LOUISIANA STATE UNIVERSITY HEALTH SCIENCES CENTER-
SHREVEPORT

MANAGEMENT OF VIOLENT AND/OR COMMITTED PATIENTS

Purpose:
To provide guidelines for the management of violent and/or committed patients who present to LSUHSC-S with an Order of Protective Custody, an Emergency Commitment, a judicial commitment, and/or those patients who are violent.

Policy:
1. When violent and/or committed patients are brought to the ECC or Children's Health Clinic, responsibility for examination, psychiatric evaluation and appropriate disposition of the patient is placed directly upon the Health Sciences Center. Louisiana Public Law regarding Emergency Commitment (PEC) and Order of Protective Custody (OPC) relieves the police of any responsibility for the patient when the patient is delivered to a medical treatment facility. Therefore, if the patient is injured, leaves the hospital prior to evaluation, or injures someone else because we failed to meet obligations imposed upon the Medical Center by statute, LSUHSC-S may be individually and jointly liable for any injury or damage, which occurs.

2. These patients may enter the system in the following ways:
   a. Written order of the parish coroner or judge (commitment paper or emergency certificate) OPC; the patient with an order of protective custody (OPC) must be presented to the healthcare facility within 12 hours for evaluation. The medical staff must then complete the patient's evaluation within 8 hours after arrival.
   b. Request for protective custody by an official law officer/healthcare provider (RPC); "An official law officer may take a person into protective custody and transport him for medical evaluation when he has reasonable grounds to believe...that the person is acting in a manner dangerous to himself or others" (R.S. 28:53). A request for protective custody (RPC) must be completed with date, time, and signature of presenting officer.
   c. Referred by physician emergency certificate (PEC);

3. If the patient is in custody, the law enforcement officers shall remain with the patient at all times (reference Prisoner Policy 2.20).

4. The University Police Department (UPD) shall be notified and shall screen the patient for contraband. The Nursing and Medical Staff persons at the scene are responsible for subduing a violent or combative patient. If they are unable to do so, the UPD may be called to assist. Responsibility for medical management of a patient, including restraint when required, always rests with the clinic/emergency personnel. The role of UPD Officers is assistance.

5. Patient flow from the ECC and PCU to the Psychiatric Unit:
   If the Psychiatric Unit has an available bed and a direct admit from another facility adult patient has a PEC (physician’s emergency commitment) OPC (order of protective custody), CEC
(coroner’s emergency commitment) or judicial commitment, the ECC triage nurse completes a triage screening of the patient with vital signs. If the patient meets ECC Triage guidelines the patient is then transferred to the Psychiatric Unit and report is called.

If the Psychiatric Unit is full, immediately upon arrival to Triage/ECC, the patient shall be placed in appropriate treatment room for triage and Patient Processing will be notified to register the patient. The attending physician will be notified of patient arrival and the patient will be seen as quickly as possible. The patient will either remain in the ECC or go to the ECC Psych Crisis Unit once medically cleared.

The ECC Psych Crisis Unit (PCU) is dedicated to overflow psychiatry patients and is designed to house up to 20 patients.

The Psychiatry Attending or Resident determines the sequence of admission priority of patients from the ECC or PCU to the Psychiatric Unit based on severity of patient condition.

6. LSUHSC-S does not provide psychiatric services for persons under 18 years of age: For a child, after the Children’s Health Physician has determined that physical treatment is not required, the Psychiatry Physician on call evaluates the patient in Children’s Health Clinic to determine if placement is needed. The Children’s Health Clinic notifies the psychiatrist on call and/or Case Manager/Administrative House Manager to facilitate transfer to a juvenile facility if appropriate.

7. The Psychiatric Unit (Psychiatry 10th floor nursing station) shall be notified of the patient with a PEC, OPC, CEC or judicial commitment and/or violent patient in the ECC and are advised to be prepared to receive the patient.

8. If a psychiatric patient is being transported from any area on the LSU Campus to the Psychiatric Unit they must be accompanied by at least one or more Nursing Staff (RN, LPN, or Aide). However, responsibility for the patient’s care during transport remains with the clinical/technical medical person(s).

9. A staff member of the Psychiatric Unit shall remain with the patient while he/she is awaiting evaluation on the Psychiatric Unit.

10. The Psychiatrist shall evaluate the patient in appropriate surroundings. If the patient does not require hospitalization, personnel employed by the Psychiatric Unit will escort him to the front of the hospital. If the patient needs to be held in custody for pick-up by a custodial law enforcement agency, the patient will be held until custodial agency arrives to take custody of patient.

11. Upon decision to admit the patient by emergency certificate for inpatient treatment, the physician/nurse shall notify the Caddo Parish Coroner and provide the following information:
   a. the person’s name and address
   b. date of birth
   c. name of certifying physician
   d. date and time of admission
   e. the name and address of the treatment facility
f. date and time emergency commitment signed

Reference: Nursing Policy T-24: Management of Suicidal Committed Patients ECC Triage Guidelines  
Nursing Policy S-80: PCS Management of Suicidal/Committed Patients

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Administrator

6/19/13
Date

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