



QUINTE HEALTHCARE CORPORATION

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Emergency/Primary Care – Form 1

Title: Emergency/Primary Care – Form 1		Policy No:	3.7.1
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Department:	Emergency/Primary Care	Policy Lead:	Director Emergency/Primary Care
Approved By:	Emergency/Primary Care Program Advisory Committee Mental Health Program Advisory Committee Nursing Practice Committee		

1. POLICY

Prior to applying a Form 1, the Emergency Department (ED) physician is encouraged to contact the physician on call for psychiatry to collaborate regarding the patient’s Form 1 eligibility, the immediate plan of care to relieve patient distress and discuss the potential for less intrusive treatment in the community.

Background

The Form 1 is an Application for Psychiatric Assessment under the Mental Health Act. Such an assessment can only take place in a designated Schedule 1 psychiatric facility. Within Quinte Healthcare Corporation (QHC) only the Belleville General Hospital (BGH) is a designated psychiatric facility.

2. DEFINITIONS

Form 1: Application by Physician for Psychiatric Assessment

The physician examining the patient has concern that the person suffers from a mental disorder resulting in the person being a danger to themselves or others. The Form 1, once signed, lasts for 7 days and gives the authority to transport the person to a psychiatric facility. Once at the psychiatric facility it provides authority to detain for psychiatric assessment and observation for up to 72 hours.

Form 42: Notice to the Person of the Application for Psychiatric Assessment

Provides notice to the patient of why they are being detained for psychiatric assessment and observation. The Mental Health Act directs that the Form 42 is provided to the patient at the designated psychiatric facility (i.e. BGH).

3. PURPOSE

The primary purpose for Form 1 and Form 42 is to provide the process direction to nursing staff, physicians and others for the care of patients who require psychiatric assessment, and to ensure that patients are informed of their rights.

4. PROCEDURE

4.1 Patients presenting in ED are assessed by triage nurse. The ED physician examines and determines treatment plan.

4.2 Medical conditions may take immediate priority (e.g. overdose, other medical conditions must be ruled out) depending on acuity.

4.3 For patients assessed as medically stable and meeting the criteria for Application for Psychiatric Assessment will have a Form1 applied by the ED physician. The Form 1 is sufficient authority to transport the person subject to the Form to BGH for psychiatric assessment or to detain the patient at the BGH site.

For patients being transferred from another QHC site whose admission has been already agreed upon by the physician on call for psychiatry, admission directly to the inpatient psychiatric unit is the preferred option.

4.4 When admitted as a patient to the psychiatric facility (Belleville General Hospital) the 72-hour period of detention begins. This time and date must be indicated by the physician on the Form1.

4.5 Once admitted at BGH, the patient must be given a Form 42 which advises them of the reason they are being detained for psychiatric assessment and observation. The physicians must give the Form 42 to the patient or the Form 1 is not valid.

The Form 42 can only be given to the patient at the BGH site.

4.6 Delegation of the Form 42:

- ⇒ If the attending physician is not able to immediately deliver the Form 42 the completion of the form may be delegated to the Mental Health team leader or in-charge nurse.
- ⇒ The delegation of the Form 42 may occur when an Order for admission has been made over the telephone.
- ⇒ It is the responsibility of the nurse who received the admitting order to clearly and fully document each step taken in this process, including the relevant health care professionals' names in the patient's record, and the date and time that the Form 42 was given to the patient.
- ⇒ The nurse is NOT permitted to sign the bottom of the Form 42, which requires the attending physician's signature.

4.7 When a nurse provides the patient with the Form 42, it is the attending physician's independent obligation to ensure:

- that the Form 42 is properly completed by the nurse;
- that the date and time the detention commenced is noted on the Form 1;
- a signed Form 42 is given to the patient as soon as it is completed (i.e. the next time the MRP is on the inpatient unit); and,
- the completed Form 42 has been photocopied and is entered in the patient's record.

4.8 While in the ED patients who have been placed on a Form 1 require Constant Observation unless otherwise ordered by a Physician. Clothing will be removed and stored in a place inaccessible to the patient. If for any reason clothing cannot be removed the inpatient psychiatry unit must be informed prior to transfer.

4.9 The patient may be required to stay in the ED to await assessment /admission to an inpatient psychiatric bed. Time in ED should be minimized. (See Policy #3.13.1 Mental Health – Admission of a Form 1 Patient to Inpatient Psychiatry.) Form 1 patients are not permitted smoking privileges.

4.10 Based on clinical assessment the most appropriate staff person will be assigned to provide Constant Observation. If a nurse is required for Constant Observation additional staff will be called in as required. The inpatient psychiatry unit can be contacted to determine if a nursing staff on the unit or through call-in may be available for patients where psychiatric care is primary. As an interim measure, security staff may be assigned under the direct supervision of the ED nurse.

4.10.1 If patient must be isolated because of their level of distress or behaviour affecting other patients they will be observed in an identified safe room

4.10.2 Access to syringes, needles, tubing and other supplies will be minimized.

4.11 The Administrative Coordinator will be advised as soon as possible of a Form 1 patient in ED. The Police will be called when necessary.

4.12 Mode of transportation and accompaniment for a Form 1 patient will be determined through an order from the MRP based on the patient acuity, presenting symptoms and treatment interventions.

Please refer to QHC Policy '3.18.6 Patient – Transportation of Patients to and from Hospital'.

APPENDICES AND REFERENCES

Note: This policy also serves as Mental Health policy 3.13.3

References:

Mental Health Act, Revised Statutes of Ontario, 1990. November 1, 2004

Borden Ladner Gervais LLP communiqué from Barbara Walker-Renshaw (Legal Counsel QHC)

Halton Health Care, Protocol for Form 1 and Form 42 under the Mental Health Act, May, 2009