



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

**CRISIS RESPONSE SERVICES
FOR THE
FORENSIC MENTAL HEALTH FACILITY**

Effective Date: February 1, 2016

Policy #: MSH FMHF-15

Page 1 of 3

- I. PURPOSE:** The purpose of this policy is to define and describe crisis response services for patients at the Montana State Hospital (MSH) Forensic Mental Health Facility (FMHF).
- II. POLICY:** It is the policy of the MSH FMHF to have crisis response services available to the patients at the FMHF 24 hours a day, 7 days a week. Crisis response services are provided to the patients by trained staff or contractors.

Nursing staff responsible for providing crisis response services will be instructed and trained in the following areas:

- A. The policies and procedures for crisis response services;
 - B. Crisis intervention techniques;
 - C. Conducting assessments of risk of harm to self or others and prevention approaches;
 - D. The signs and symptoms of mental illness; and
 - E. The appropriate utilization of collateral or emergency services.
- III. DEFINITIONS:** None
- IV. RESPONSIBILITIES:**
- A. MSH FMHF Program Manager: Ensure that all patients of the MSH FMHF are informed of this policy during their orientation to the program. Ensure that all Registered Nurses are trained in the areas identified above and documentation of the training is forwarded to the MSH Staff Development and Personnel Departments.
 - B. Registered Nurses: Be trained and available to respond immediately to patients in crisis at the FMHF. Consult with LIP and others as needed to help resolve a patient's crisis.
 - C. Licensed Independent Practitioners (LIP): Consult with Registered Nurses providing crisis response services as requested in order to help resolve the patient's crisis in the most effective manner.

V. PROCEDURE:

- A. All Registered Nurses assigned to the FMHF will be trained in providing crisis response services. Documentation of their training will be maintained in their personnel files.
- B. A Registered Nurse will be available at the FMHF at all times of the day and week in order to be available for immediate response to patient crises.
- C. MSH FMHF patients will be instructed to notify the Registered Nurse of a personal crisis and request crisis response services at any time of the day or night.
- D. The FMHF will maintain call buttons in rooms and other means for a patient to report a personal crisis.
- E. The Registered Nurse will respond immediately to a request for crisis response services, assess the patient, and perform a risk assessment.
- F. The Registered Nurse will consult the LIP or other professionals if clinically indicated.
- G. The Registered Nurse will develop a crisis management plan and take appropriate action to ensure the safety and well-being of the patient.
- H. The Registered Nurse will coordinate collateral interventions or services as indicated to help resolve a patient crisis.
- I. The Registered Nurse will complete documentation of the crisis, crisis management plan, and crisis services provided in the patient's medical record. Effective individualized interventions should be recorded for future crisis responders.

VI. REFERENCES: Administrative Rules of Montana Health Care Facilities, Subchapter 12, Minimum Standards for Mental Health Centers, 37.106.1945.

VII. COLLABORATED WITH: Hospital Administrator, Medical Director, Forensic Psychiatrist; Director of Clinical Services; MSH Director of Nursing; MSH Director of Quality Improvement; Program Manager of the Montana State Hospital FMHF.

VIII. RESCISSIONS: None, new MSH FMHF policy.

IX. DISTRIBUTION: All MSH FMHF Policy and Procedure Manuals

Montana State Hospital Forensic Mental Health Facility Policy and Procedure

- X. ANNUAL REVIEW AND AUTHORIZATION:** This policy is subject to annual review and authorization for use by either the Administrator or the Medical Director with written documentation of the review per ARM § 37-16-330.

- XI. FOLLOW-UP RESPONSIBILITY:** Program Manager of the Montana State Hospital FMHF.

- XII. ATTACHMENTS:** None

_____/____/____
John W. Glueckert Date
Hospital Administrator

_____/____/____
Thomas Gray, MD Date
Medical Director