1005.0 Legal 2000-R Service

1005.1 Policy Approval Clearance Record

Mental Health Policy This policy supersedes: 07/20/2011 Number of pages in Policy: 14 **Developmental Services Policy** Rural Services Policy Review by Representative from the Date: Date Policy Effective: Office of the Attorney General: 07/20/2011 07/20/2011 Julie Slabaugh Revised 05/23/2012 Revised 05/23/2012 Rural Services Director Approval Date: Policy Lead: Eric Skansgaard Signature: 07/20/2011 Barbara Legier Revised 05/23/2012

1005.2 Statement of Purpose

- **Policy Statement:** Rural Services will have clear procedures for carrying out a Legal 2000-R service when the safety of the person or others is in jeopardy.
- **1005.2.2 Purpose:** To support Rural Services staff to act in the best interests of clients by placing them in the least restrictive environment beneficial to them and to provide a process by which safe and reliable transportation to such environments can be obtained and reimbursed.

1005.3 Authority

NRS 433.003; 433.496; 433A; Medicaid Service Manual 403.6H.3

1005.4 Definitions

- **1005.4.1 Authorized Staff:** Staff who initiate the Legal 2000-R service include a licensed physician, licensed psychologist, licensed marriage and family therapist, licensed clinical professional counselor, licensed social worker, or a registered nurse.
- **1005.4.2 Client:** Any person who seeks, on the person's own or another's initiative, and can benefit from, care, treatment, treatment to competency, or training provided by the Division (NRS 433A.014).
- **1005.4.3** Clear and Present Danger of Harm to self: A person presents with a clear and present danger of harm to himself or herself if, within the immediately preceding 30 days, the person has, as a result of a mental illness:
 - **A.** Acted in a manner from which it may reasonably be inferred that, without the care, supervision, or continued assistance of others, the person will be unable to satisfy his or her need for nourishment, personal or medical care, shelter, self-protection or safety, and if there exists a reasonable probability that the person's death, serious bodily injury or physical debilitation will occur within the next following 30 days unless he or she is admitted to a mental health facility pursuant to the provisions of NRS 433A.115 to 433A.330 inclusive, and adequate treatment is provided to the person;
 - **B.** Attempted or threatened to commit suicide or committed acts in furtherance of a threat to commit suicide, and if there exists a reasonable probability that the person will commit suicide unless he or she is admitted to a mental health facility pursuant to the provisions of NRS 433A.115 to 433A.330 inclusive, and adequate treatment is provided to the person; or
 - C. Mutilated himself or herself, attempted or threatened to mutilate himself or herself or committed acts in furtherance of a threat to mutilate himself or herself, and if there exists a reasonable probability that he or she will mutilate himself or herself unless the person is admitted to a mental health facility pursuant to the provisions of NRS 433A.115 to 433A.330 inclusive, and adequate treatment is provided to the person;

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- 1005.4.4 Clear and Present Danger of Harm to Others: A person presents a clear and present danger of harm to others if, within the immediately preceding 30 days, the person has, as a result of a mental illness, inflicted or attempted to inflict serious bodily harm on any other person, or made threats to inflict harm and committed acts in furtherance of those threats, and if there exists a reasonable probability that he or she will do so again unless the person is admitted to a mental health facility pursuant to the provisions of NRS 433A.115 to 433A.330 inclusive, and adequate treatment is provided to the person.
- **1005.4.5 Immediately:** When first known to the agency staff.
- **Assessment of Risk Factors:** Use of any agency approved clinical guideline which invites Authorized Staff to consider a number of variables which have application to the assessment of clinical risk in cases of harm to self or other. Examples include but are not limited to Burns Suicidal Urges Scale (Full), CASE and SADPERSONS suicide screening strategies.

