

ADULT AND CHILDREN OUTPATIENT SERVICE WAITLIST

GUIDING PRINCIPLE

We are committed to a culture of recovery throughout our systems of care, in our interactions with one another, and with those persons and families who trust us with their care.

OVERVIEW

The Department of Mental Health and Substance Abuse (DMHSA) has developed and implemented a system for maintaining waitlists for its adult outpatient services and children outpatient services. When there is waitlist for services, the Department is committed to providing a suitable alternative service so that consumers can be seen at appropriate levels of frequency, regardless of the availability of the full range of services.

DEFINITIONS

- **Waitlist Manager Includes:** (1) The staff member or his/her designee who manages the adult's outpatient service waitlist and (2) the staff member or his/her designee who manages the children's outpatient service waitlist.
- **Emergency:** A situation in which an individual is experiencing a serious mental illness, emotional disturbance or has a developmental disability and one (1) of the following applies:
 - The individual can reasonably be expected within the near future to physically injure him/herself or another individual, either intentionally or unintentionally; or
 - The individual is unable to provide him/herself food, clothing, or shelter or attend to basic physical activities such as eating, toileting, bathing, grooming, dressing, or ambulating, and this inability may lead in the near future of harm to the individual or to another individual; or
 - The individual's judgment is so impaired that he/she is unable to understand the need for treatment and in the opinion of the mental health professional, his/her continued behavior as a result of the mental illness, developmental disability or emotional disturbance can reasonably be expected in the near future to result in physical harm to the individual or to another individual.
- **Urgent:** A situation in which an individual is determined to be at risk of experiencing an emergency situation in the near future if he or she does not receive care, treatment, or support services.
- **Routine:** A situation where the individual appears to have mental health, developmental disability, and/or substance use disorder needs that do not meet the criteria for emergent or urgent.



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- **Suitable Alternative Service:** Any service that does not have a waitlist that will benefit the consumer while he/she is on the waitlist for a service.

STANDARDS OF CARE

- The waitlist protocol organizes and provides timely access to clinically indicated services provided by the Department.

- The waitlist serves as a planning tool to identify and document the need for additional services to meet the needs of individuals receiving services provided by DMHSA.

- When a referral for a service with a waitlist is emergent or urgent, the consumer will receive immediate attention by the waitlist manager in collaboration with the consumer's treatment team or lead provider.

- Under no circumstances will the speed or type of placement be governed by anything other than the interest of the consumer being placed.

- All consumers on the waitlist must be an active consumer who receives a service at least once every ninety (90) days.

- Anytime a suitable alternative service can be provided while a consumer is waiting for a service, this approach shall be utilized (i.e., psychoeducation, psychological services, etc.).

- The waitlist protocol ensures that DMHSA can provide adequate, appropriate, and timely occupational therapy, physical therapy, speech therapy, or physical assistance support services that meet the individualized needs of the consumers.

SERVICES MAINTAINING A WAITLIST

- Adult Outpatient Services - (List maintained by the Clinical Director)
- Children's Outpatient Services - (List maintained by Children and Adolescent Service personnel)

PROTOCOL

Making a Referral for a Service with a Waitlist:

- Once a consumer has a completed intake assessment and signed an informed consent for evaluation, treatment, and services, any DMHSA professional involved in the care of the consumer may complete an internal referral for service form (IRSF).
- Professional judgment shall not be influenced by the availability of services.

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- To complete "Section #2. Indicate Referral" on the IRSF, the referring professional shall use the Waitlist Repository and/or their knowledge about services with a waitlist.
- If there is a waitlist for the requested service or the referrer is unsure (i.e., don't have access to a computer when making the referral, etc.) if there is a waitlist, the referrer may list a suitable alternative service (i.e., psychological services, group counseling, etc.), if appropriate.
- If a suitable alternative is identified, a copy of the IRSF shall also be given to the supervisor of the suitable alternative service.

