This binder may contain confidential or legally privileged information that is intended only for the individual or entity named in the address. If you are not the intended recipient, you are hereby notified that any disclosure, copying, distribution, or reliance upon the contents of this document is strictly prohibited. If you are not the intended recipient, please notify the owner immediately at the contact information noted below:

If Found Please Call:	
Home Phone:	
Cell Phone:	

The person for whom this binder belongs, provided the personal information contained in this binder voluntarily as a way to assist them in an emergency.

### THIS EMERGENCY BINDER BELONGS TO:

	Current Picture of Individual	
individual. It	provides critical information about the above named brings together specific details about the person and tal personnel should the individual go to the ER in a	lliw k
This binder of	contains:	
Current	t picture	
Detailed	d Personal Information Sheets	
"Circle	of Support" Contact Information	
This binder	r was completed on:	
Updated on:		-
		-

#### Message to the Families/Caregivers

This Emergency Binder was developed by the Windsor Essex Dual Diagnosis Committee as a way to help families & caregivers. There may be times when you need to accompany your loved one to the hospital in a Mental Health Crisis.

It can be very hard when you are dealing with a crisis, and after trying everything you can think of, you may feel the only thing you can do is go to the Emergency Room (ER) with your family member. If this binder is kept up to date, it should help make things easier for you at the hospital.

The binder can be given to the Triage Nurse in the ER and she/he can copy the important information the hospital needs to set up a chart.

A copy of this binder can be found at the Community Networks of Specialized Care website. <a href="www.community-networks.ca">www.community-networks.ca</a> under the Resources and Links tab. Once there click on resources and scroll down until you find "Windsor/Essex County Emergency Binder".

#### Copies of this binder can also be found at:

- Community Living Windsor
- Community Living Essex County
- Christian Horizons
- St. Francis Advocates
- Mental Health Connections
- Dual Diagnosis Outreach Program
- CMHA Windsor Essex Branch
- Windsor Regional Hospital Ouellette Campus
- Family Services Windsor-Essex
- Mental Health Response Unit

## Guideline to Hospital Services for a Person with a Dual Diagnosis Who Require Psychiatric Assistance in Windsor Essex County

The following steps will give families of a person with a dual diagnosis a common guideline to follow when their family member is requiring psychiatric assistance at any local hospital. This is an overview of what steps to take, when to take them, and what to expect in the emergency room.

#### **Planning Ahead**

Complete the information in this emergency binder for your family member and always keep it available. If there is a crisis, take the binder with you to emergency services.

Keep updating the information in the binder especially after a doctor's appointment or medication changes etc.

#### A WORD ABOUT CAPACITY

A person is **ALWAYS** presumed to be capable of making their own decision with respect to a particular treatment if they understand the information that is relevant to that particular treatment and able to understand the reasonable consequences of a decision or lack of decision. (HCCA 1996)

<u>IMPORTANT</u>: It is important to know that <u>anyone</u> over the age of 18 is considered an adult and only they can decide who gets information about them regardless of their ability.

Keep this binder in a handy place so you don't forget to bring it with you to the hospital.

#### What Happens once you arrive at the Emergency Room?

Your son or daughter will see the triage nurse. This nurse sees each person who comes to the Emergency Room and starts the paperwork for the hospital.

Have all medical cards and other forms of identification and health insurance prepared.

Give the Emergency Binder to this nurse and she will copy the information she needs on to the chart.

The triage nurse will take important details and a brief history of the current problem.

The Psychiatric Assessment Nurse (PAN) is from the psychiatric unit of the hospital and may also speak to you to ask for more information. The family may need to stay with their son/ daughter in the waiting area for a period of time until it is time for the assessment which may be done by the PA Nurse.

**IMPORTANT**: Only a Psychiatrist can admit the person to the psychiatric unit.

If it is decided that the person will be admitted to the hospital, the person will be taken to the appropriate floor **only** when a bed is available. The family will stay with their son/daughter, and if needed, share the information from the Emergency Binder to the admitting nurse. This information can be added to the floor chart. The nurse will ask the family and individual for more details if needed.

The family will provide the hospital with important contacts and phone numbers etc. for the patient.

<u>IMPORTANT</u>: The Emergency Binder should remain with the patient at all times.

#### Admission

Once the person is admitted, the hospital staff will give the family the names and contact information for all the key people who will be involved with their family member's care. For example: the name of the primary resource nurse for the day.

The family should call the primary nurse of the day who works on the unit to find out if more information is needed. For example:

- Events that led up to going to the hospital
- Medical and psychiatric history

An appropriate discharge date will be determined by the Psychiatrist in charge.

