Process for Referral to the ER or Community Services Board

1. Medical staff inform caregiver that your child/teen needs to be taken to an emergency room (ER) or other mental health facility for evaluation. You may be asked to transport your child/teen directly to the ER for evaluation. Do not stop for food or for any clothing/supplies on the way. If your child/teen becomes unsafe in the car on the way, immediately pull over and call 911 for assistance. If you cannot transport your child/teen to the ER, or feel that you cannot do this safely, talk to your medical provider and a decision will need to be made about calling for ambulance or police assistance.

2. Medical staff will communicate with the appropriate individuals at the ER or mental health facility to inform them why they referred the child/teen for mental health evaluation. During the assessment, the referring medical staff member will be available to answer any questions that the ER/mental health facility staff may have. If assessed in the ER, patients must change into hospital gowns and may be asked provide blood and/or urine samples as a part of the assessment.

3. The evaluation may lead to further safety planning, risk assessment, and recommendations for specific outpatient or inpatient mental health treatment. If the ER/mental health facility staff recommend inpatient hospitalization, then the staff will search for an appropriate facility for the child/teen. The wait for admission to a mental health inpatient facility from the ER can be long, sometimes two to three days, due to the shortage of inpatient mental health beds for children/teens and the recent high demand.

What to Expect with a Hospital Stay

The average length of stay on an inpatient psychiatric unit ranges from five to seven days, which may feel short. The purpose of the hospital stay is to manage the acute crisis, with the goal of having children and teens return home and to outpatient services and supports as soon as they are able to. This is done by close monitoring and enhancing the ability to manage oneself better by means of providing a secure/safe environment to limit the risk of self-harm, suicide or harm to others, and by the use of medications/medication changes if needed.

Each inpatient facility has its own rules and regulations. The following things are general and may or may not apply to your child/teen based on the specific facility where your child/teen will be admitted.

Here is a list of some necessary items that your child/teen may need to bring:

- Pajamas and slippers
- Loose-fitting, comfortable clothes
- Basic toiletries such as a toothbrush
- Glasses
- Any current medical and mental health medications including doses (to show the intake/assessment staff)
- Several changes of underwear and other undergarments
- Several changes of clothes

Anything that might be used to commit harm or suicide isn’t allowed. This includes belts, razors, and shoes or clothes with strings or laces. The hospital will typically provide basic amenities such as towels, washcloths and soap. Once your child/teen arrives at the hospital, all belongings will be searched and may be washed. Below are some questions to ask at the treatment facility during the check-in process:

- Does your facility treat patients with my child’s specific diagnosis?
- If there are any health problems, will there be treatment for these as well?
- Does your facility require tests when admitted? If so, what are they?
- When will the initial evaluation take place?
- Who makes up our treatment team (psychiatric providers including psychiatrists and nurse practitioners, therapists and social workers)
- Will my child be seen by the treatment team on a regular basis?
- How can I contact my child’s treatment team?

**During the Stay**

At some point early on in your child/teen’s stay, your child/teen will undergo a complete physical examination to determine overall state of health. The information collected during this examination and the information collected during the initial evaluation will be considered when building the treatment plan. Below are some questions to ask regarding the stay at the treatment facility:

- When can family members visit? For how long?
- Will it be possible to make and receive phone calls? Are there restrictions on who my child can call and when?
- What clothes are acceptable to bring?
- How long will my child be at the facility? Who makes this decision?
- Will my child have to share a room with someone else? Can we request a single room?
- Will my child have a daily schedule or set times for activities, treatments and medication?
- What types of activities will my child be involved in?
- Is there a set bedtime or curfew? When will this be?
• When can parents/guardians talk to the treatment team?
• Will parents/guardians or my child be included in the treatment team meetings/discussions?
• Will we be able to discuss treatment with the treatment team? When? How often?
• Will my child (or my family) be advised of changes in treatment?
• Will there be family meetings? How often? Who will participate in those?
• Is therapy in a group setting or one on one? Is it part of the treatment plan?
• Will my child have to undergo tests while being treated? Can my child refuse these tests? What happens if my child refuses?
• Will my child be able to continue schoolwork while receiving inpatient care?
• Will my child be on medications? Which ones? What is the dosage?
• Will someone call me to obtain my consent for these medications?
• How will these medications help? Are they habit-forming? What are the side effects?
• How long will my child have to take these medications?

When Leaving the Hospital

If your child/teen was admitted voluntarily, you may have the option of checking out against medical advice. This means that if you feel your child/teen is ready to leave the hospital without a "green light" from your psychiatric provider, your child/teen may be allowed to go. Of note is that if you sign your child/teen out of the hospital against medical advice, then your outpatient providers and Inova Kellar Center may not continue to treat your child/teen because the recommendation was to complete an inpatient hospital stay. If the hospital team believes that your child/teen is in too much danger to be discharged against medical advice, then they may proceed with the process to obtain an involuntary detainment order for your child/teen to remain in the hospital.

If the hospitalization was court ordered, or if the child/teen was admitted involuntarily, your child/teen will need to complete an evaluation process to determine if your child/teen is well enough to care for himself/herself outside of 24-hour inpatient care. Every facility has different policies and procedures, so check with the facility in which your child/teen is seeking or receiving care. Below are some questions to ask regarding the discharge:

• Who will make the evaluation for my child’s discharge? When will this happen?
• What can we expect when my child is discharged?
• Will someone advise the child and parents about the need for further counseling or a medication schedule?
• What follow-up treatment is being recommended upon discharge from the hospital?
• Who will arrange those appointments? Can they be arranged before my child gets discharged from your facility?
• How soon after discharge can my child continue with school or schoolwork?