
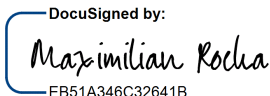


BHS Policies and Procedures

	City and County of San Francisco Department of Public Health San Francisco Health Network BEHAVIORAL HEALTH SERVICES	1380 Howard Street, 5th Floor San Francisco, CA 94103 415.255-3400 FAX 415.255-3567
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POLICY/PROCEDURE REGARDING: Medical Emergencies in Ambulatory Behavioral Health Centers

<p>Issued By: <small>DocuSigned by:</small>  <small>EB51A346C32641B...</small></p> <p>Maximilian Rocha, LCSW Director of Systems of Care</p> <p>Effective Date: 06/06/2023</p>	<p>Manual Number: 3.02-21.</p>
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Substantive Revision. Replaces Policy 3.02-21 dated July 25, 2017.

Equity Statement:

The San Francisco Department of Public Health, Behavioral Health Services (BHS) is committed to leading with race and prioritizing Intersectionality, including sex, gender identity, sexual orientation, age, class, nationality, language, and ability. BHS strives to move forward on the continuum of becoming an anti-racist institution through dismantling racism, building solidarity among racial groups, and working towards becoming a Trauma-Informed/Trauma Healing Organization in partnership with staff, clients, communities, and our contractors. We are committed to ensuring that every policy or procedure, developed and implemented, leads with an equity and anti-racist lens. Our policies will provide the highest quality of care for our diverse clients. We are dedicated to ensuring that our providers are equipped to provide services that are responsive to our clients’ needs and lived experiences.

Purpose:

The purpose of this policy is to outline the procedure for responding to medical emergencies in ambulatory behavioral health centers.

Scope:

This policy applies to all BHS and BHS-affiliated staff in specialty behavioral health (mental health and substance use disorder treatment) ambulatory care programs.

Policy:

Staff will provide emergency triage in the event of client/staff/visitor (for the purpose of this document, called “patient.”) medical emergencies that occur at ambulatory behavioral health facilities. All medical emergencies that occur in the behavioral health center will be evaluated to optimize the patient’s well-being. The goal is to get qualified emergency personnel to the patient as soon as possible.

Procedures:

1. If a medical emergency occurs when medical staff are present (e.g. physicians, registered nurses, nurse practitioners, clinical pharmacists or psychiatric technicians), a medical staff member will take the lead of the emergency situation and provide immediate assistance.
2. If no medical staff are present, then the lead staff member on duty will take the lead of the emergency situation and provide immediate assistance.
3. Other clinical staff shall assist with ensuring that the area where the emergency is taking place is cleared. Staff shall follow instructions from the lead staff member.
4. If the patient appears to be having a medical emergency, personnel shall initiate a call to 911. The lead staff member will ensure that reception staff or other staff members are prepared to direct emergency medical personnel to the patient's exact location.
5. If the medical emergency is a suspected opioid overdose, the protocol for assessment and implementation of naloxone overdose reversal should be initiated in addition to the above.
6. In those instances where it is clear that no medical emergency exists, management staff at the behavioral health center shall be contacted to determine what other resources are needed.
7. Lead staff shall complete any required reporting such as the BHS Quality of Care report, as applicable.

Contact Person:

BHS Chief Medical Officer

Distribution:

BHS Policies and Procedures are distributed by Quality Management and Regulatory Affairs

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