

# Behavioral Health Response Update 2026

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# Alcohol withdrawal protocol comparison

	AWS - Benzodiazepine	Phenobarbital
<b>Inclusion</b>	Alcohol withdrawal, any severity	History of poor response to benzodiazepine protocol Alcohol withdrawal seizures Past use of Phenobarbital Severe withdrawal
<b>Exclusion</b>	Provider discretion	Acute respiratory failure ESRD Fulminant liver failure History of hepatic encephalopathy Pregnancy Excessive use of benzodiazepine in last 12 hours (Lorazepam 20mg, Diazepam 100mg, Midazolam 40mg)
<b>Vital signs</b>	Minimum every 4 hours	Minimum every 4 hours IV dosing – q 30 minutes x2 after each dose
<b>AWS scoring</b>	Frequency based on previous score	Every 4 hours
<b>Scheduled medication</b>	Chlordiazepoxide or Lorazepam (based on provider choice)	IV totaling 10mg/kg (either one time dose in ED or IV x 3 doses for inpatient initiation) Transition to PO taper dosing once IV doses complete
<b>PRN medication based on score</b>	Lorazepam/Diazepam – dose and frequency based on score	None
<b>PRN Agitation</b>	Risperidone PO Haloperidol IV/IM	Quetiapine PO Haloperidol IV
<b>Other scheduled medications (has to be selected by provider)</b>	Famotidine Clonidine Folic acid Thiamine Multivitamin Ondansetron PO/IV Trazadone (PRN insomnia) Nicotine gum PRN Nicotine patch	Famotidine Clonidine Folic acid Thiamine Multivitamin Ondansetron PO/IV Trazadone (PRN insomnia) Nicotine gum PRN Nicotine patch

# Care companion

- Transition to CC observation in the EMR coming soon. The CC will utilize a COW or hallway computer to document hourly observations.
- **One-to-one observation:** One competent observer (Care Companion) to one patient within line of sight, in close proximity with no physical barriers.

## Documentation for Care Companion

1. Document observations of behavior hourly and with any changes on Care Companion Behavior Observation Flowsheet.
  - a. MJE only: Suicide Precaution Flowsheet (Q 15 min visual check)
2. Report any change in patient behavior immediately to the Core/Charge Nurse or primary nurse, and carefully document significant signs of concerns as outlined on the Competent Observer Observation form.
3. Care Companion to give completed observation flowsheet to primary RN who will send to HIM to scan into patient's EMR.

# Care companion observation – EMR

Individual Observation Record	
Location of Patient	Location of Patient
Activity of Patient	<input type="checkbox"/> Bathroom
Behavior of Patient	<input type="checkbox"/> Shower
Comment on Observation	<input type="checkbox"/> Hallway
Mark As Off Unit	<input type="checkbox"/> Patient room
15 Minute Rounding Verified	<input type="checkbox"/> Group Room - JE
Psychological - Emotional	<input type="checkbox"/> Group Room - A
Orientation Assessment	<input type="checkbox"/> Group Room - B
Level of Consciousness	<input type="checkbox"/> Day room
Affect Range Comments	<input type="checkbox"/> Dining room
Affect Quality	<input type="checkbox"/> Social Work Room - 31
Affect Quality Comments	<input type="checkbox"/> Social Work Room - 48
Affect Congruence Comments	<input type="checkbox"/> Nurses Station
Behavior	<input type="checkbox"/> Psychiatrist Office
Behavior Comments	<input type="checkbox"/> Laundry room
Appearance	<input type="checkbox"/> Alcove
Mood	<input type="checkbox"/> Bathtub Room
Memory	<input type="checkbox"/> Outdoor Space
Concentration	<input type="checkbox"/> Lying in Bed
Thought Content	<input type="checkbox"/> Seclusion Room/Quiet Room
Hallucinations Present	<input type="checkbox"/> Activity Room
Hallucination Comments	<input type="checkbox"/> Other

