The PES Initiative in Orange County: A Solution Whose Time Has Come

OC Emergency Medical Care Committee
December 12, 2014
PES Initiative Coalition

- Hospitals
- Individual Emergency Room Physicians and OCMA
- Law Enforcement Officers and the OC Chiefs’ and Sheriff’s Association
- NAMI
- OC Psychiatric Society
- Mental Health Association of OC
- Care Ambulance
Problems

• An estimated 75-100 mental health patients each day in hospital emergency rooms -- most of whom do not need emergency medical care.

• Inappropriate care setting for patient; treatment delayed for hours/days; delays for law enforcement; ERs a chaotic environment for patients; ER capacity diminished for everyone.
Hospital/County/Collaborative Objectives

1. Expedite crisis intervention and treatment in appropriate care settings; bypass hospital ERs when not needed.

2. Reduce the need for involuntary inpatient treatment.

3. Same goals as #1 for children and youth.
Solutions

• Dedicated emergency psychiatric response space (PES):
  • Accepts law enforcement drop-offs when medically appropriate
  • Evaluates patient and commences treatment within an hour
  • Ensures appropriate care setting for patient.
• 70% of patients stabilized within 23 hours, avoiding inpatient hospitalization.
Solutions, cont.

• ETS converted to PES ASAP; a second PES established, both preferably hospital-affiliated.
• Post-discharge follow-up.
• Data tracking system to monitor effectiveness and support continuous improvement.
NEXT STEPS

• Meetings with Board of Supervisors; solidify support and timeline for ETS conversion.

• Continue community awareness efforts.

• OC EMS policy review (field triage/response protocols).

• Community to define plan for establishing second PES and present to County BH/BoS late March/early April 2015.
Julie Puentes
Regional Vice President
Hospital Association of Southern California

jpuentes@hasc.org