1005.5 Procedures

1005.5.1 Procedure for Legal 2000-R, Admit Criteria, Reporting, and Episode Management

- **A.** At the request of a client or another on his/her behalf, Authorized Staff will, by personal observation, conduct an assessment of the client including an assessment of risk factors according to a recognized clinical guideline.
- **B.** If the client's capacity to exercise self-control, judgment, and discretion in the conduct of his or her affairs and social relations or to care for his or her personal needs is diminished, as a result of a mental illness, to the extent that the person presents a clear and present danger of harm to himself or herself or others, Authorized Staff may:
 - 1. cause the client to be taken into custody and/or be transported to the local emergency room for medical clearance;
 - 2. provided the person does not suffer diminished capacity as a result of epilepsy, mental retardation, dementia, delirium, brief periods of intoxication caused by alcohol and drugs, unless a mental illness that can be diagnosed is also present and contributes to the diminished capacity of the person.
- C. Authorized Staff will complete the appropriate portions of the Application, Certification, and Medical Clearance for Emergency Admission of an Allegedly Mentally III Person To A Mental Health Facility. Where clinically feasible, the clinician will include findings of the Folstein Mini-Mental Status exam and findings from the Assessment of Risk Factors.
- **D.** Authorized Staff will notify the emergency room of the impending arrival of the client, along with the client's status and mode of transportation (i.e., law enforcement, ambulance).
- E. Upon completion of the Legal 2000-R, Authorized Staff will immediately complete documentation causing the opening of an Emergency Services episode and complete AVATAR clinical documentation including the appropriate crisis intervention code. If the client is currently active in an Outpatient episode, it is not necessary to open the additional ER episode; the Legal 2000 services can be documented in the OP episode. Additionally:
 - 1. To facilitate prompt documentation of the Legal 2000 service, support staff must open the episode immediately upon notification.
 - 2. To guarantee accurate tracking, the Legal Status option must be completed for Emergency Service clients and immediately updated for active clients. The 'Legal 2000' Status will be chosen as the current status.

- Support staff will enter reasonably obtainable cross-episode financial information, including data from Medicaid Eligibility Verification, for nonindigent persons pursuant to NRS 433A.600.
- 4. Authorized Staff will complete a Retrospective Authorization Request (FA-11C) within 7 calendar days of the date of service for all Medicaid eligible individuals receiving the Legal 2000 Service.
- **F.** Authorized Staff will document all services provided in DAP format in the progress notes of the AVATAR Episode, and the Developmental Services Electronic Record where appropriate. Progress notes will include the initial assessment, disposition, and subsequent contacts with the hospital or collateral services. Authorized Staff will document contact with the receiving agency or organization, including reasonably available discharge coordination and planning information.
- **G.** For each completed Legal 2000 service, Authorized Staff will complete an initial Division Serious Incident Report (SIR) and any follow-up / final reports as specified in MHDS Policy A 5.2.
- **H.** When Authorized Staff complete the final Division SIR, Authorized Staff will complete clinical and program movement documentation necessary to close the AVATAR episode according to the procedure for closing electronic records at the local center. The Legal Status option must be updated to show there is no longer a legal hold on the client. Should the client require ongoing services, the client will be referred to the Rural Services intake process or to the existing Rural Services provider.

1005.5.2 Legal 2000-R for Developmental Service Clients – Additional Procedure

- A. Individuals with Developmental Disabilities may receive Legal 2000-R service if they meet criteria for mental illness.
- **B.** Agency or Provider staff who has reason to believe any DS client presents a clear and present danger of harm to self or others will promptly request a Legal 2000-R Service from Authorized Staff of the local Rural Services Mental Health Center, Rural Services Psychology Department, or from law enforcement or emergency services personnel.
- **C.** While individuals may be assessed in any community setting, individuals with supported living arrangement (SLA, ISLA) services can remain in their homes during the assessment if their needs can safely be met.
- D. If the health or safety threat of the DS client can be adequately reduced or the client's support needs met through reasonable changes in the provider's practices or the provision of additional services, community living will be continued as an alternative to Legal 2000-R.
- **E.** The assigned DS III will refer the person to the DS Psychology Department for the development of a crisis/safety plan. Further behavior consultation will be provided by the Psychological Department until the person's behavior is stabilized.

1005.5.3 Legal 2000-R Transportation

Authorized Staff may arrange for transportation of any client who has been identified as requiring emergency admission to NNAMHS with the local Transportation Agency. Rural Services has established contractual relationships with several rural transportation agencies and has established criteria for exchange of information and reimbursement.

A. Authorized Staff will ask the client to sign a Release of Information form to facilitate exchange of billing information, follow-up, and/or potential risk status for planning or emergency response purposes. If the client declines this request Authorized Staff will make note of the refusal in the clinical record and proceed with transportation arrangements.

