



**MONTANA STATE HOSPITAL
FORENSIC MENTAL HEALTH FACILITY
POLICY AND PROCEDURE**

**PSYCHIATRIC ASSESSMENTS AT THE
FORENSIC MENTAL HEALTH FACILITY**

Effective Date: February 1, 2016

Policy #: MSH FMHF-09

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- I. PURPOSE:** To provide guidelines for assessing patient's psychiatric needs while they are at the Montana State Hospital (MSH) Forensic Mental Health Facility (FMHF).
- II. POLICY:** Patients' psychiatric needs will be evaluated in a systematic manner at regular intervals throughout their stay. This information will facilitate prompt and accurate decision making about each patient's care.
- III. DEFINITIONS:** None
- IV. RESPONSIBILITIES:**
- A. Nursing staff: Notify the Licensed Independent Practitioner (LIP) of any new admission to the FMHF as soon as the patient physically arrives at the facility, if not beforehand.
 - B. LIPs: Assess the patient, complete an admission psychiatric evaluation, and chart the progress of the patient per policy standards.
 - C. Admissions staff: Send out a list of the patients due for recommitment no later than three (3) weeks prior to the due date.
- V. PROCEDURE:**
- A. The Admission Psychiatric Evaluation is performed by a LIP within seven (7) days of the patient's admission to the MSH FMHF. The evaluation will be documented in a report and include the following information:
 1. Identifying data
 2. Chief complaint/reason(s) for admission
 3. History of present illness
 4. Past history (psychiatric, medical, substance abuse, social, family)
 5. Mental status examination
 6. Summary and Formulation
 7. DSM 5 diagnoses
 8. Determination of patient strengths/assets
 9. Estimated length of stay
 10. Initial plan for treatment

**MONTANA STATE HOSPITAL
ADMISSION PSYCHIATRIC EVALUATION
Month, Day, Year**

MSH#:
Date of Admission:
Date of Evaluation:
Referral Source:
Age:
Sex:
Marital Status:
Occupation:
Legal Status:

Chief Complaint:

Source of Information:
1.

History of Present Illness:

PAST HISTORY

Psychiatric History:

Drug and Alcohol History:

Family History:

Medical History:

Social History:

Work History:

Marital History:

Military Service:

Criminal History:

Current Living Situation:

MENTAL STATUS

STRENGTHS AND ASSETS

SUMMARY AND FORMULATION

Diagnoses:

Primary:

- 2.
- 3.

Other Conditions That May Be a Focus of Clinical Attention:

- 1.
- 2.

Core Measures:

Physical health –

Education –

Employment Skills –

Family Support –

Knowledge on illness and treatment –

Initial Treatment Plan:

Level of Supervision:

Estimated Length of Stay: days.

Certification Requirement: Pursuant to Federal Regulation 424.14(b)

(X) The admission of this patient was medically necessary for diagnostic study and/or treatment is reasonably expected to improve this patient's condition.

OR

() The patient was admitted to the hospital based on an emergency detention status or at the request of the court **and does not** require inpatient acute psychiatric care.

, MD
Staff Psychiatrist
Montana State Hospital

Date/Time

R:

T:

**MONTANA STATE HOSPITAL
ANNUAL PSYCHIATRIC EVALUATION**
Month, Day, Year

MSH#:
Date of Admission:
Date of Evaluation:
Age:
Sex:
Marital Status:
Occupation:
Current Legal Status:

History of Present Illness:

PAST HISTORY

Psychiatric History:

Drug and Alcohol History:

Family History:

Medical History:

Social History:

Work History:

Marital History/Children:

Military Service:

Criminal History:

Living Situation:

HOSPITAL COURSE

MENTAL STATUS

STRENGTHS AND ASSETS

SUMMARY AND FORMULATION

Diagnoses:

Primary:

- 1.
- 2.

Other Conditions That May Be a Focus of Clinical Attention:

- 1.
- 2.

Medications:

Treatment Plan:

Level of Supervision:

Estimated Length of Stay:

Certification Requirement: Pursuant to Federal Regulation 424.14 (b)

(X) The admission of this patient was medically necessary for diagnostic study and/or treatment is reasonably expected to improve this patient's condition.

OR

() The patient was admitted to the hospital based on an emergency detention status or at the request of the court **and does not** require inpatient acute psychiatric care.

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