMC"), Green Family Foundation NeighborhoodHELP Mobile Health Centers and Household visits and the Linda Fenner 3D Mobile Mammography Center. In addition, HWCOM faculty/staff members can work in an affiliated clinical facility throughout Miami-Dade and Broward County.

Elopement:
Defined as: "A patient that is aware that he/she is not permitted to leave but does so with intent." An eloped patient may be at risk for serious harm. When a Baker Act patient leaves a facility without authorization and without staff awareness, this is considered an elopement. Close 1:1 supervision is required by staff for patients that are identified as an elopement risk.

Individual:
For the purposes of this policy, an individual refers to a patient, visitor, or employee.

HWCOM Staff member:
Refers to HWCOM faculty member, student and/or staff.

Healthcare Professional:
An HWCOM Faculty or staff member with the authority to execute a Certificate of Professional Initiating Involuntary Examination, Baker Act (as defined in s.394.455, F.S. are physicians, clinical psychologists, psychiatric nurses, licensed mental health counselors, licensed marriage and family therapists or licensed clinical social workers).

Psychiatric Emergency:
Any situation that includes severe changes in an individual’s behavior, mood, social interactions, or thoughts, which if left unchecked, can pose serious threats of physical, emotional, or social harm to the individual or to others. This may be an emotional or behavioral disorder and may include suicidal thoughts and/or an attempted suicide.

Emergency Medical Systems: 911
(“EMS”) (Ambulance or Fire Rescue). The Miami-Dade Fire Rescue Department (“MDFRD”) provides emergency medical services to Miami-Dade County, and Broward Sheriff’s office ("BSO") provides emergency services to Broward County.

SAFETY Precautions during a Psychiatric Emergency:
Are intended to prevent injuries to others or the individual involved. HWCOM staff members initiate these precautions during a voluntary or involuntary psychiatric emergency. These precautions may include but are not limited to: 1:1 supervision at all times even during bathroom privileges, keep patient door open, remove potential harmful objects in the patient location; examples: plastic bags, electrical cords, sharp equipment, or any other equipment that the patient can utilize for self-harm.

Voluntary Examination:
A healthcare professional may initiate a voluntary examination when he/she utilizes his/her clinical judgment in determining that an individual needs inpatient evaluation and/or treatment due to a psychiatric emergency that cannot be treated safely in an outpatient setting and the individual agrees to be voluntarily evaluated at a receiving psychiatric facility for possible admission and is capable of making such a decision and gives informed consent.

**Telehealth Audio-Visual session:**
Telehealth — sometimes called telemedicine — lets your doctor provide care for you without an in-person office visit. Telehealth audio-visual session is done primarily online with internet access on your computer, tablet, or smartphone. This interaction allows two-way communication between provider and patient where they can see and hear and interact with each other during an office visit. This is used as an alternative to in-person visit.

**Involuntary Examination (Baker Act):**
According to the Florida Mental Health Act, s. 394.463 F.S. An individual may be taken to a designated Baker Act receiving facility for an involuntary examination if there is reason to believe that the person has a mental illness and because of his or her mental illness:

A. The individual has refused voluntary examination after conscientious explanation and disclosure of the purpose of the examination; or

B. The person is unable to determine for himself or herself whether examination is necessary.

AND

A. Without care or treatment, the individual is likely to suffer from neglect or refuse to care for himself or herself; such neglect or refusal poses a risk and can present threat of substantial harm to his or her well-being; and it is not apparent that such harm may be avoided through the help of willing family members or friends or the provision of other services, or

B. There is a substantial likelihood that without care or treatment the person will cause serious harm to himself or herself or others in the near future, as evidenced by recent behavior.

**Baker Act Form:**

**PROCEDURE:**
For FIU Health MMC, Green Family Foundation NeighborhoodHELP Mobile Health Centers, and the Linda Fenner 3D Mobile Mammography Center.

1. Any HWCOM faculty and/or staff member, who identifies an individual suspected of having a Psychiatric Emergency, will initiate the location specific emergency response plan by immediately notifying a healthcare professional. The staff member shall be responsible for assisting the provider with implementing the emergency response plan, by involving additional staff.