Individual Observation Record	
Location of Patient	
Activity of Patient	Activity of Patient
Behavior of Patient	<input type="checkbox"/> Hygiene
Comment on Observation	<input type="checkbox"/> Eating
Mark As Off Unit	<input type="checkbox"/> Class
15 Minute Rounding Verified	<input type="checkbox"/> Watching TV
Psychological - Emotional	<input type="checkbox"/> With Nurse
Orientation Assessment	<input type="checkbox"/> With SW/Therapist
Level of Consciousness	<input type="checkbox"/> With Attorney
Affect Range Comments	<input type="checkbox"/> With Physician
Affect Quality	<input type="checkbox"/> Talking on Phone
Affect Quality Comments	<input type="checkbox"/> With Visitors
Affect Congruence Comments	<input type="checkbox"/> With Peers
Behavior	<input type="checkbox"/> With Staff
Behavior Comments	<input type="checkbox"/> Pacing
Appearance	<input type="checkbox"/> Reading
Mood	<input type="checkbox"/> Other

Suicide	
	Suicide Precautions
	Individual Observation Record
	Psychological - Emotional
	Psychosocial-Coping
✓	Learning Assessment
	Suicide Education

Individual Observation Record	
Location of Patient	
Activity of Patient	
Behavior of Patient	Behavior of Patient
Comment on Observation	<input type="checkbox"/> Restless
Mark As Off Unit	<input type="checkbox"/> Calm
15 Minute Rounding Verified	<input type="checkbox"/> Disruptive
Psychological - Emotional	<input type="checkbox"/> Agitated
Orientation Assessment	<input type="checkbox"/> Eyes Closed
Level of Consciousness	<input type="checkbox"/> Crying
Affect Range Comments	<input type="checkbox"/> Cursing
Affect Quality	<input type="checkbox"/> Cooperative
Affect Quality Comments	<input type="checkbox"/> Uncooperative
Affect Congruence Comments	<input type="checkbox"/> Combative
Behavior	<input type="checkbox"/> Appears Sleeping with Chest Rising
Behavior Comments	<input type="checkbox"/> Displaying Sexually Inappropriate Behavior
Appearance	<input type="checkbox"/> Other

# Face to face evaluation

Face to Face Evaluation		
Face to Face Evaluation		
<b>Pre-existing Conditions Placing Patient at Risk</b> <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unable to determine	<b>Pre-existing Condition Details</b> <div style="border: 1px solid black; height: 70px;"></div>	
<b>Immediate Situation</b> <input type="radio"/> Alternative methods ineffective <input type="radio"/> Danger to self and/or others	<b>Current Medications Reviewed</b> <input type="radio"/> Yes	<b>Current Labs Reviewed</b> <input type="radio"/> Yes <input type="radio"/> N/A - no current labs available
<b>Medical Condition Assessed</b>	<b>Respiratory</b>	<b>Integumentary</b>
<b>Cardiovascular</b> <input type="radio"/> Normal rate and rhythm <input type="radio"/> Other:	<input type="radio"/> Regular <input type="radio"/> Other: <input type="radio"/> Irregular <input type="radio"/> Shallow <input type="radio"/> Deep	<input type="radio"/> Skin Intact/No Discoloration <input type="radio"/> Other:
<b>Behavioral Condition Assessed</b>	<b>Level of Consciousness</b>	<b>Orientation</b>
<b>Behavioral</b> <input type="checkbox"/> Combative <input type="checkbox"/> Incoherent <input type="checkbox"/> Restless <input type="checkbox"/> Aggressive <input type="checkbox"/> Crying <input type="checkbox"/> Other: <input type="checkbox"/> Threatening <input type="checkbox"/> Yelling	<input type="radio"/> Alert <input type="radio"/> Confusion, new onset <input type="radio"/> Reacts to voice <input type="radio"/> Reacts to pain <input type="radio"/> Unresponsive	<input type="radio"/> Oriented x 4 <input type="radio"/> Not oriented to time <input type="radio"/> Identifies self <input type="radio"/> Disoriented x 4 <input type="radio"/> Not oriented to person <input type="radio"/> Not oriented to place <input type="radio"/> Not oriented to situation
<b>Response to Intervention</b> <input type="radio"/> Restraints needed-ongoing aggressive/violent behavior <input type="radio"/> Restraint not needed, no aggressive/violent behavior	<b>Licensed Independent Practitioner Notified</b> xxx /xxx /xxxx <input type="text"/> <input type="text"/> <b>Name of Clinician(s) Contacted</b> <div style="border: 1px solid black; height: 20px;"></div>	



