

# Surge Management: Medicine Program Unit to Mental Health Program 8C Unit

## Site Applicability:

8C Mental Health Program, St. Paul's Hospital

Medicine Program, St. Paul's Hospital

## Practice Level

RN, RPN and Physician

## Need to Know

- This guideline applies to patients admitted to the Medicine program at St. Paul's Hospital (SPH) that will temporarily be transferred to 8C in times of program surge
- 'Off-service' refers to a patient who is receiving treatment/care on a unit outside of the the admitting service
- Decisions to transfer must be approved by the Patient Care Managers (PCMs) and/or Program Directors of both Medicine and Mental Health
- *Off service bed utilization will be reassessed daily with the goal to returning patients to their admitting service*

## Decision to Transfer:

At the morning Bed Access meeting, all available bed options are discussed. The Mental Health and Medicine program Bed Coordinators review the need for transferring admitted Medicine patients to 8C. The decision to transfer must be approved by the Patient Care Managers (PCMs) and/or Program Directors of both the admitting program and the mental health program (MHP). This decision must be made during the usual hours of the Mental Health Bed Coordinator and PCMs (0800 to 1700) to help facilitate the transfer.

## Transfer Criteria:

If there are funded bed heads (does not include green space or OCP beds) available on 8C and the patient:

- Medical stability based on the availability of equipment on the unit
  - Appropriate for the patients' physical health, degree of frailty and cognitive capacity - patient who requires frequent use of a ceiling lift, regular suctioning or continuous oxygen therapy cannot be supported due to equipment available in rooms
- Aware and agreeable to the transfer
  - Patients currently cared for by the Psychiatry Consult Liaison Team should be prioritized for transfer

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## Protocol

Once the decision is made to transfer an off-service patient to a funded bed head on 8C program unit, the following steps should occur:

	<b>Sending Unit - Medicine program</b>	<b>Receiving Unit 8C - Mental Health program unit</b>
Preparing to Transfer	<b>Bed Coordinator</b> <ul style="list-style-type: none"> <li>Liaise with the Mental Health and Medicine Bed Coordinators to select appropriate patients to be cared for in a mental health inpatient unit (refer to transfer criteria above)</li> <li>Referring Bed Coordinator to inform and discuss transfer options with the off-service patient(s) and family.</li> <li>Discuss the transfer plan with the Mental Health inpatient unit Clinical Nurse Leader (CNL)</li> </ul>	<b>Patient Care Manager's and Bed Coordinator</b> <ul style="list-style-type: none"> <li>Liaise with the Mental Health and Medicine Bed Coordinators to select appropriate patients to be cared for in a mental health inpatient unit (refer to transfer criteria above)</li> <li>Contact the CNLs and PCMs to inform the unit of the pending transfer(s)</li> </ul>
	<b>PCMs and CNLs</b> <ul style="list-style-type: none"> <li>Sending unit CNL to inform off-service PCM</li> <li>Sending unit CNL to liaise with staffing clerk to find a medical nurse to staff the off service beds within the Mental Health inpatient unit and informs Mental Health PCM and Mental Health Bed Coordinator when the nurse is found.</li> <li>Sending CNL to liaise with receiving CNL to assess patient care needs and ensure all necessary safety equipment is accessible on the mental health inpatient unit (e.g. portable oxygen and/or suction is available, etc.).</li> <li>Inform the attending physician that the patient will be transferred to a mental health inpatient unit and will continue to provide care and follow the patient once transferred</li> </ul>	<b>CNLs</b> <ul style="list-style-type: none"> <li>Cohort mental health patients if needed</li> <li>Ensure all necessary safety equipment is accessible on the mental health inpatient unit (i.e. wall mounted or portable oxygen, portable suction is available, etc.)</li> <li>Off-service patient(s) are assigned to the Medicine program nurse as the primary nurse</li> <li>Arrange for 8C RNs/RPNs to provide break coverage for the Medicine program nurse</li> <li>Provide unit tour and orientation to Medicine program nurse               <ol style="list-style-type: none"> <li><b>Safety</b> <ul style="list-style-type: none"> <li>Provide temporary access to locked unit</li> <li>Code Blue and emergency equipment (no Code Blue buttons available in patient rooms)</li> <li>Personal Protection Device (PPD)</li> <li>Communication on unit (no call bells are available in patient rooms)</li> </ul> </li> <li><b>Unit tour</b> <ul style="list-style-type: none"> <li>Omniceil and other medication/medical supplies</li> </ul> </li> <li><b>Roles &amp; Responsibilities</b> <ul style="list-style-type: none"> <li>Advise the Medicine program nurse to direct any inquiries from mental health program patients to their mental health nurse</li> <li>Break coverage and timing</li> </ul> </li> </ol> </li> </ul>

