

# Involuntary/Voluntary Psychiatric Hospitalization



- When The Child Welfare Professional is initially notified of an involuntary/voluntary psychiatric hospitalization (Baker Act/Marchman Act) episode, contact the facility. Obtain a status update and provide the facility with the youth's mental health history, current providers, current medications, and any needed documents.
- Inform your supervisor and about the incident and any information provided by the facility.
- The Child Welfare Professional or designee complete an incident report and submit to the supervisor or designee
- The Child Welfare Professional shall visit the youth at the facility within 24 hours of the episode.
- Participate in MDT Discharge staffing. The circumstance of the incident, recommendations for the well-being of the child, and a plan to meet the therapeutic needs will be discussed. The Embrace Families Clinical Coordinator assigned to the youth's CMA will schedule within 24 hours of notification and the staffing will occur no later than 72 hours of the notification.
- If notification is received after the child is discharged, and The Child Welfare Professional did not participate in the facilities discharge staffing, a MDT Discharge staffing will be scheduled by the Embrace Families Clinical Coordinator within 24 hours of notification and the staffing will occur no later than 72 hours of the notification.
- Upon release, The Child Welfare Professional will ensure the child has a scheduled 7 day follow up with a therapist or psychiatrist and that the child attends the appointment. The Child Welfare Professional will document the visit in the FSFN med tab. The Child Welfare Professional will consult with the Embrace Families Clinical Coordinator assigned to the youth if there are barriers to completing the 7 day follow up.
- If the child is prescribed new psychotropic medication, or any changes to the medication dosage occur, The Child Welfare Professional should follow the psychotropic medication process.