

Mental Health Association, Inc.
995 Worthington Street
Springfield, MA 01109

Policy Number: 8.19.1

Subject: Vehicle Collisions Involving MHA Participants Policy

Approved by Executive Director

Effective Date: May 1, 2009

Joan D. Ingersoll

Date

Revision Date: July 1, 2013

Purpose:

To provide an outline for MHA employees regarding steps needed to ensure participant safety and well-being following a car accident when injuries may or may not have been sustained.

Applies to: All MHA employees and participants

Definitions:

Adult participant- Defines the age of the participant is at least 18 years of age and not under the custody DCF.

Policy:

All participants involved in a vehicle collision are required to receive immediate medical treatment following the collision when injuries may have incurred.

Procedure

1. Immediately contact Police and complete police report.
 - o If Police do not respond to the scene the employee is responsible for obtaining in writing the name, license number, insurance information, license plate number and contact information of any other driver(s) or pedestrian(s) involved in the accident.
2. Obtain / coordinate transportation for participant in order for them to be medically treated by emergency room and or their PCP that same day.
3. Obtain information from ER regarding injuries or medical clearance of participant and include this documentation with any and all other documentation forwarded to the Program Supervisor.
 - a. Medical clearance of the participant can be completed by the participant's PCP but only if the PCP is available to see the participant the same day of the accident and no apparent injuries are noted and / or reported.

4. Speak directly with the Program Supervisor, Program Director and /or Division Director and / or On-Call staff immediately.
5. Complete Incident Report within 24 hours of accident; submit to Supervisor. The need for a Critical Incident Report will be determined by Program Supervisor or designee.
6. Supervisor to submit copy of Incident Report to Director of Quality and Performance Improvement and program nurse.
7. Follow up visit to the participant by MHA staff within 24 hours of accident. Documentation of visit and observation in Participant Outcome notes.
8. When to use an Emergency Medical Treatment Refusal form.
 - a. Participant is refusing medical clearance even after several attempts to have participant be transported to ER or have contact with PCP.
 - b. The participant is an adult and deemed competent.
 - i. In the event the participant has a guardian, there should be a documented contact with the guardian for acknowledgement and / or consultation of refusal.
 - c. There is no apparent or reported injury.

Only after all the above areas are checked can staff have the participant complete an Emergency Medical Treatment Refusal (available on MHA's website).