- **B.** Authorized Staff will contact transportation agencies in order of priority, for transport as follows:
 - 1. Local Law Enforcement Agency
 - 2. County Law Enforcement Agency
 - 3. Local Ambulance Services
 - 4. County Ambulance Services
- C. Authorized Staff will request an estimation of transportation response time and communicate this information to the local emergency room or other clearance facility where the client is located pending transportation to NNAMHS. This information will be communicated to NNAMHS along with the estimated time the client will arrive in Sparks.
- **D.** Upon receipt of an invoice from a Transporting Agency, staff of Rural Services shall ensure reimbursement of transportation services within 30 days, in accordance with their contract with the agency.

1005.5.4 Assessment Instrument Approval Procedure

Prior to use of any risk assessment instrument, Authorized Staff will submit the instrument to the MARS leadership team through the appropriate supervisor(s). Submissions will include but are not limited to: literature including research, clinical trials, normative studies and findings. MARS will review the instrument at the next General Topics meeting. Approved instruments will be stored, together with their literature, on the G drive and be available to all Authorized Staff.

1005.5.5 Timelines:

Table 1005.1: Timelines for Legal 2000-R Services Policy

Requirement	Deadline	Starting Date	Responsible Party	Actions to be Taken
Complete documentation opening AVATAR emergency services episode and enter or update the Legal Status option.	Immediately	Upon completion of the Legal 2000-R service	Authorized Staff and designated support staff	Authorized Staff completes documentation opening AVATAR emergency services episode and all required documentation within that episode. Support staff completes opening of the episode and entry or update of Legal Status option.
Complete documentation closing AVATAR Emergency Services Episode	Immediately	Upon completion of the Final SIR	Authorized Staff and Designated Support staff	Authorized Staff completes documentation closing AVATAR emergency services episode and update of Legal Status option and all required documentation within that episode. Support staff completes closing of the episode.

Requirement	Deadline	Starting Date	Responsible Party	Actions to be Taken
Complete FA-11C Retrospective Authorization Request	Within 7 calendar days of the date of service for Medicaid eligible clients	Date of service	Authorized Staff	Complete FA-11C and fax to number indicated on the form.
Make Referral of DS Client for Legal 2000-R 1005.5.2B	Immediately	Upon learning of or having reason to believe DS Client is at imminent risk of harm to self or other	Agency or Provider staff	Request Legal 2000-R from Authorized Staff
Provide Reimbursement to Transporting Agency 1005.5.3D	30 Days	Receipt of Provider Billing Invoice for Transportation	Authorized Staff and/or Business office staff	Ensure timely payment of authorized billable transportation services according to MOU

- 1005.5.6 Forms: Program Movement Form is used to communicate need to open the AVATAR Emergency Services episode. All applications and certificates for the admission of any person in the State of Nevada to a mental health facility under the provisions of NRS 433A shall be made on:
 - A. APPLICATION, CERTIFICATION, AND MEDICAL CLEARANCE FOR EMERGENCY ADMISSION OF AN ALLEGEDLY MENTALLY ILL PERSON TO A MENTAL **HEALTH FACILITY**

Retrospective Crisis Authorizations shall be made on:

B. FA-11C (on-line at Magellan)

1005.5.7 **Documentation:**

A. Case File Documentation (paper):

Table 1005.2: Case File Documentation for Legal 2000-R service

File Location	Data Required
Legal / Misc	Copy of Application, Certification, and Medical and associated assessment documentation as available

B. Electronic Documentation (AVATAR, DSNOW, etc):

Table 1005.3: Electronic AVATAR Documentation for Legal 2000 Services Policy

`	Data Required
Progress Notes	DAP format, Data includes mental status exam findings, risk factors assessed, case disposition. Assessment includes case formulation or evaluation of risk, GAF, LOCUS level where appropriate. Plan includes anticipated collaboration around discharge planning and/or treatment plan development activities.

1005.5.8 **Supervisory Responsibility:** Supervisors will provide in-service training to ensure all staff understand the requirements of this policy and procedure and

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understand the definitions. Supervisors will revisit this policy periodically but not less than annually for training and recommendations for improvement or additions. Supervisors will review applicable policies which include, but are not limited to MHDS A 5.2, 4.018, and 4.029 together with recognized clinical guidelines for the Assessment of Risk Factors with Authorized Staff periodically, but not less than annually. Supervisors will ensure all Authorized Staff have access to current emergency contact information in each center.