#### **Coordination of Treatment Plan**

- A meeting to discuss the Treatment Plan may be scheduled and may include the
  patient, the family, social worker, primary nurse of the day, the psychiatrist and
  any other person who may be involved; i.e. Dual Diagnosis Outreach Team, inhome workers through Passport, and other community agencies that may be
  involved with the patient.
- 2. The purpose of this meeting is to go over:
  - The information that was given at admission
  - The supports/services that have been used both in the past and in the hospital
  - Medical and medication changes
  - How the person is doing since admission
  - How to keep the family involved and scheduling while their son/daughter is in the hospital
  - Family concerns can be shared at this meeting
  - Find out what the family expects to happen when their son/daughter is in the hospital and what treatment is being given to help with him/her getting better
  - Talk about the person returning home and planning for their return
  - Discuss follow-up treatment plan

#### When the person is in the hospital:

The family will contact the Primary Nurse and/or social worker at least once a week to give and get information. This can be done more often depending on each person's situation.

#### At the end of hospital stay and returning home

The treatment plan will be developed with a discharge date in mind. The Primary Nurse and the Social Worker will share this date with family.

Where possible, if the discharge is sooner than expected in the treatment plan, the Primary Nurse or social worker will contact the family or the care provider/agency before discharging the person from the hospital. This will allow for preparations to be made for the individuals return home.

The Hospital Mental Health Team will make every effort to discuss the Discharge Plan with the family or the care provider/agency prior to the patients discharge.

## Personal Information Sheet

Date Completed:		
Persons Name:	D.O.B (D/M/Y)	
Address:		
	Power of Attorney?: Yes No Who:	
	Language spoken:	
Phone:	Health Card #	
Substitute Decision Maker:	Phone #:	
	Phone #:	
	Phone#:	
Case Manager:		
Agency:	Phone #:	
Primary Contact:	Phone #:	
Family Physician:	Psychiatrist:	
Phone #:	Phone#:	
Allergies:		
Risks: (ie self-harm)		
Medical Cautions: (note from psychiatrist) for course of tr	eatment	
Assistive Devices: (ie. hearing aids, glasses, communic	ation aids, dentures, mobility aids)	

<u>Diagnosis:</u> Medical:
<u>Diagnosis:</u> Psychiatric:
Difficulty Taking Oral Medication? Yes No
Comment:
SAFETY PRECAUTIONS:
Important Routines:
Fears:
Sleeping:
Eating:

CURRENT SITUATION: (ie: routines etc)			
Behaviour Profile:			
Behaviour	What helps?	How do you know its working?	

What Current Medications is the person on? You may attach the list you get from the drug store when you pick up your medicine The most important thing to remember is:

# BRING ALL YOUR CURRENT MEDICATIONS WITH YOU, INCLUDING OVER THE COUNTER MEDICATIONS!!

Pharmacy/Drug Store:\_\_\_\_\_

Phone # :			
Name of Medication	Dosage	Taken how often?	Reason for taking the Medication

# Circle of Support People you can count on in an Emergency

#### **Introduction:**

1. Planning is really important for those times when a loved one needs to receive care, treatment, and advocacy. It is also important to support the entire family. Pre-planning and creating a circle of support will help the person receive the best possible care and outcome. Some people may need additional support when using emergency and crisis services. The family may also need additional support if their son/daughter is admitted to hospital. To avoid additional stress, it is important to talk with family members, friends and agency support staff to create a *Circle of Support*. Those who agree to be part of the *Circle of Support* will be available to provide support to the family and their son/daughter while in the hospital.

#### Steps:

- 1. Gather a list of names, addresses and phone numbers from your own address book and those of other family members. Include anyone who may be able to provide support when you need time to reflect or to prevent care giver stress.
- Meet with family members, friends and, agency support staff to develop a *Circle of Support*. Discuss sharing visiting shifts while the person is in the hospital and when they return home. Unless there is a Power of Attorney in place (pg. 7), discuss who the Substitute Decision Maker is if the person cannot make a decision for him or herself.
- 3. Designated family members and friends are to be kept informed of situations that may require you to have some needed support.
- 4. Keep the Emergency binder up-dated and let family members, friends, and staff know where you keep the binder. This will help if your loved one needs to go to the hospital or if information is needed for other situations.
- 5. Update all members in your *Circle of Support* with a quick email/phone call or ask another family or friend to do this for you.
- 6. Encourage visitors. Let the hospital personal know that friends and family may be supporting you by staying with your loved.
- 7. Keep the *Circle of Support* list in your emergency binder.
- 8. Print in pencil so that changes can be made easily.

Circle of Support list:

riist.	2	
Contact #:	Availability:	Relationship:
	Contact #:	

otes:	