LAC+USC MEDICAL CENTER PSYCHIATRIC EMERGENCY SERVICES SCOPE OF SERVICES

Departmental Purpose

Psychiatric Emergency Service (PES), part of the Department of Emergency Medicine (DEM), serves as an important component of the continuum of care in LAC+USC Medical Center. The service exists to provide comprehensive emergency psychiatric care, evaluation, treatment and crisis stabilization of the emergent psychiatric patient.

Types and Ages of Patients Served

The Psychiatric Emergency Services provides care for young adult, adult, and geriatric patients, with consultative care to the pediatric and adolescent patients in other areas of the DEM. The PES provides emergency care to patients from various inpatient institutions, skilled nursing facilities, board and care, law enforcement, private homes and independent living centers. Major psychiatric diagnoses include: Schizophrenia; Bipolar Disorder; Major Depression; Personality Disorder; and Substance abuse, and related disorders.

Methods Used to Assess Patient Needs

A comprehensive emergency psychiatry care model uses a collaborative interdisciplinary approach in assessing, planning, implementing, and evaluating care for patients in crisis or in an acute exacerbation of mental illness, and minimizing the effects of the disease process. The patient is classified into one of five categories using the Emergency Severity Index (ESI) System. All patients receive a medical screening examination by a physician/provider to determine whether an emergency medical condition exists. Nursing and Psychiatric house staff, under the direction of the Director of the Psychiatric Emergency Service, act collaboratively with Pharmacy, Occupational Therapists, Psychologists, Recreational Therapists, Diagnostic Services, Psychiatric, Social Services/Medical Case Workers, Pastoral Services, Financial Workers, and Dietary Services to develop and plan an appropriate plan of care with the patient.

Scope of Service and Complexity of Care

The PES/DEM provides emergency psychiatric treatment for all patients on a 24-hour basis, seven days a week. The PES is divided into the locked unit and the unlocked psychiatric walk in unit. The locked unit cares for patients for the purpose of: providing a therapeutic environment; supervising self-care activities; managing a milieu through a therapeutic use of self and patient/family education; and facilitating transfer to psychiatric inpatient units, urgent care settings, or discharge from the psychiatric emergency service. The unlocked unit cares for patients presenting voluntarily for psychiatric inpatient and outpatient services.

Volume & Quality Control Indicators

- Number of PES Visits
- Patient/Family Teaching
- Pain
- Restraints
- Environmental Rounds
- Pharmacy Rounds
- Patient Rights
- Wait time for Medical Screening Exam

Reviewed/Refreshed: March 2005; January 2011; December 2012; January 2016; June 2020

Approved: August 2020

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Performance Improvement Indicators

- Number of Restraint Applications per 100/patients
- Length of Restraint Applications
- Length of Stay
- Number of Restraints greater than 12hours (add)

Recognized Standards

Services and functions shall be developed and implemented in a manner consistent with the standards of regulatory and advisory agencies such as The Joint Commission, the California Board of Registered Nursing, the California Board of Licensed Vocational Nursing, OSHA, CMS, Title 22, the American Nurses Association, the FDA, the American Medical Association, the Department of Consumer Affairs, the Residence Review Committee, the American College of Emergency Physicians, Department of Mental Health/Patient Rights, the Medical Board of California, and the American Board of Emergency Medicine.

Availability of Necessary Staff

Psychiatric Emergency Services (PES) consists of an admitting area located on the first floor of the Diagnostic and Treatment Building and Emergency Psychiatric walk-in area located on the first floor of the Clinic/Diagnostic Towers. The PES is open twenty-four (24) hours a day, seven (7) days a week. The nursing staff reports to a Nurse Manager (NM) who works collaboratively with the Service Chief of the Psychiatric Emergency Service and Department of Emergency Medicine. The NM is responsible for providing sufficient quantities of nursing staff to meet the acuity needs of the patients and the census of the unit. S/he is responsible for the quality of nursing care provided and the performance of assigned staff. Staffs on the unit have specific competency assessments for their professional level and/or job description. The performance standards are consistent with the Department of Nursing Services and Education. Registered Nurses, License Vocational Nurses and Nurse Attendant provide patient care. A clerical staff provides support to the acute care setting, and the psychiatric case workers and social worker assist with transferring patients to inpatient care facilities and ongoing outpatient care.

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