



Medical/Mental Health

PSYCHIATRIC HOSPITALIZATION

Treatment on an outpatient basis is generally preferred, as it is less restrictive and helps the individual learn to better cope in the context of daily life. Psychiatric hospitalizations are appropriate when distressed individuals need intensive mental health treatment and cannot be safely treated as an outpatient. Hospitalization may be necessary when a member is found to be a danger to self or others or is unable to meet his/her basic needs such as feeding and hygiene.

Signs Wingmen Should Know/Look For

- All personnel recently released from inpatient psychiatric treatment should be considered to be at elevated risk.
- Non-compliance with treatment recommendations or safety precautions during immediate post-discharge period.

Recommended Wingman Action

- Recommendations for following up with personnel in distress are applicable.
- Recognize that personnel are at heightened risk for suicide attempts during the immediate post-discharge period.
- Recently hospitalized personnel may be embarrassed. Communicate that they are a valued member of the unit, family, and community.

Leadership Considerations

- When hospitalization occurs, the unit may need to obtain needed items (e.g., clothing, toiletries) and ensure household responsibilities (e.g., caring for family, pets, etc.) are taken care of.
- Coordinate with the Mental Health Clinic to ensure the individual is evaluated immediately following discharge and schedule a face-to-face treatment team meeting within seven calendar days of discharge IAW AFI 44-172.
- Work with the Mental Health Clinic to develop and implement an appropriate outpatient safety plan, which may include, but is not limited to, things like taking custody of medications, unit watch procedures, securing means of self-harm such as firearms or knives, removing alcohol from the home, or arranging for someone to check on the individual over the weekend.
- Ensure there is a plan for follow-up (the next appointment).
- Communicate and coordinate frequently with all persons and agencies involved in the individual's care to ensure sharing of information.
- Consult with the Mental Health Clinic before terminating aspects of the outpatient safety plan or allowing the individual to resume sensitive duties such as weapons bearing or having access to TS/SCI information.
- Consider referring for a Commander Directed Evaluation if the member disengages from treatment and there are ongoing concerns about safety or duty performance.