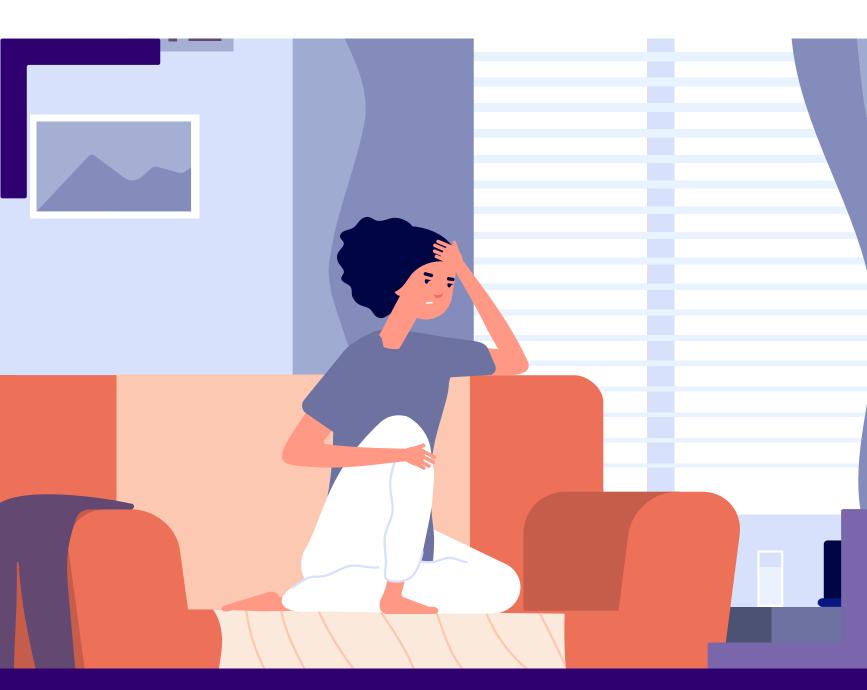
SALEM HOSPITAL EMERGENCY DEPARTMENT

Care after a mental or behavioral health crisis





What is a behavioral health crisis?

A sudden change in someone's mental or emotional well-being. This change results in the need for immediate medical attention. Without that, their mental or physical health could get worse.

What to expect in the emergency department

If someone has a behavioral health crisis they will see a provider that understands mental health. The provider will ask questions to better understand the person's current condition and long-term needs.

Questions that may be asked:

- Can the individual care for themselves?
- Is there access to care and services where the individual lives?
- Are there community-based services that the individual could access?

The provider will work with the patient to:

- Identify friends and family that could support the individual.
- Try to understand the individual's risk of suicide.
- Help make a safety plan with ideas about how to protect the individual from dangers including medications, weapons, alcohol, sharps, chemicals, etc.

Oregon behavioral health laws

There are many Oregon laws relating to the treatment and care of people experiencing a mental or behavioral health crisis.

This brochure focuses on House Bill 3090 of 2017 that requires hospitals to adopt, maintain and follow written policies that pertain to the release of a patient from the emergency department who is experiencing a behavioral health crisis.

- HB 2023 of 2015 related to release requirements for patients hospitalized for mental health treatment
- HB 2948 of 2015 related to allowable disclosure of protected health information
- HB 3378 of 2015 related to general caregiver involvement in discharge planning
- HB 3091 of 2017 related to payer requirements for case management and care coordination

What to expect after leaving the emergency department

If the patient attempted suicide, or has been thinking about suicide, the hospital will support them as they move to the next level of care.

Caring contacts will be attempted within 48 hours of a patient leaving the hospital. The patient may be contacted by:

- Hospital employees
- Community-based providers
- Peer support providers
- Suicide prevention hotlines

The hospital will work to schedule a follow-up appointment for the patient within seven days of leaving the hospital.

Care coordination and case management

Before a patient leaves the hospital after a behavioral health crisis, the hospital will do a number of things to help support them. Depending on the patient's needs these may include:

- Notifying the patient's primary care provider
- Referring to a specialty provider
- Referring to community-based resources
- Connecting to peer support services
- Connecting to crisis support services
- Initiating a caring contact follow-up
- Creating and sharing a plan of care

What is a lay caregiver?

Oregon laws use the term lay caregivers when referring to parents, spouses, family members or other identified individuals that will support the patient after leaving the hospital.

Providers will coordinate with patients and lay caregivers to develop a plan for after leaving the hospital. A provider does not have to disclose health information if there is justifiable concern for the patient's safety.

If the patient is:

- Younger than 14: the lay caregiver is a parent or legal guardian.
- 14 through 17: the lay caregiver is the patient's parent or legal guardian. (*If there are clinical indicators or evidence of emancipation, the patient may designate a lay caregiver of their choice.*)
- 18 and older: the patient should choose a lay caregiver.

If lay caregivers are chosen by the patient, the lay caregivers will be included in care planning.

- The hospital will ask the patient to sign an authorization form.
- Only the minimum information necessary will be shared with the lay caregiver.
- The patient has the ability to take back the authorization at any time.