Priority Ranking Assessment:

- The referrer shall complete the priority ranking assessment when the referral is for a service that currently has a waitlist.
- The referrer shall also document additional factors such as homelessness or a recent discharge from the inpatient unit that may affect the consumer's priority level.
- The priority level shall be reflective of the results of the priority ranking assessment and clinical judgment.

Status of Referral:

- The status of the referral shall be reflective of the priority level (i.e., if the priority level is high, the referral status most likely will be emergent).
- The referrer shall send the original IRSF to the supervisor of the referred service based on the emergent, urgent, or routine timelines and place a copy in the consumer's chart.

Receiving Supervisor Responsibilities:

- When a supervisor receives a referral, he/she must complete the Receiving Supervisor Disposition portion of the form within the specified time limits (i.e., if the referral is emergent, the supervisor has 1 working day to make a disposition).
- If the supervisor accepts the referral and there is a waitlist for the requested service, the supervisor shall forward a copy of the accepted referral by the next working day to the appropriate waitlist manager and place a copy in the consumer's chart.

Waitlist Manager Responsibilities:

- The waitlist manager shall add the consumer and the corresponding information to the appropriate waitlist (i.e., if the request is for individual counseling, the consumer shall be added to the Adult Outpatient Services: Counseling Waitlist) by the first (1st) working day following the receipt of the accepted referral.

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- The waitlist manager shall complete the Waitlist Manager Disposition portion of the IRSF, retain a copy, give a copy to the receiving supervisor and place the original on top of the consumer's chart.
 - Staff shall notify medical records personnel so they can flag the chart (i.e., colored sticker on the front of the chart).
 - The purpose of flagging the chart is so whenever a provider is providing services to a consumer with a flagged chart, the provider can inform the consumer of his/her current position on the waitlist and document if the consumer wishes to stay on the waitlist or would like to be removed (i.e., they no longer need the service, other services are sufficient, etc.).
 - The provider shall email the appropriate waitlist manager.
 - The email shall state:
 - The date of contact
 - The disposition. (i.e., remain on the waitlist, change ranking due to current needs, remove from the waitlist, etc.)
 - If the consumer requests to be removed from a waitlist, the provider shall have the consumer sign the Request Removal Form a Waitlist Form and place the original in the consumer's chart.
 - The waitlist manager is responsible for assigning personnel to notify the consumer or legal guardian, either in-person, over the phone, or by mail, of their initial placement on a waitlist within a reasonable amount of time.
 - This contact shall be recorded in "Date of Last Contact Regarding Placement" column on the appropriate Waitlist Sheet.
 - Each waitlist manager shall maintain the appropriate Waitlist Sheets (i.e., the waitlist manager for adult outpatient services shall maintain adult counseling, nursing, healing hearts, drug and alcohol, psychiatry, psychology, social work, therapy, and nutrition services) within the Waitlist Tracking Workbook.
- Maintaining the Waitlists:
- The Waitlist Tracking Workbook shall incorporate all of DMHSA's services that have a waitlist and shall be utilized as a living document, up-to-date and reflective of the most current data.
 - Upon receipt of an accepted referral, the Waitlist Tracking Workbook shall be reviewed and updated immediately or by the next working day by the waitlist manager.
 - The Waitlist Tracking Workbook is an Excel workbook that consists of a "Face Sheet" and additional sheets for each division and specialty service provided by DMHSA.

