PURPOSE

To define the procedure for transporting a patient who has been judged capable of harming themselves or others.

MISSION / VALUES RATIONALE

This policy is aligned with the Mission and Values for Amita Health. Our mission calls us to provide compassionate, holistic care with a spirit of healing and hope for all persons in the communities we serve. Our ministry is an enduring sign of our Core Values of HOPE, to instill us with integrity, inspire us to interconnect with each other, encourage us to honor diversity and dignity of each individual and empower us to always strive for exceptional performance to our patients/residents and to best serve those in need.

SPECIAL INSTRUCTIONS/FORMS TO BE USED

N/A

PROCEDURE

This policy is to be used when EMS providers, law enforcement, or family has reasonable suspicion that the patient at the time the determination is being made or within a reasonable time thereafter would intentionally physically injure himself or other persons, or is unable to care for his own physical needs and is in need of mental treatment against his or her will. This does not include a person whose mental processes have merely been weakened or impaired by reason of advanced years.

Method:

I. Attempt to orient the patient to reality and to persuade this person to be transported to the hospital so that he/she can be examined and/or helped by a physician.

II. An emotionally disturbed patient may consent to treatment and transport through quiet cooperation or lack of resistance. If the patient requires immediate care, treatment should be initiated without delay. Protection and immediate care of the patient takes priority over getting consent from another individual who can grant consent for that patient.
III. If persuasion is unsuccessful, the EMS personnel should request that the family or law enforcement sign the PETITION FOR INVOLUNTARY/JUDICIAL ADMISSION 79-MHDD-5 which allows them to transport the patient to the hospital against his/her will.

IN NO WAY does this mean that the EMS personnel are committing the patient for a hospital admission. It simply enables the EMS personnel to transport a person in need of mental and/or psychological treatment to a hospital against his/her will so that a physician may evaluate said patient.

IV. If the family refuses to sign the form, the next most appropriate person would be a law enforcement officer who can and should sign this form. However, if the police are not present, the EMS personnel in charge, being of legal age and sound mind may sign the form.

V. The 79-MHDD-5 form should be attached to the Ambulance Run sheet and should become a part of the patient’s permanent record in the Emergency Department.

VI. The emotionally disturbed patient usually will resist treatment. This patient may be physically or verbally abusive. If the EMS personnel have reasonable belief that the patient may harm himself or others, reasonable physical restraints should be used. If restraints are to be used the following is an accepted guideline for use in the Presence St. Mary’s EMS System:

A. Have law enforcement personnel respond to the scene.

B. Try to get consent from a relative, but do not delay needed treatment.

C. Use enough personnel to restrain the patient.

D. Keep bystanders and onlookers away from the patient as they may agitate the patient and cause further injury.

E. Normal restraining devices will be used, leather straps used in conjunction with wrist and anklet restraints, or body restraining jacket. This should be placed on the patient as soon as possible with the least amount of discomfort to the patient as possible.

F. Make sure the patient is adequately restrained so he or she cannot inflict injury to him/herself or others.

G. Two attendants shall be in attendance during transport whenever possible. In extreme cases a police officer may need to be present during transport.

H. Provide the Emergency Department with needed information, but avoid slanderous remarks. Document on field report form, the observations, not conclusions.

I. Keep the patient’s condition confidential.
J. If for any reason a patient is placed in locked limb restraints (hand cuffs/shackles), a key shall be readily available at all times.

Kevin Bernard
Department Leader

DATE: 03/29/2019

NOTE: Policies with original signatures are on file in Administration.