

SAN MATEO COUNTY
MENTAL HEALTH SERVICES DIVISION

DATE: August 4, 1997

MENTAL HEALTH POLICY NO.: MH 97-09

SUBJECT: Urgent Care Messages

AUTHORITY: Divisional

SUPERSEDES: New Policy

PURPOSE

To ensure that urgent care messages provide accurate, useful, and timely information to assist in the provision of consistent, individualized care for mental health clients; to provide standards for the creation, update, and removal of urgent care messages.

BACKGROUND

Urgent care messages are used to notify PES/2N staff, Aging and Adult Services intake and conservatorship staff, as well as clinic and agency staff, about special circumstances which apply to individual mental health clients. For example, urgent care messages may provide information about violent behavior, use of weapons, substance abuse, drug seeking behaviors, co-insurance, hospitalization issues, and other factors which might impact clinical decisions, particularly those by an officer of the day, emergency, or crisis staff who have limited knowledge about the client.

PROCEDURE

Urgent care messages are created, updated, and removed through the Mental Health Menu of San Mateo County Mental Health Services' VAX computer system. Procedures to create, update, list, and remove urgent care messages are found in the MIS Manual, page 40-42, March 1996.

POLICY

- **Clients Treated Within County Provided or Contracted Clinical Settings**

Unit Chiefs and clinical directors of contract agencies, in coordination, as appropriate, with resource managers, are responsible for the existence, accuracy, update, and removal of urgent care messages concerning these clients. The function of data entry and management of the message directory may be delegated by the supervisor to other staff. Any clinical staff member may suggest that an entry be created, altered, or deleted.

- **Clients Not Currently Open to a County Provided or Contracted Clinical Team**

Psychiatric Emergency Services (PES), 2 North, and Aging and Adult Services staff are expected to work directly with the youth/adult resource management teams to create and manage urgent care messages for these clients.

- Urgent care messages may include information from several sources or about several aspects of care.
- All entries specifying dosages and frequencies of medications must be entered or reviewed by a nurse or psychiatrist; teams electing to communicate medication-related information to PES or other crisis resources are absolutely responsible for the accuracy of that information.
- All urgent care messages shall contain written identification of the author by use of name or initials following the narrative message.
- Messages shall be reviewed at least every six months by the responsible unit chief, agency supervisor, or resource staff member for accuracy of content.
- When there is no need to continue an urgent care message, it shall be deleted.
- If there is a continuing need for an urgent care message, and even if all information remains accurate, the message shall be redated (which in effect creates a new message) and the previous message deleted. (Note: *any* change to the prior message creates a new, redated message, but does not delete it.)
- No client shall have more than one urgent care message.

Approved: _____
Beverly Abbott, Director
Mental Health Services Division