A. Policy Statement

It is the policy of the Office of Mental Health that facility staff shall have access to all available information which may facilitate appropriate treatment of patients in State-operated psychiatric centers. One set of relevant information is the patients' history of psychiatric hospitalizations, including the precipitating events and the outcomes. The use of such information may include, but is not limited to, identifying courses of treatment, granting privileges, and discharge planning.

This policy directive sets forth procedures regarding the access, release and use of information which pertains to a patient's previous psychiatric hospitalizations.

This policy directive, which is effective immediately, is applicable to all State-operated inpatient facilities.

B. Relevant Statutes and Standards

Mental Hygiene Law, section 33.13
14 NYCRR Part 57
Inpatient Uniform Case Record Manual

C. Body of Directive

1) Access of Information

a) As soon as practicable and appropriate, but in no event later than the first business day following the day of a patient's admission to the facility, staff shall utilize the Department of Mental Hygiene Information System (DMHIS) to verify the patient's history of admissions to State-operated psychiatric centers and identify any pertinent information.

b) As soon as practicable and clinically appropriate, but in no event longer than five days after a patient's admission to the facility, staff of the admissions unit shall ask the patient to provide information regarding his or her history of previous psychiatric hospitalizations, including locations, approximate dates, and other information pertinent to the provision of appropriate care and treatment, privileges or discharge. Such inquiries shall not be limited to previous hospitalizations within State-operated psychiatric centers. Patients shall be informed that pertinent information may be requested from any previous providers of service.

c) Facility staff shall contact hospitals identified pursuant to sections 1)a) and b) to request information whenever there is any indication that pertinent information may be available. Such requests shall involve, at a minimum, hospitalizations which have occurred in the five years previous to the patient's current hospital stay, in addition to hospitalizations which have occurred, at any time, pursuant to the Criminal Procedure Law or Correction Law, or a transfer pursuant to 14 NYCRR Part 57. If there is any indication that relevant information is available regarding any other hospitalization, such information shall also be requested from the appropriate hospital. Facility staff may contact any known previous providers of services, other than those described above, to request any relevant information regarding a patient, when determined appropriate by facility staff.
While requests for, and release of, information pursuant to this policy directive are encouraged to be completed pursuant to the patient's written consent, such actions may be completed in the absence of consent if the hospital or program being queried is:

i) operated by the Office of Mental Health; or

ii) licensed by the Office of Mental Health; or

iii) providing services pursuant to an approved local or unified services plan; or

iv) providing services pursuant to a written agreement with the Office of Mental Health as a party.

Although providers of service referenced in section 1)d) are authorized to release information to State hospitals, such action is not mandated, except for State hospitals. In order to facilitate such exchanges of information, hospitals are encouraged to develop agreements with other providers which establish local patient information-sharing systems.

For patients who were admitted prior to the effective date of this policy directive, facility staff shall conduct inquiries in accordance with sections 1)a) - c) prior to any change in privileges.

2) Release and Use of Information

a) When information is requested from a State-operated psychiatric center in compliance with section 1)c), all requested information which is relevant to the needs of the requesting facility shall be provided on a timely basis.

b) The confidentiality of any patient information obtained pursuant to section 1) shall be maintained in accordance with Mental Hygiene Law, section 33.13.

c) As specified in the Inpatient Uniform Case Record Manual, the Movement History from DMHIS shall be attached to, or incorporated into, the Core History form in the patient's case record. All other pertinent information obtained shall be noted in the case record. When no Movement History is available from DMHIS, the attempt to access such information shall also be noted in the case record.

d) As clinically appropriate, and at an appropriate time during the development of the patient's treatment plan, any psychiatric history information obtained pursuant to section 1) above must be discussed with the patient.