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	Sending Unit	Receiving Unit
Transfer	<b>Medicine Program Nurse</b> <ul style="list-style-type: none"> <li>Provide written and verbal handover as per <a href="#">Nursing Handover and Whiteboards</a> guideline</li> <li>Arrange safe patient transfer once Medicine nurse on mental health unit is ready. Certified patients must be transferred with a Security Officer and accompanied by a nurse.</li> <li>Send the patient's belongings and medications on transfer.</li> <li>Send the medication administration record (MAR), kardex and chart binder with the patient (return to the sending unit upon transfer or discharge).</li> </ul>	<b>Medicine Program Nurse</b> <ul style="list-style-type: none"> <li>Call the sending Medicine nurse for a comprehensive verbal handover report</li> </ul>
	<b>Admitting Physician/MRP</b> <ul style="list-style-type: none"> <li>Assess the off-service patient prior to transfer to 8C and document in health record</li> </ul>	
After Transfer	<b>Admitting Physician/MRP</b> <ul style="list-style-type: none"> <li>Continue to care for the patient once transferred</li> <li>If the off-service patient requires a psychiatric consult while on the mental health inpatient unit, the MRP can request a consultation via Sunrise Clinical Manager (SCM) by the Consultation Liaison Psychiatry Service.</li> </ul>	<b>Medicine Program Nurse</b> <ul style="list-style-type: none"> <li>Assume responsibility as primary nurse for the Medicine patient(s) on 8C</li> <li>Orient the off-service patient to 8C RN/RPN to support patient orientation as needed</li> </ul>
	<b>Allied Health (SW/OT/PT/SLP/Dietitian)</b> <ul style="list-style-type: none"> <li>Allied health from sending unit will continue to follow unless determined otherwise in consultation with receiving unit</li> </ul>	
<b>Re-assess</b> the need to use mental health inpatient beds for off-service patients during the <b>daily bed meeting</b> with the goal to return patients to their admitted service as soon as possible.		

### Off-Service Patient Information and Education:

Safety for patients and staff is a priority on all inpatient psychiatry units. All staff are required to work in partnership with patients and families to support a safe, therapeutic, person and family centred environment. Nursing staff should review the following important information with off-service patients:

- Belongings – [Safe Keeping of Patient Valuables](#)**
  - We are committed to harm reduction and are mindful of the items kept on the unit. When not in use, patients may be asked to send home or store on the unit items which may pose a safety risk to others (i.e. belts, cords, and/or substances).

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- Belongings, including electronic devices, can be kept in the patients' possession and used at the bedside (not in common areas) to support respectful shared space and careplanning
- **Family Presence (Visitation)** – [Family Presence \(Visitation\)](#)
  - We encourage and invite family members to participate in care planning and decisions.
  - Family presence is balanced with patient and staff safety at all times.
- **Unit Access/Exit**
  - All mental health units are locked; therefore, anyone entering or exiting the unit will require assistance (using doorbell) from staff.

**Clinical Nursing Support:**

*Between the hours of 0730 to 1530 Monday to Friday on non-stat days*

- Non-Urgent: Contact the Medicine Nurse Educator (locals: 63788, 69009 and/or 66284) for support/resources in caring for the for the Medicine program off-service patients on 8C.
- Urgent: Contact the Critical Care Outreach Team (CCOT) (604 319 3536)

*Between the hours of 1530 to 0730 and/or on stat days:*

- Non-Urgent and/or Urgent: Contact the Critical Care Outreach Team (CCOT) (604 319 3536)

**Documentation:**

- Document transfers and ongoing patient care for Medicine program patients will remain consistent with their current documentation practice completed on Medicine program units.

**Related Documents**

1. [B-00-16-10003](#) - Overcapacity Protocol St. Paul's Hospital
2. [B-00-16-10025](#) - Surge Action Plan for Transfer of Admitted Patients from the Emergency Department
3. [B-00-07-10003](#) – Surge Plan Mental Health Units: Increasing Bed Capacity
4. [B-00-07-10078](#) - Nursing Handover and Whiteboards
5. [B-00-11-10200](#) - Family Presence (Visitation)
6. [B-00-11-10148](#) - Safe Keeping of Patient Valuables
7. [B-00-16-10013](#) - Valuables and Belongings in the Mental Health Unit
8. [B-00-11-10123](#) – Alcohol and Substance Use: Inpatient Care at Mount St. Joseph's and St. Paul's Hospitals
9. [B-00-11-10125](#) – Philosophy of Care for Patients and Residents Who Use Substances
10. [B-00-13-10059](#) - Managing Unsettled/Challenging Behaviours: Least Restraint Approach/PHC Non-Residential Sites

**Definitions**

**Bed head:** a bed location designed for patient care.

**Funded bed head:** has allocated budget with staffing budgets based on the number of these.

**Green space:** unfunded bed with no allocated budget - may require additional staff to operate.

**OCP bed:** locations identified to be used only as part of the OCP. They may be unfunded bed heads or non-equipped locations i.e. hallways, lounges.

**Persons/Groups Consulted:**

- Bed Flow Coordinators, SPH
- Clinical Nurse Leader, Mental Health, SPH
- Clinical Nurse Leader, Medicine, SPH
- Nurse Educator, Medicine, SPH
- Patient Care Manager, Medicine, SPH
- Mental Health Quality and Practice Improvement Committee (QPIC)

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