1005.6	Policy Cross Reference
1005.6.1	MHDS 4.003 Reporting of Serious Incidents
1005.6.2	MHDS 4.018 Admission Criteria and Process for Consumer Admission
1005.6.3	MHDS 4.029 Assessment of Suicidality
1005.6.4	MHDS 4.030 Basic Documentation Guidelines
1005.6.5	Medicaid Services Manual Chapter 400.6H.3
1005.8	Attachments
1005.8.1	RS1005A – APPLICATION, CERTIFICATION, AND MEDICAL CLEARANCE FOR EMERGENCY ADMISSION OF AN ALLEGEDLY MENTALLY ILL PERSON TO A MENTAL HEALTH FACILITY
1005.8.2	RS1005B - SADPERSONS Suicide Risk Assessment
1005.8.3	RS1005C - Folstein Mini Mental Status Exam

Department of Health and Human Services Division of Mental Health and Developmental Services Rural Services

Attachment RS1005A:
Application, Certification, and Medical Clearance for Emergency Admission of an Allegedly Mentally III Person to a Mental Health Facility

APPLICATION, CERTIFICATION, AND MEDICAL CLEARANCE FOR EMERGENCY ADMISSION OF AN ALLEGEDLY MENTALLY ILL PERSON TO A MENTAL HEALTH FACILITY

Definition of Mental Illness, NRS.433A.115:

As used in NRS 433A.120 to 433A.330, inclusive, unless the context otherwise requires, "mentally ill person" means any person whose capacity to exercise self-control, judgment and discretion in the conduct of his/her affairs and social relations or to care for personal needs is diminished as a result of mental illness to the extent that (s)he presents a clear and present danger of harm to self

or others, but does not include any person in whom that capacity is diminished by epilepsy, mental retardation, dementia, delirium, brief periods of intoxication caused by alcohol or drugs or dependence upon or addiction to alcohol or drugs unless a mental illness that can be diagnosed is also present which contributes to the diminished capacity of the person.

I have reason to believe that is a mentally ill person as follows.		
A person		thers, if, within the preceding 30 days, (s)he has, as a result of mental illness (Check
□ (a)	self-protection or safety due to mental illness, and if the bodily injury or physical debilitation will occur within	need for nourishment, personal or medical care, shelter, ere exists a reasonable probability that death, serious
□ (b)	•	ed acts in furtherance of a threat to commit suicide and if there exists a reasonable is admitted to a mental health facility pursuant to the provisions of NRS 433A.120 to d; or
☐ (c)		or committed acts in furtherance of a threat to mutilate self and, if there exists a ss (s)he is admitted to a mental health facility pursuant to the provisions of NRS ent is provided.
\Box (d)		any other person, or made threats to inflict harm and committed acts in furtherance of cy that (s)he will do so again unless (s)he is admitted to a mental health facility pursuant sive and adequate treatment is provided.
		psychologist, social worker, registered nurse, clinical professional
counselo		Resources, \square an officer authorized to make arrests in the state of Nevada, or
⊔ ma	rriage and family therapist. Current Nevada license number:	Badge number:
Person c	ompleting form:	
	Date	Time

APPLICATION, CERTIFICATION, AND MEDICAL CLEARANCE FOR EMERGENCY ADMISSION OF AN ALLEGEDLY MENTALLY ILL PERSON TO A MENTAL HEALTH FACILITY

