Mental Health Professional Scope of Practice

**Purpose:** To define the scope of practice of Medical Reserve Corps volunteer mental health professionals as it pertains to the provision of mental health consultation, referral and support to distressed, anxious and upset clients and/or emergency service workers in an emergency or disaster.

**Authority:** Mental health practice act?

**Procedure or Policy:** The mental health professional shall provide mental health services to victims, families of victims, emergency services workers, or anyone else affected by the emergency or disaster in need of mental health support.

Every effort should be made to provide these services in privacy, physically separate from the incident and others to ensure patient privacy, confidentiality, emotional and physical safety. In most cases, a separate mental health station or area will be designated for mental health workers to work with affected clients.

**QUALIFICATIONS:**

A ‘Mental Health Professional’ (MHP) may be a licensed mental health professional, including: marriage and family therapist (MFTP), Psychiatrist, Psychologist; licensed clinical social worker (LCSW); clergy person, chaplain or social services worker with counseling experience; American Red Cross trained mental health service worker.

It is strongly suggested that any MHP acting in this capacity in an emergency or disaster has completed a Psychological First Aid, Crisis Intervention/Stress Management for Emergency Personnel or similar course designed to target the victims and emergency services workers in an emergency or disaster.

No MHP shall perform duties outside the scope of their professional licensure or practice.

**EXAMPLE OF DUTIES:**

- Provide mental health support to clients or emergency service workers who are distressed, upset or anxious.
- Provide appropriate support, education, and therapeutic intervention as needed.
- Provide client resource information on stress, coping and emotional care.
- Refer clients to additional (outside) appropriate treatment as needed.

**APPROVED:**

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If client chooses to continue with the clinic process, have support staff escort the client through the rest of the process.

If client declines further treatment, have support staff escort the client to the Forms Collection station.

Whenever possible, have support staff escort mental health clients from one area to the next for the entirety of the clinic, event, or treatment area.

Document each client encounter on Patient Treatment (Policy 600) form for record-keeping purposes including any outside referrals.

When no clients are present at designated area, or extra MHP are available the MHP should “work the line/crowd” or go to areas between stations where clients are waiting. Provide educational materials and do brief assessments for signs of distress, anxiety or other mental health issues. Address needs for consultation and support accordingly.

No psychiatric medications are to be prescribed on scene by any mental health professional. Clients necessitating such treatment should be evaluated away from the incident under the care of a licensed psychiatrist or physician.

For psychiatric distress beyond the capability of the emergency workers on scene, if the situation permits, call 911 for psychiatric transport. In a large-scale disaster when resources are overwhelmed and the 911 system is non-operational, work with security and/or law enforcement personnel to manage extremely distressed clients should further assistance be needed.