# Updates

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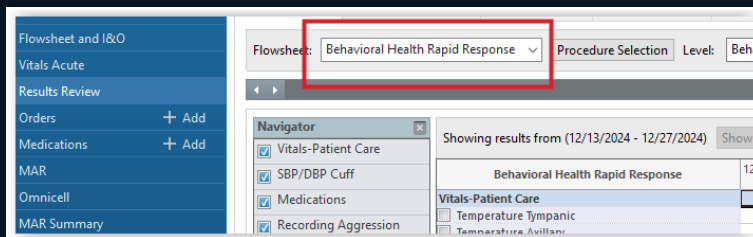
- Capsaicin cream 0.075% topical to abdomen Q 6 hours PRN abdominal cramping

# Behavioral Health Response Team Overview

- Who responds: 8S core, 7S core, House supervisor, security
  - RRN does not receive notification-If you have a medical concern you may call an RRT
- Respond to ALL calls – Even if paged No Response
  - 7S/8S cores communicate with each other at the beginning of the shift to determine workload
    - Best if both respond
- Meet with staff outside room to assess situation and receive SBAR
  - Determine if security is needed in the room? On standby? Hidden around the corner?
- Crowd Control: Too many onlookers can escalate the situation
- Updates/Concerns: please write a quick note in our shared teams chat “BHRT response team 7S/8S”

# Behavioral Health Responder Expectations

- BHRT RN responder must enter the patient room
- Look for reasons of escalation of behaviors
- If AWS or delirium....rescore!
- Review chart for previous interventions
  - Results Review Behavioral Health Flow Sheet and BHRN Rounding Note
- Review current and discontinued medications
- Review alcohol/substance use history with patient and/or family
  - Accurate history of alcohol and drug use is needed for successful course
- Assist with developing a plan of care
  - Teach patient care staff techniques. Role modeling is not enough.



# Documentation

- Document recommendations in the BHRT Rounding note
- Completed by either the 7S or 8S core that responds.
  - If both respond, the core with the expertise will complete the form (Dementia/Delirium-7S; AWS-8S)
- Record start and stop times of BHRT to track time required of responders.
  - This includes chart review time
- DO NOT document in the *Behavioral Health Nurse (BHRN) Rounding Note*.
  - This is for the BHRN pilot only.

Performed on: 06/05/2026 13:07 CDT

### BHRT Rounding Note

Time BHRT called:

Time BHRT event ended:

BHRT Event Total Time:

**BHRT Visit Location**

<input type="checkbox"/> OR/Cath Lab	<input type="checkbox"/> 5-South	<input type="checkbox"/> 7-North	<input type="checkbox"/> J-Birth
<input type="checkbox"/> Lobby	<input type="checkbox"/> 6-South	<input type="checkbox"/> 8-North	<input type="checkbox"/> J-EMERGENCY DEPARTMENT
<input type="checkbox"/> 2nd Floor	<input type="checkbox"/> 7-South	<input type="checkbox"/> 9-North	<input type="checkbox"/> J-QPS
<input type="checkbox"/> GI lab	<input type="checkbox"/> 8-South	<input type="checkbox"/> Cancer Center	<input type="checkbox"/> Other:
<input type="checkbox"/> ED	<input type="checkbox"/> 9-South	<input type="checkbox"/> J-ICU	
<input type="checkbox"/> PACU	<input type="checkbox"/> 4-North	<input type="checkbox"/> J-2B	
<input type="checkbox"/> 3-North	<input type="checkbox"/> 5-North	<input type="checkbox"/> J-3AB	
<input type="checkbox"/> 4-South	<input type="checkbox"/> 6-North	<input type="checkbox"/> J-4H	

**Reason for BHRT call**

<input type="checkbox"/> ABRAT Proactive Rounding	<input type="checkbox"/> Danger to Others	<input type="checkbox"/> Threatening Physical Behavior
<input type="checkbox"/> Aggressively Trying to Protect Self	<input type="checkbox"/> Delusions and/or Hallucinations	<input type="checkbox"/> Threatening Verbal Behavior
<input type="checkbox"/> Alcohol Withdrawal Score > or = to 6	<input type="checkbox"/> Demanding and Manipulative Behaviors	<input type="checkbox"/> Wanting to Leave the Hospital
<input type="checkbox"/> Attempting to Harm Self	<input type="checkbox"/> Increased Agitation	<input type="checkbox"/> Other:
<input type="checkbox"/> Danger to Self	<input type="checkbox"/> Staff Concerns	

**BHRT Assessment Type**

<input type="checkbox"/> Verbal Discussion
<input type="checkbox"/> Chart Review
<input type="checkbox"/> Patient Assessment with Team
<input type="checkbox"/> Other:

**BHRT Rounding Outcome**

<input type="checkbox"/> Rapid Response Call Initiated	<input type="checkbox"/> Request RN to Notify Provider
<input type="checkbox"/> Improved Patient Condition	<input type="checkbox"/> DR MAJOR INITIATED (JE ONLY)
<input type="checkbox"/> Transferred to ICU	<input type="checkbox"/> Other:
<input type="checkbox"/> Transfer to Progressive Care/Cardiac Unit	

**BHRT Patient Outcome**

<input type="checkbox"/> Left Against Medical Advice	<input type="checkbox"/> Transferred
<input type="checkbox"/> Stayed on Unit	<input type="checkbox"/> Other:

**BHRT Plan**

Segoe UI 9

**\*\*The staff calling the BHRT should complete the BHRT/Security team form and the BHRT responder should complete a rounding note. Both forms must still be completed, even when a BHRT is called on 7S or 8S.**

# BHRN PILOT ROLE

Starting June 22<sup>nd</sup> Methodist Hospital will be piloting a Behavioral Health Response Nurse (BHRN) role.

**THE BHRN WILL RECEIVE A PAGE THE FIRST TIME A PATIENT SCORES IN AS HIGH RISK ON THE ABRAT-H.**  
The BHRN will proactively round on the patient/staff & make recommendations for interventions to potentially prevent future aggressive events from happening.

Recommendations will be documented in the "BHRN Rounding Note" in document viewer or form browser.

## BHRN ROLE RESPONSIBILITIES

- Proactive rounding on all high-risk for violence patients
- Respond to all BHRTs
- Assist with behavioral contracts/identifying patients that would benefit from a contract
- Attend all CHIPS huddles
- Attend Safety huddle
  - Meet with security regarding concerning issues
  - Meet with ED core/AC regarding ED hold patients
- Round on patients aggressive/violent in last 24hrs
- Round on all patients with an active care companion
  - If care companion used for suicide, confirm precautions are in place
- Meet with AC regarding patients of concern
- Daily rounding on all AWS patients

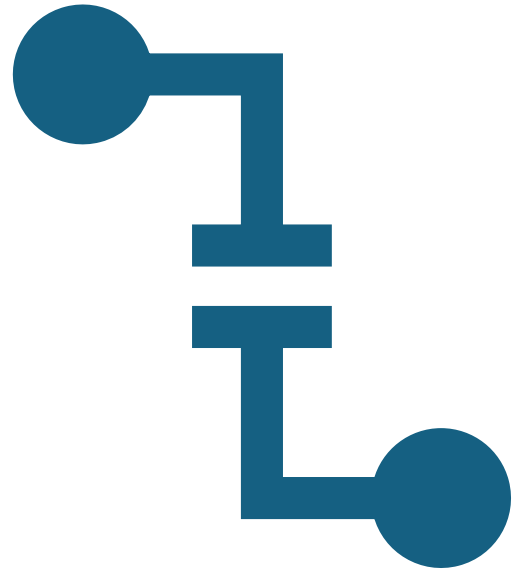
**BHRN PILOT HOURS:**  
Monday - Friday  
8am - 830pm

\* CALL "BHRN" OR "BEHAVIORAL HEALTH NURSE" ON VoCERA \*

- Proactive rounding on all high-risk for violence patients
- Respond to all BHRTs
- Assist with Behavioral Health Contracts / Identifying patients that would benefit from a contract.
- Attend all CHIPS huddles
- Attend safety huddle
  - meet with security regarding concerning issues
  - Meet with ED core/AC regarding ED hold patients
- Round on patients aggressive/violent in last 24 hours
- Round on patients with active violent restraints or physical hold order in last 24 hours
- Round on all patients with an active care companion
  - If care companion used for suicide, confirm precautions are in place
  - BHRN to approve care companion necessity
- 3 pm meet with AC regarding patients of concern
- Daily rounding on all AWS patients
- Daily rounding on all patients screening in positive for delirium

# BHRN Role

- Normal BHRT operations when there is no BHRN on shift
- 7S/8S cores will not be doing proactive ABRAT-H rounding when the BHRN is off duty
- BHRN will receive pages for new high risk ABRAT-H scores
- Call “BHRN” or “Behavioral Health Nurse” on Vocera
- Phone: 531-375-6346





# Questions