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- The Waitlist Tracking Workbook shall be available on a shared drive so all DMHSA staff can be aware when a specific service is at capacity so that staff can use their professional judgment about the appropriateness of a referral and inform the consumer about the availability of the service and possible alternatives if the desired service has a waitlist.
 - The waitlist managers shall up-date and maintain the Waitlist Tracking Workbook including the Face Sheet.
 - The Face Sheet is a summary of all the services that currently have a waitlist and the total number of consumers on that particular waitlist.
 - Staff will reference the Face Sheet when completing an IRSF and determining if the requested service has a waitlist.
 - The initial placement of consumers and changes in the ranking order of consumers on the waitlist are decided by the appropriate waitlist manager, in consultation with the consumer's treatment team or lead provider, when appropriate, and is based on the priority ranking assessment and clinical judgment.
 - The waitlist managers shall give the DMHSA Director a monthly report regarding the waitlists, including the number of consumers placed, the number of consumers waiting for services, etc.
 - Additionally, the Director can access the repository at anytime to update him/herself on the flow of the waitlists.
- Prioritization:
- The Department has establish a system for determining priorities within the adult and children outpatient service waitlists, so it can be determined at any time, who is next in line to receive a service.
 - The waitlist shall be prioritized according to urgency of consumer need and secondly by the length of time on the waitlist.
 - When a referral for a service with a waitlist is emergent or urgent, the consumer will receive immediate attention by the waitlist manager in collaboration with the consumer's treatment team or lead provider.
 - In some instances, the consumer will immediately begin receiving services and not be placed on a waitlist.
 - If the consumer does not begin receiving the service(s) immediately, the treatment team or lead provider and waitlist manager will work together to identify suitable alternative services to meet the immediate needs of the consumer and the consumer will be moved to the highest priority and next for placement.

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- The urgency of need is ranked by the following:
 - Extent to which the consumer is involved in the criminal justice system.
 - The extent to which the consumer experiences self-harming thoughts and/or behaviors.
 - The extent of aggressiveness in interactions with others.
 - Extent to which the consumer performs cognitive tasks and experiences symptoms such as, but not limited to, confusion, poor problem solving, and impaired judgment.
 - The rate of the severity of the consumer's mental health symptoms.
 - The extent to which the consumer is able to carry out activities of daily living, despite the presence of mental health symptoms.
 - If a consumer is currently on the Inpatient Unit, anticipating discharge from the Inpatient Unit or discharged within the last ten (10) days from the Inpatient Unit.
 - Other information that may affect the level of need such as frequency of homelessness, availability of a caregiver, etc.
- All else equal, the consumer waiting the longest will receive the next placement.
- Consumers on the Inpatient Units shall have the highest priority when they are referred to outpatient services that have a waitlist.

Notification:

- At every treatment plan review or at least every sixty (60) days, whichever is more frequent, the consumer's continued need for a waitlisted service will be evaluated.
- All consumers on the waitlist shall be seen/contacted by a treatment team member or lead provider for the purpose of determining the following:
 - The current needs of the consumer;
 - The continued interest/willingness of the consumer to receive services;
 - If the consumer has begun receiving alternative services and no longer needs placement; and
 - To inform the consumer of their current position on the Waitlist.
- If the consumer has not been contacted in sixty (60) days, the consumer's lead provider or his/her designee must make attempts to contact the consumer and document the results.
 - If the consumer does not have a working phone number and there are no alternative phone numbers listed, a letter will be sent by a treatment team member or lead provider to the consumer's last known address. The letter will indicate that if the consumer fails to respond within fifteen (15) working days from the date on the letter, they will be removed from the waitlist.

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- A copy of the letter shall be placed in the consumer's medical record.
- If the consumer has a working phone, although they do not answer, a treatment team member or lead provider must make two (2) more phone call attempts within five (5) days from the first phone call attempt, before sending a letter.
- Upon contact, the professional shall email the appropriate waitlist manager. The email shall state:
 - The date of contact
 - The disposition. (i.e., remain on the waitlist, change ranking due to current needs, remove from the waitlist, etc.)
 - If the consumer requests to be removed from a waitlist, the provider shall have the consumer sign the Request Removal Form and place the original in the consumer's chart.
 - If the contact is by telephone, the provider shall document the conversation on the form.
- Biweekly Reviews:
 - Every two (2) weeks the waitlist manager shall review their waitlist and identify the consumers who's "date of last contact regarding placement" is over sixty (60) days ago.
 - The waitlist manager shall send a list of the consumer's names to the referring supervisor.
 - The referring supervisor shall assign his/her staff to contact the consumers within the next five (5) working days according to the notification protocol.
 - The referring supervisor shall then forward the results of contact for each consumer on the sixth (6th) working day to the appropriate waitlist managers.
 - For any consumers that were mailed a letter as part of the attempt to contact them, the waitlist manager shall not remove him/her from the waitlist until the fifteen (15) days elapses.
 - If the fifteen (15) days elapses and there is no response the waitlist manager shall remove the consumer.
 - Any responses received within the fifteen (15) days of the letter being sent, stating that the consumer wishes to remain on the waitlist, shall be immediately forwarded to the waitlist manager so he/she does not remove the consumer.