2. The Healthcare Professional will assess the individual to determine if a psychiatric emergency exists and if the patient is determined to be at risk to self or others, then a determination is made if the individual meets criteria for voluntary or involuntary examination.
3. **If patient is located at FIU Health MMC practice on Campus**, the staff will contact the Florida International University Police Department by calling 305-348-5911 or from an inside campus phone extension 7-5911. Police presence is important, if possible, prior to the initiation of a Baker Act.

4. **Provide a safe environment for patients identified as a psychiatric emergency.**

5. **If the individual is not a registered patient, the HWCOM staff member will register the patient.**

6. **Other HWCOM clinical locations will contact 911.**

7. Once a psychiatric emergency is deemed present, the individual shall be under direct 1:1 sight supervision by a designated HWCOM staff member. Attempts should be made to provide him or her with privacy and a calm atmosphere but maintain **constant direct supervision.**

8. **Arrangements for a safe transfer to an appropriate mental health facility will be arranged by Law Enforcement Officers from its respective county and will provide patient transportation to the nearest designated Baker act receiving facility. If the location is part of Green Family Foundation NeighborhoodHELP Mobile Centers, the staff should also contact the Green Family Foundation NeighborhoodHELP Safety Officer on duty.**

9. The healthcare professional shall complete the required Baker Act form. Attached Form No: CH-MH3052B. A copy of the Baker Act form shall be part of the patient's clinical record. The original form will be provided to Law Enforcement Officers.

10. **If the individual is not a registered patient, the HWCOM staff member shall provide the Law Enforcement Officer with pertinent information when they arrive. (Name, date of birth, address, and any other pertinent information that the Law Enforcement Officer requests).**

11. The Law Enforcement Officer must take a person who appears to meet the criteria for involuntary examination into custody and deliver the person or have him or her delivered to the nearest receiving facility for an examination. The officer must execute a written report detailing the circumstances under which the person was taken into custody.

12. HWCOM staff members can reassure other patients in the waiting area that there may be care delays due to an emergent situation and that EMS is enroute, apologize for any delays and extended wait times, and/or ascertain that the other patients are not left unattended.

13. **Notify the FIU Health Care Network Director of Operations and Vice Chair of Psychiatric services for MMC. For Green Family Foundation NeighborhoodHELP Mobile Health Centers and the Linda Fenner 3D Mobile Mammography Center contact Medical Director and Director of Behavioral Health for the Department of Humanities, Health and Society.**

14. An incident report is completed by the faculty member with the most knowledge of the incident. Include all witnesses on the report.

15. A designated HWCOM staff member shall contact the receiving facility to obtain hospital records and/or (Discharge Summary) for established FIU Health patients. Record this information in the medical record before the next visit.

**PROCEDURE:**

**Green Family Foundation NeighborhoodHELP Household Visits:**

A. During a NeighborhoodHELP Household visit, any HWCOM staff member who identifies an individual suspected of having a psychiatric emergency should first ensure his or her own personal safety and any HWCOM staff member under his or her direct supervision is safe. Safety is a priority.

B. If the individual being assessed is perceived to pose a threat to the safety of others, the healthcare professional and other team members should immediately remove themselves from the household and retreat to an offsite safe location, preferably the pre-determined huddle site. Once safety is ensured, the healthcare professional shall use his or her clinical judgment to determine whether to
C. If a psychiatric emergency is deemed to be present and the individual meets the Involuntary Examination criteria (See Involuntary Examination (Baker Act) section above), the healthcare professional should call 911 to receive assistance from EMS with transporting the individual for involuntary examination at a designated receiving facility. The clinician must use his or her judgment to ensure personal safety when determining if the request for 911 assistance should be made while in the individual's presence or at an off-site location. The provider should also contact the Green Family Foundation NeighborhoodHELP Safety Officer on duty to inform them of the psychiatric emergency.

D. The healthcare professional will complete the required Baker Act forms while awaiting arrival of EMS. Baker Act Attached Form No: CH-MH3052B. Alternatively, the Green Family Foundation NeighborhoodHELP Safety Officers may serve as a liaison to the local Law Enforcement Officers to ensure delivery of the necessary Baker Act forms.

