



INTAKE PROTOCOL

GUIDING PRINCIPLE

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

OVERVIEW

Intake assessment is the “gateway” to receiving mental health services at DMHSA. It is confidential, respectful and conducted in a sensitive way in gathering important demographic and other pertinent information concerning the applicant which are necessary in order to adequately determine the issues, concerns and needs of the individual and how best to assist the individual.

The Intake assessment includes the Psychiatric/Mental Status Assessment, the Child Adolescent Needs and Strengths (CANS) for minors. It may also include Child Adolescent Service Intensity Instrument (CASII). If out of home placement is being conducted that these assessment tools are needed. DMHSA staff conducting Intake assessments is trained in the use of CANS and CASII and the mental status assessment. The Manuals on these assessment tools are available at the I Famagu'on-ta/Child-Adolescent Services Division.

STANDARDS OF CARE

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PROTOCOL

No person seeking mental health services will be denied mental health services because of race, creed, color or national origin. However, if the applicant for MH services has a private insurance other than the government funded insurances such as MIP or Medicaid, the applicant is encouraged to seek services with his/her private

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medical provider through his/her medical insurance for options. (DMHSA fee schedule, once implemented may allow for a sliding scale pay basis).

Intake Assessment must be completed prior to the person receiving DMHSA services.

PROCEDURE:

Intake assessment can be conducted according to the following:

1. Emergency Intake Assessment:

If the applicant for MH services is in an acute situation requiring immediate attention, the Intake interviewer must conduct a preliminary Intake assessment and right away consult with the staff psychiatrist on duty or on call to determine if the applicant needs immediate admission into the Inpatient Unit for safety purposes. A 72 hour hold is warranted if the person is at high risk of danger of harm to self, harm to others, and or gravely disabled and unable to care for self (may be in a psychotic state). The admitting staff psychiatrist will determine if the person needs to be sent to GMH for medical clearance before admission into the Inpatient Unit. A full intake assessment is completed once the client is admitted.

2. Orientation:

Prior to the scheduled Intake Assessment, the parents are required to attend an Orientation for Parents scheduled twice a week. The parent(s) may attend either Tuesday or Thursday afternoons to learn about the Services of I Famagu'on-ta/CASD and their role and responsibilities in their Child's treatment. Parents of minors admitted in the CIU are encouraged to attend the orientation if continued mental health services are required. Children and youth are also expected to attend an orientation on the same day as their parents but with the Youth Coordinator.

3. Intake Assessment by Appointment:

These appointments are conducted at the I Famagu'on-ta/CASD Office in Hagatna, J&G Commercial Center, Suite 107 F Chalan Santo Papa. Telephone: 477-5338/9. Information about what is required for the Intake Assessment will be provided to the parents when referral is made.

Upon completion of the Orientation, an Intake Assessment will be scheduled with an Intake Interviewer. Parents are asked to bring an identification card and legal document of guardianship. The minor's Identification Card, if available may be requested as well. The Intake Assessment includes psychiatric/mental status assessment the Child Adolescent Needs and Strengths (CANS) assessment tool

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and the Child Adolescent Services Intensity Instrument, if placement is being considered.

The Intake Assessment packet must contain the following in the client's clinical/medical records:

- 1) Filing order of an outpatient record: Left Side
 - a) Signature Sheet
 - b) Integrated Progress Notes
 - c) Referral Forms for Services
 - d) *Interagency Release of Information – FORM 1D
 - e) Admission Demographic Data, Mental Status Examination, Symptoms, Diagnosis and Recommendations.
 - f) Child Adolescent Needs and Strengths (CANS) (5 -11 or 12 – 18)
 - g) Child Adolescent Service Intensity Instrument (CASII) Worksheet
 - h) Psychosocial Questionnaire (Completion may be scheduled at a later date.)

- 2) Filing Order of an outpatient record: Right Side
 - a) Session Summary
 - b) **Consent to Release Confidential Information
 - c) Application for Mental Health Consumer Services
 - d) Safety Plan
 - e) Declination of Services
 - f) Consumer Rights and Responsibilities
 - g) Consumer Services Instructions

* To be updated annually.

**To be updated annually and when client turns 18 years of age.

After the Intake Assessment is completed and staffed with the Clinical Supervisor, the minor will be assigned a Social Worker, Care/Wrap Coordinator who will work with the child, youth and family. The minor will be scheduled for a psychiatric evaluation with a psychiatrist to ascertain the minor's diagnoses and necessary psychiatric services.

4. Conducting the Intake interview:

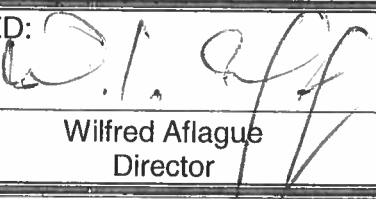

- a. Staff will ensure the Intake Assessment Packet is complete.
- b. Identify a room to conduct interview that is comfortable and private to ensure confidentiality of the client is protected. In the event that the room is not sound proof the CC/WC/SW will utilize a sound dampening mechanism.
- c. CC/WC/SW will begin the intake process as follows:
 - Greet and thank client and their family for being there.
 - Introductions of everyone present.
 - Explain services available at I Famagu'on-ta/Child Adolescent Services Division.

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- Review, discuss, and complete forms/documents in the Intake Assessment Packet.
- Request for copies of additional supportive documents, if applicable from other agencies/organizations in which the child is involved. Examples: IEP or other school reports, Court Documents, Medical History, Psychological/Psychiatric testing reports, or service plans currently being provided by other child-serving agencies.
- If the CC/WC/SW receives information that the client is at risk of harming themselves or others an immediate consult with their clinical supervisor is mandated. The following procedures are dependent on the results of the consult:
 - i. Client will be referred directly to DMHSA Medication Clinic for a Psychiatric Evaluation.
- d. A safety plan will be developed and immediately implemented.
- e. If a client becomes physically or verbally aggressive the CC/WC/SW will follow the Policy and Procedure regarding Non-Violent Crisis Prevention and Intervention.
- f. Review and discuss the post intake process as follows:
 - Staffing/Consult with Supervisor.
 - Disposition: Case assignment and recommendation of services.
- g. Thank client and their family, give them contact information (business cards) and schedule next meeting.

An inactivity of the consumer's clinical/medical chart of six (6) months would require a new intake assessment for the consumer to resume clinical/medical services. This means that if the consumer is not receiving mental health services for six (6) months, the consumer's clinical/medical chart is automatically closed and would require a new Intake assessment. Please refer to the P&P: Closure of Clinical Records.

REFERENCES

APPROVED: 	Date: 
_____ Wilfred Aflague Director	_____