

HEADS UP...

TOPIC: Screening procedures

SETTING: Opioid Treatment Programs (OTPs) / Behavioral Health Care and Human Services (BHC) Program



Why is this important?

This Heads Up report focuses on moderate to high-risk survey observations that were scored during OTP surveys (note: while these findings were observed on OTP surveys, they are likely not limited exclusively to OTPs and may apply to other types of BHC organizations).

BHC accredited organizations are required to screen for suicide. The goal of screening (a process of determining whether individuals have certain risk factors associated with physical or behavioral health issues requiring assessment) and assessment is to determine the care, treatment, or services that will best meet the needs of the individual served/patient. An important component of screening is determining the risks of imminent harm to self and others (CTS.02.01.01). The information collected through screening and/or assessment is defined by the organization's policies and procedures and depends on the emergent needs of and the care, treatment, or services sought by the individuals served/patients. In order to provide quality care, treatment, or services, organizations need to look at their processes to ensure that screening procedures accurately and comprehensively collect risk related information that will help ensure a safe workplace and environment for all individuals served/patients.

Scope of the Problem:

Time period: **July 1, 2019 through September 30, 2020**

Number of full surveys performed for OTPs: 105

Number of surveys (for OTPs) with moderate to high-risk observations (CTS.02.01.01 EP 1): 12 (11%)

Relevant standard/EP: CTS.02.01.01 EP 1: The organization has a screening procedure for the early detection of risk of imminent harm to self or others. EP 1: The screening procedure determines the need for immediate intervention to protect the individual served or others.

Observations identified within a specific topic area may reveal systemic areas of improvement across the organization which might be reflected in additional standards/EPs: NPSG.15.01.01, EC.02.01.01 EP 13, CTS.01.03.01 EP 1 and 2

Sample survey observations and contributing factors

- Individual was not screened for risk of imminent harm to self or others.
- Lack of documentation that the organization conducted a sufficient screening procedure to determine the need for immediate intervention to protect the individual served/patients or others (e.g., non-lethal harm-self-cutting, fighting, aggression, etc.).
- There was documentation of data gathered regarding possible indicators for potential aggression but no determination of risk or action to be taken in response to level of risk.

Potential contributing factors:

- The current screening tool utilized did not ask about homicidal ideation and thoughts of self-harm.
- Leadership failed to ensure that screening procedures were in place.
- The organization's process lacked the defined required immediate actions/interventions or required clinical documentation/escalation.
- Staff was not comprehensively educated on existing policies and procedures, screening tools and clinical standard practices of intervention and clinical documentation.
- Counselors were not trained to determine the need for immediate intervention to protect the individuals served or others when there is early detection of risk to harm self or others. Counselors were not trained to include early detection of risk in future reassessments, treatment planning, and documentation.
- The documentation was collected but the clinicians weren't taking the next step and indicating an actual risk and whether there was a need for further assessment/evaluation.

How to identify potential problems in your organization

Review your policies and procedures

- ☐ Does the organization have a clearly defined screening procedure for the early detection of risk of imminent harm to self or others?
- ☐ Does the screening procedure outline the steps and criteria to determine the need for immediate intervention to protect the individuals served/patients or others?
- ☐ Does the organization develop a management plan, if screening is positive, that is seen through to completion regardless of whether this is accomplished via services provided directly on-site or by referral and care coordination?
- ☐ What training and education does staff receive in relation to early detection of risk of imminent harm to self or others? What training and education does staff receive in relation to determining the need for immediate interventions to protect the individuals served/patients and others? What training and education does staff receive in relation to security?
- ☐ What is in the policy and procedure regarding how staff maintain safety for themselves?
- ☐ For those determined to have an immediate need for intervention, what is your process to keep them safe until they get an appointment for further assessment/evaluation?
- ☐ Does the staff have appropriate resource for referring the individual to another organization if needed?

Interview staff

- ☐ Can staff describe the screening procedures for early detection of risk of imminent harm to self or others?
- ☐ When and how should screenings be conducted?
 - How are they documented?
 - What actions are implemented when potential risk factors are identified?
- ☐ Can staff demonstrate knowledge of required items/elements of the screenings and assessments?
- ☐ Do leaders provide appropriate oversight and ensure screening and assessments are completed?
- ☐ How were staff trained to deescalate a violent situation? How were staff trained to access emergency mental health services?
- ☐ Have the staff received training to handle an immediate crisis?

Assess your environment

- ☐ Monitor/trace the screening process to ensure that the necessary components are assessed, and the appropriate actions are implemented.
- ☐ Review screening tools for appropriateness and for required elements.

Evaluate implementation

- ☐ Review a sample of records to ensure that the documentation/evaluation accurately reflect your organization's procedures and processes.

What are some resources that can assist in mitigating risks in these areas?

- American College of Emergency Physicians. [Risk Assessment and Tools for Identifying Patients at High Risk for Violence and Self-harm in the ED](#). November 2015. Last accessed December 8, 2020. (Note: Tools starting on page 2)
- The Joint Commission. [Workplace Violence Prevention: Screening for the Early Detection of Risk of Harm to Self or Others](#). October 2017. Accessed December 8, 2020.
- Substance Abuse and Mental Health Services Administration (SAMHSA). [Screening, Brief Intervention, and Referral to Treatment \(SBIRT\)](#). 15 September 2017. Accessed December 8, 2020.
- [American Association for the Treatment of Opioid Dependence, Inc.](#) Accessed December 8, 2020.