



Section	Psychiatric Health Facility (PHF)	Effective:	DRAFT
Sub-section		Version:	1.0
Policy	Emergency Transfer Agreements with Other Facilities	Last Revised:	New policy
Director's Approval	_____	Date	_____
	Alice Gleghorn, PhD		
Clinical Division Chief's Approval	_____	Date	_____
	Ole Behrendtsen, MD		
Supersedes:	New policy	Audit Date:	

1. PURPOSE/SCOPE

- 1.1. To ensure compliance with the Centers of Medicare & Medicaid Services (CMS) Emergency Preparedness Final Rule (42 CFR 482.15), emergency preparedness and response health care industry standards set forth by the California Hospital Association, and all other applicable federal, state and local laws.

2. DEFINITIONS

- 2.1. **Emergency** – a hazard or other critical incident that causes adverse physical, social, psychological, economic or political effects that challenges the facility's ability to respond rapidly and effectively to an interruption in normal facility functioning. Emergencies can affect the facility internally as well as the overall target population, the community at large or a geographic area.
1. For purposes of this policy, "Emergency" refers to a facility-level hazard situation, not an individual patient medical emergency. For patient-related medical emergencies, please refer to the "Emergency Medical Condition" policy.

3. POLICY

- 3.1. In an emergency that threatens or restricts the usual functions of the PHF, patients may be transferred to a licensed and accredited acute care facility equipped with the appropriate facilities, services and staff necessary to provide medical and psychiatric care. The PHF shall maintain Letters of Agreement and/or Memoranda of Understanding ("MOUs") with facilities able to accept PHF patients for transfer in an emergency.

REVISION RECORD

DATE	VERSION	REVISION DESCRIPTION

Culturally and Linguistically Competent Policies

The Department of Behavioral Wellness is committed to the tenets of cultural competency and understands that culturally and linguistically appropriate services are respectful of and responsive to the health beliefs, practices and needs of diverse individuals. All policies and procedures are intended to reflect the integration of diversity and cultural literacy throughout the Department. To the fullest extent possible, information, services and treatments will be provided (in verbal and/or written form) in the individual’s preferred language or mode of communication (i.e. assistive devices for blind/deaf).