E. A copy of the Baker Act forms shall be a part of the patient's clinical record. The original form will be provided to Law Enforcement Officers.

F. The Law Enforcement Officer must take the individual who appears to meet the criteria for involuntary examination into custody and deliver the individual or have him or her delivered to the nearest receiving facility for examination. The officer will execute a written report detailing the circumstances under which the individual was taken into custody.

G. If the individual involved is a visitor, family member or employee who is not a registered patient, the healthcare professional will determine if a psychiatric emergency is present and notify (911) accordingly.

H. Contact the Medical Director and the Director of Behavioral Health for the Department of Humanities, Health and Society.

I. An incident report is completed by the faculty member with the most knowledge of the incident. Include all witnesses on the report.

J. A designated HWCOM staff member shall contact the receiving facility to obtain hospital records and or (Discharge Summary) for established FIU Health patients. Record this information in the medical record before the next visit.

SAFETY Precautions during a Psychiatric Emergency

Applicable for all HWCOM Clinical Locations:

1. Place the individual in a central location, far from an exit or front door and within view of HWCOM staff. Patient door should always remain open. The room will be free of any equipment that could potentially be utilized for self-harm. Examples: (plastic bags, electrical cords, sharp equipment, or any other equipment that the patient can utilize for self-harm).

2. Direct 1:1 sight supervision by a designated HWCOM staff member must be maintained at all times until 911 arrives and Law Enforcement Officers safely escort the individual to the nearest receiving facility.

3. All attempts will be made to provide privacy, but supervision is maintained even during bathroom privileges.

4. Assess individual for possible elopement risk. All staff should be aware of the situation and if the individual is a possible elopement risk. All staff in the clinical area is always aware of the individual's activity. If an individual elopes, do not try to apprehend the individual just contact the Law Enforcement Officer for your County.

5. The individual may have visitors or family members but only an HWCOM staff member can provide
1:1 direct supervision, not a patient visitor or family member.

6. These safety precautions are explained to the individual and any visitors.

**Psychiatric Emergency through Telehealth Audio-Video session:**
If a healthcare provider deems that a patient is a threat to themselves or others during a telehealth video Zoom session the following steps will be taken:

1. Providers should verify the patient’s identity, location & privacy at the beginning of each telebehavioral audio-video session.
2. Call 911. Provider will keep the patient on the telebehavioral audio-video session until Law Enforcement Officers arrive. Please call the 911 office in the county in which the patient is located at the time of the service if other than Miami-Dade.
3. Provider gives an update to the Law Enforcement Officer on the patient status and documents the reasons for contacting Law Enforcement Officer.
4. Law Enforcement will make the determination of a Baker Act.
5. Obtain the officers name, badge number, and document in the EMR. Stay on the telebehavioral audio-video session until a decision is made by Law Enforcement. Document.
6. Notify the FIU Health Care Network Director of Operations and Vice Chair of Behavioral Health for MMC. For Green Family Foundation NeighborhoodHELP Mobile Health Centers and the Linda Fenner 3D Mobile Mammography Center contact Medical Director and Director of Behavioral Health for the Department of Humanities, Health and Society.

**Complete an online incident report:**
The online incident reporting system will be completed in the electronic system, Clarity.

**Clarity ICON located on desktop**

**Documentation of Event and Follow Up**

1. The incident report is completed by the person with the most knowledge of the incident. Please name all witnesses in the witness section.
2. A team debrief is recommended after each Baker Act so that staff have an opportunity to discuss lessons learned and opportunities for improvement before the next emergent situation.
3. Re-stock all emergency medications and supplies utilized.
4. A designated HWCOM staff member shall contact the receiving facility to obtain hospital records and/or discharge summary for established FIU Health patients. Document this information in the medical record before the next visit.