PATIENT NAME:					
433A.165 EMERGENCY ADMISSION: EXAMINATI HEALTH FACILITY.	ON REQUIRED BEFORE	E PERSON MAY BE ADMITTED TO A MENTAL			
facility pursuant to NRS 433A. 160, (s)he must: a. First be examined by a licensed physician, physician is authorized to conduct such an examination to determine require immediate treatment, and	a. First be examined by a licensed physician, physician assistant or advanced practitioner of nursing at a location where a practitioner is authorized to conduct such an examination to determine whether (s)he has medical problems, other than a psychiatric problem which				
MEDICAL CLEARANCE: MUST BE COMPLETED I ATTACHED.	IN ITS ENTIRETY AND A	A COPY OF THE EXAMINATION REPORT			
On the basis of my personal examination of this alleged o'clock, a.m./p.m., this person has no medical disorder of treatment.	ly mentally ill person on _ or disease other than a psyc	day at chiatric problem that requires hospitalization for			
Name of examining medical professional:(Print	Current	Nevada license number:			
Signature:	Date:	Time:			
CERTIFICATION: Describe in detail the behave and a danger to self or others as described in NRS 43. I have personally observed and examined this allegedly person is likely to harm self or others. My opinions and diagnosis to describe behaviors):	33A.330. mentally ill person and have				
I am currently licensed in the state of Nevada as a □ psy □ A licensed psychiatrist or psychologist is not available Name of examiner: (Print)	le. I am a licensed physicia	ın. License#			
(Print) Signature:	Date:	Time:			
DISCHARGE: I have personally observed and examin no longer a danger to self or others as a result of mental reasons:	illness. My opinions and c	onclusions are based on the following facts and			
I am currently licensed in the state of Nevada as a phys Person completing form:					
SignatureD					

Department of Health and Human Services Division of Mental Health and Developmental Services Rural Services

Attachment RS1005B: SADPERSONS Suicide Risk Assessment

Rural Services SAD PERSON Suicide Risk Assessment

Nar	me:	Date:	Time:
	Sex (M=1)		
	Age($<25 \text{ or } >45 = 1$)		
	Depression		
	Sleep:		
	interests.		
	Guilt/Worthlessness:		
	Energy:		
	Energy:Concentration:		
	Appetite:		
	Psychomotor Ag/Ret:		
	Previous Attempts / Family History Su Ethanol or other Drug abuse Rational thought loss (including, but no Production Continuity Preoccupations Ideas of reference Attention/Concentration/Planning		
	Social Supports Lacking		
	Organized Plan		
_	Firearms?		
	No Spouse = 1		
	Sickness/Illness/Surgery/Pain		
	Medications:		
Not	tes:		

0-2 = follow-up

3-4 = get help

5-6 = protective steps

7-10 = hospitalize

Note: In rural areas access to firearms should be specifically assessed and interventions noted as appropriate, particularly with males. Reasons for living or dying should be assessed. Reasons for living may mitigate against suicide risk.

<u>Top reasons for living:</u> Family, Future, Specific plans or goals, enjoyable things, friends, self, responsibility to others, religion.

Top reasons for Dying (risk): Escape, General descriptors of self ("worthless, awful"), others relationships (want to stop hurting others, or retribution), Feeling hopeless, escaping pain, feeling alone, escaping responsibilities, escaping past, religion (want to meet God)

Department of Health and Human Services Division of Mental Health and Developmental Services Rural Services

> Attachment RS1005C Rural Services: Folstein M.M.S.E.

Rural Services: Folstein M.M.S.E.

Nar	ne:			Age: D.O.B
Plac				Date: Time:
Ask	Client h	is/h	er:	
Nar	ne:			Date: Completed By:
	Maximum			Total:
	Maximum Correct Score		ient's core	Orientation
1)		(`	What is the: Date, Day of the week, Month,
1)	5	()	Season Year ?
2)	5	()	Where are we: Name of Country, Province, CityPlace (street)
2)	3	(,	, 1 race (street) , 1 root (flouse π/Αριπ)
				Registration
3)	3	()	Name 3 objects (ex: house, tree, car). Take 1 second to say each. Then ask the client all 3 after you have said them. Give 1 point for each correct answer. Then repeat them until he learns all 3. Count trails and record. Trails:
				Attention and Calculation
4)	5	()	Serial 7's
				100-7=, $93=$, $86=$, $79=$, $72=$, 65 . One point for each correct answer. (Alternatively spell "WORLD" backwards).
				Recall
5)	3	()	Ask for objects: House, Tree, Car
,	J	(,	Language
6)	9	()	Name a pencil, and watch (2 points)
-,			,	Repeat the following: "NO IFS, ANDS OR BUTS" (1 Point)
				Follow a 3 – stage command:
				"Take the paper in you right hand, fold it in half, and put it on the floor."(3 points)
				Read and obey the following: "Close your Eyes"(1 point)
				Write a sentence (1point):
				Copy design (1 point):
Cor	nments:_			