



Promoting wellness and recovery

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To: Private Psychiatric Inpatient Providers

From: Ohio Department of Mental Health and Addiction Services

Date: April 2, 2020

Subject: Waiver of Telehealth, Staffing Ratios and Patient Admission Assessments

The Department of Mental Health and Addiction Services will consider waivers for licensed private psychiatric hospitals in the areas of telehealth, staffing ratios, and patient admission assessments. The waivers will expire upon the rescinding of the Governor's Executive Order declaring a state of emergency due to the COVID-19 pandemic. Hospitals must apply specifically for the waivers listed below by email. Send all requests to: Denise.Cole@mha.ohio.gov.

Waivers to be considered:

Telehealth use for patient evaluation and management is allowable in an inpatient psychiatric setting to the extent that it supports a similar quality of patient care that is provided through the delivery of in-person psychiatric services. This would be accomplished by liaison with on-site clinical staff who are able to provide (through use of appropriate credentials and privileges) additional clinical information and patient support services. In-person evaluation by a psychiatrist or other qualified healthcare practitioner is necessary for the initial patient visit and following any major adverse event (suicidal behavior, episode of seclusion/restraint, significant adverse drug reaction, for example) and at the time of hospital discharge.

OhioMHAS licensed private psychiatric inpatient providers may adjust staffing ratios in accordance with Ohio Administrative Code (OAC) 5122-14-10(C)(3)(a) to a one to eight (1:8) minimum nursing staff-to-patient ratio to be maintained at all times. Ratios include a minimum of one RN on each unit at all times. Staff required to provide 1:1 patient observation shall not be included in the 1:8 ratio.

In relation to patient admission assessments required to be completed within 24 hours of patient admission (OAC 5122-14-13(E)(2)), providers may complete these within 72 hours of patient admission. A physician or other qualified healthcare practitioner must see each patient within 24 hours of admission.