- Broward Sheriff’s Office: [http://www.sheriff.org/about_bso/dfres/operations/ems.cfm](http://www.sheriff.org/about_bso/dfres/operations/ems.cfm)

**RELATED POLICIES, PROCEDURES, AND ASSOCIATED FORMS**

- Baker Act form No: CH-MH3052B see Attached Form
- HWCOM Administrative Policy: *Incident Reporting No.: 200.03.100A*
Certificate of Professional Initiating Involuntary Examination

ALL SECTIONS OF THIS FORM MUST BE COMPLETED AND LEGIBLE (PLEASE PRINT)

I have personally examined (printed name of person) ____________________________ at (time) _______ am _______ pm
(time must be within the preceding 48 hours) on (date) ___________ in _______________ County and said person appears to meet
criteria for involuntary examination.

☐ CHECK HERE if you are a physician certifying non-compliance with an involuntary outpatient placement order and you are initiating
involuntary examination. (If so, personal examination within preceding 48 hours is not required. However, please provide documentation
of efforts to solicit compliance in Section IV on page 2 of this form.)

This is to certify that my professional license number is: ______________________ and I am a licensed (check one box):

☐ Psychiatrist ☐ Physician (but not a Psychiatrist) ☐ Clinical Psychologist ☐ Psychiatric Nurse
☐ Clinical Social Worker ☐ Mental Health Counselor ☐ Marriage and Family Therapist ☐ Physician’s Assistant

Section I: CRITERIA

1. There is reason to believe said person has a mental illness as defined in section 394.455, Florida Statutes:

   “Mental illness” means an impairment of the mental emotional processes that exercise conscious control of one’s actions or of
   the ability to perceive or understand reality, which impairment substantially interferes with the person’s ability to meet the ordinary
demands of living. For the purposes of this part, the term does not include a developmental disability as defined in chapter 393,
   intoxication, or conditions manifested only by antisocial behavior or substance abuse impairment.

Diagnosis of Mental Illness is: ________________________________________________________________
List all mental health diagnoses applicable to this person.

AND because of the mental illness (check all that apply):

☐ a. Person as refused voluntary examination after conscientious explanation and disclosure of the purpose of the examination; AND/OR
☐ b. Person is unable to determine for himself/herself whether examination is necessary; AND

2. Either (check all that apply):

☐ a. Without care or treatment said person is likely to suffer from neglect or refuse to care for himself/herself, and such neglect or
   refusal poses a real and present threat of substantial harm to his/her well-being and it is not apparent that such harm may be
   avoided through the help of willing family members or friends or the provision of other services; AND/OR,
☐ b. There is substantial likelihood that without care or treatment the person will cause serious bodily harm to
   (check one or both) ☐ self ☐ others in the near future, as evidenced by recent behavior.
Section II: SUPPORTING EVIDENCE

Observations supporting these criteria are (including evidence of recent behaviors related to criteria). Please include the person’s behaviors and statements, including those specific to suicidal ideation, previous suicide attempts, homicidal ideation or self-injury.
Certificate of Professional Initiating Involuntary Examination

Section III: OTHER INFORMATION
Other information, including source relied upon to reach this conclusion is as follows. If information is obtained from other persons, describe these sources (e.g., reports of family, friends, other mental health professionals or law enforcement officers, as well as medical or mental health records, etc.).

Section IV: NON-COMPLIANCE WITH INVOLUNTARY OUTPATIENT PLACEMENT ORDER
Complete this section if you are a physician who is documenting non-compliance with an involuntary outpatient placement order. This is to certify that I am a physician, as defined in Florida Statutes 394.455, F.S. and in my clinical judgment, the person has failed or has refused to comply with the treatment ordered by the court, and the following efforts have been made to solicit compliance with the treatment plan:

Section V: INFORMATION FOR LAW ENFORCEMENT
Provide identifying information (if known) if requested by law enforcement to find the person so he/she may be taken into custody for examination:

Age: _______ □ Male □ Female Race/ethnicity: ____________________________
Other details (such as height, weight, hair color, what wearing when last seen, where last seen):

If relevant, information such as access to weapon, recent violence or pending criminal charges:

This form must be transported with the person to the receiving facility to be retained in the clinical record. Copies may be retained by the initiating professional and by law enforcement agency transporting the person to the receiving facility.

Section VI: SIGNATURE

Signature of Professional ___________________________ Date Signed ________ Time ________ am □ pm

Printed Name of Professional ___________________________ Phone Number (including area code) ___________________________