

TO BE RESCINDED

5122-29-10

Crisis intervention mental health service.

- (A) Crisis intervention is that process of responding to emergent situations and may include: assessment, immediate stabilization, and the determination of level of care in the least restrictive environment in a manner that is timely, responsive, and therapeutic.

Crisis intervention mental health services need to be accessible, responsive and timely in order to be able to safely de-escalate an individual or situation, provide hospital pre-screening and mental status evaluation, determine appropriate treatment services, and coordinate the follow through of those services and referral linkages.

Outcomes may include: de-escalating and/or stabilizing the individual and/or environment, linking the individual to the appropriate level of care and services including peer support, assuring safety, developing a crisis plan, providing information as appropriate to family/significant others, and resolving the emergent situation.

- (B) Crisis intervention mental health service shall consist of the following required elements:

(1) Immediate phone contact capability with individuals, parents, and significant others and timely face-to-face intervention shall be accessible twenty-four hours a day/seven days a week with availability of mobile services and/or a central location site with transportation options. Consultation with a psychiatrist shall also be available twenty-four hours a day/seven days a week. The aforementioned elements shall be provided either directly by the agency or through a written affiliation agreement with an agency certified by ODMH for the crisis intervention mental health service;

(2) Provision for de-escalation, stabilization and/or resolution of the crisis;

(3) Prior training of personnel providing crisis intervention mental health services that shall include but not be limited to: risk assessments, de-escalation techniques/suicide prevention, mental status evaluation, available community resources, and procedures for voluntary/involuntary hospitalization. Providers of crisis intervention mental health services shall also have current training and/or certification in first aid and cardio-pulmonary resuscitation (CPR) unless other similarly trained individuals are always present; and

(4) Policies and procedures that address coordination with and use of other community and emergency systems.

- (C) Crisis intervention mental health service shall consist of the following elements when clinically indicated:
- (1) A face-to-face crisis assessment shall be conducted by an eligible clinician and shall include:
 - (a) Understanding the presenting crisis;
 - (b) Risk assessment of lethality, propensity of violence, medical/physical conditions including alcohol/drug screen/assessment, and support systems;
 - (c) Mental status;
 - (d) Consumer strengths; and
 - (e) Identification of treatment needs and level of care determination; and
 - (2) A crisis plan will be established that includes referral and linkages to appropriate services and coordination with other systems. The crisis plan should also address safety issues, follow-up instructions, alternative actions/steps to implement should the crisis recur, voluntary/involuntary procedures and the wishes/preferences of the individual and parent/guardian, as appropriate.
- (D) Documentation shall include the elements of the overall assessment of the crisis and intervention.
- (E) Crisis intervention mental health service shall be provided and supervised by staff who are qualified according to rule 5122-29-30 of the Administrative Code.

Effective:

Five Year Review (FYR) Dates: 04/14/2017

Certification

Date

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