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Removing Consumers from a Waitlist:

- The consumer's chart is closed or not seen within the last ninety (90) days
- The consumer has been placed in the appropriate service.
- The consumer is no longer eligible for the service(s).
- The consumer or their legal guardian requests to be removed from a waitlist.
- The consumer chose alternative services and no longer needs waitlisted service.
- The consumer has relocated off island for more than ninety (90) days.
- The consumer is deceased.
- The consumer is incarcerated more than ninety (90) days or sentenced for incarceration for more than ninety (90) days and is not receiving ongoing services at DMHSA.
- The consumer does not respond to the attempts to contact him/her (e.g. no response to phone calls or letter).

- As soon as a professional involved in the care of a consumer is aware that the consumer meets one (1) or more of the criteria to be removed from the waitlist, he/she shall email the appropriate waitlist manager the reason the consumer shall be removed.
 - If the consumer requests to be removed from a waitlist, the provider shall have the consumer sign the Request Removal Form a Waitlist Form and place the original in the consumer's chart.
 - If the contact is by telephone, the provider shall document the conversation on the form.
- Within one (1) working day of receiving the email, the appropriate waitlist manager shall consult if necessary, complete "Disposition Removed or Placed" column by identifying the reason they were removed and the date they were removed, and delete "Ranking" column.

Changing Ranking or Service with a Waitlist:

- Anytime a professional involved in the care of a consumer is aware that a consumer requires a change in ranking or change in service which also has a waitlist, due to improvement or regression in treatment, he/she shall email the appropriate waitlist manager an explanation, including all factors that affect the consumer's level of need.
- If there is a change in ranking, within one (1) working day of receiving the email, the appropriate waitlist manager shall consult if necessary, adjust the "Ranking" column, update the "Priority level" column, update the "Date of last contact regarding placement" column and make a comment, if necessary.
- If there is a change in service which also has a waitlist, within one (1) working day of receiving the email, the appropriate waitlist manager shall consult if necessary, update "Requested service" column, adjust the "Ranking" column, necessary, update "Requested service" column, adjust the "Ranking" column,

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update "Priority level" column if necessary, change "Total days on the waitlist" column to one (1), update "Date of last contact" column, and make a comment if necessary.

When a Waitlisted Service Becomes Available:

- As soon as a waitlisted service is available, the supervisor shall use the Waitlist Repository to identify the consumer who shall receive the available placement and the supervisor shall assign a staff member to ensure service provision begins.

- The supervisor shall email the appropriate waitlist manager to notify him/her that the particular consumer has been assigned a staff member and the waitlist manager shall update the waitlist by deleting "Ranking" column and updating "Disposition Removed or Placed, Date" column stating "placed" with the date.

- The assigned staff member shall notify the consumer that the service is now available and inform the consumer he/she will have fifteen (15) calendar days to start engaging in the service.
 - If the consumer does not engage in the service or the consumer or legal guardian declines the placement, the consumer will be removed from the service and the next consumer on the waitlist will be notified.

Contracted Providers Requirements:

- Contracted service providers must abide by the waitlist protocol to ensure the waitlists move at a reasonable pace and to ensure that services are provided in conformity with the Amended Permanent Injunction of 2005.

SUPERSEDES

- Wait List: 30/07.101; Effective 03/07/2012
- Referral List: 50.01.103; Effective 11/13/2009

FORMS

- Internal Referral for Service Form (IRSF)
- Request Removal From a Waitlist Form

REFERENCES

- Amended Permanent Injunction Filed June 30, 3005

APPROVED:	
Director	Wilfred Aftague
Date:	