



SALISH BHO

INPATIENT POLICIES AND PROCEDURES

Policy Name: SINGLE BED CERTIFICATION APPROVAL **Policy Number:** 12.07

Reference: WAC 388-865-0526, RCW 71.05, 71.34

Effective Date: 2/2002

Revision Date(s): 6/2016; 6/2018

Reviewed Date: 6/2016; 6/2017; 6/2018

Approved by: SBHO Executive Board

CROSS REFERENCES

- Policy: Corrective Action Plan
- Policy: State Inpatient Billing Instructions

PURPOSE

The Salish Behavioral Health Organization (SBHO) shall ensure a mechanism to receive prior approval from the State of Washington and/or its designee for a thirty (30) day single-bed certification for individuals (adolescents and adults) on an initial, 90-day or 180-day legal hold residing in a facility that is not certified under WAC 388-865-0500.

Additional and concurrent certification may be required if an individual is awaiting placement for an extended period of time.

PROCEDURE

When a DCR determines an individual meets criterion for detention or revocation under RCW 71.05, the DCR should attempt to find placement for in a certified E&T facility. At a minimum, the DCR should exhaust the list of applicable hospitals and freestanding E&Ts in policy 12.08A, under the heading "Call before Initiating SBC." As indicated on the list, clinical judgement may preclude transfer to one of these hospitals when another, closer bed would be available soon.

If the DCR is not able to locate a bed in (at a minimum) one of these facilities, the DCR would then initiate the single bed certification (SBC) process. The DCR should follow the SBC process outlined in the DCR protocols, WAC 388-865-0526, and 71.05, including those changes made as a result of E2SSB 5649. DBHR rules allow the SBC to occur only when the hospital holding the individual agrees to provide treatment (see updated WAC 388-865-

0526). If the hospital refuses, DBHR will refuse to allow a SBC, and per WAC and 71.05, the detention cannot continue.

The following steps apply to all requests for involuntary treatment investigations occurring in hospital settings:

1. Availability of a bed does not influence the decision to conduct an investigation.
2. The DCR assesses the individual and determines if they meet criteria for involuntary treatment. The DCR does not complete detention paperwork until a bed is found or until the SBC process is accepted by the hospital where the individual is located.
3. If the individual meets detention criteria, the DCR attempts to locate a bed using the process outlined above and in the attached table.
4. If the DCR is unable to locate a bed, the DCR notifies the attending physician that the individual meets criteria but there are no beds available. The DCR requests the hospital to agree to provide treatment and allow a SBC. If the hospital agrees, the DCR completes the SBC form developed by DBHR and submits it per DBHR policy.
5. If the hospital does not agree, the DCR must confirm that there are no beds available from the remaining inpatient units on the list in policy 12.08A, under the column “*Call Before Initiating Boarding Notification*”.
6. If no beds are available, the DCR informs the hospital that a detention cannot occur. The DCR does not complete the detention paperwork. Document the assessment process on a face-to-face note, detailing the decision to detain the individual with the same language used for an initial detention. In the outcome section, use the following language, verbatim: *The respondent meets criteria for detention, per RCW 71.05/71.34. A bed search has found no appropriate psychiatric beds available or willing to accept the respondent. The hospital is unable or unwilling to provide the services required in WAC 388-865-0526. Therefore, the detention cannot commence and this DCR defers all further detention and treatment decisions to _____ Hospital.*
7. Leave a copy of the documentation with the emergency department per normal procedure. DCRs must ensure that all documentation gets entered into the agency’s electronic health record, including a note stating that documentation was left with the emergency department at the hospital.
8. The SBC form should still be submitted to DBHR using the current submission process, with “Hospital Refuses” written in the section where there is an attestation regarding the hospital’s agreement to provide treatment. If the SBC form is returned as “rejected” by DBHR, document the response in both the DCR record and in the hospital record. Keep a copy of the rejection for the DCR record.
9. NOTE: An individual can still have a single bed certification for medical reasons. Please follow the normal procedure and use the SBC request form when a person is detained to a medical unit due to medical issues.
10. **Only** when the DCR cannot find a bed and the hospital will not participate in the SBC process, the DCR must notify DBHR within one business day using the process developed by DBHR in response to E2SSB 5649.

MONITORING

This policy is a mandate by statute and contract.

1. This Policy will be monitored through use of SBHO:
 - Monthly analysis of Boarded and WSH Waiting List Report
 - Monthly analysis of WSH allocated utilization management reports
2. The SBHO may make site visits at any time to verify that the terms of the single bed certification are being met.
3. If a provider performs below expected standards during any of the reviews listed above a Corrective Action will be required for SBHO approval. Reference SBHO Corrective Action Plan Policy.