PURPOSE: All clinical staff members play a role in ensuring the delivery of high quality health care services. When issues are identified that are outside the treatment team’s collective scope of practice or expertise, consultation resources need to be provided to meet these patient needs. This policy outlines the process for obtaining clinical consultation.

SCOPE: All Clinical Staff

PROCEDURE:

1. All members of the treatment team are encouraged to suggest consultation in circumstances including, but not limited to:
   - Patient dissatisfaction
   - Diagnostic uncertainty
   - Lack of therapeutic progress
   - Risk concerns
   - Need for diagnostic procedure beyond the scope of the treatment team’s scope of practice
   - Need for therapeutic intervention beyond the scope of the treatment team’s scope of practice

2. The team Psychiatrist is responsible for the decision to obtain behavioral health consultations. The assigned medical services clinician is responsible for the decision to obtain medical consultations.

3. Requests for behavioral health consultations are presented to the Service Medical Director. Requests for medical consultation are presented to the Chief Medical Officer. They will review the appropriateness of each consult request. If the request is approved they will also determine if the
identified need can be met through the use of internal resources (regular WFH professional discipline staff) or if external consultation is required, (“External consultation” includes that performed by people with less than full privileges, e.g., physicians with consulting privileges on the Medical Staff.) The Service Medical Director will inform the Chief Medical Officer (CMO) of all requests for external behavioral health consultation.

4. For all external behavioral health consultations, the originating clinician, in conjunction with other necessary staff, will tentatively schedule the consultation after receiving approval. If special funding is required the CMO is contacted. The CMO will verify the availability of funding, and confirm with the originating clinician that the consultation may proceed.

All external medical consultations will be arranged through the medical services clinician and the team will be notified of the time, place, and other requirements related to the consultation.

5. The originating clinician, either a psychiatrist or medical services clinician, depending on the type of consultation, is responsible for assuring that the purpose of the all consultations is clearly conveyed to the consultant, and for arranging with the consultant for the appropriate documentation of consultation results. (For external consultation, this will generally involve a written report by the consultant; internal consultation can be documented in a progress note written either by the consultant or by a participating team member.)

6. The originating clinician, either a psychiatrist or medical services clinician, depending on the type of consultation, is also ultimately responsible for assuring that recommendations of the consultation are reviewed and discussed with the treatment team, and implemented when considered appropriate. If the recommendations are not going to be implemented, the psychiatrist or medical services clinician should document the rationale in a progress note.

7. When an external (to WFH) authority requests consultation, the Service Medical Director and CMO should be informed immediately.