

Medical/Mental Health

PSYCHIATRIC HOSPITALIZATION

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

- Personnel recently discharged from inpatient psychiatric treatment are still at elevated risk, though the imminent danger has passed.
- Not adhering to treatment recommendations and safety precautions during immediate postdischarge period increases risk.

Recommended Wingman Action

- Recognize that personnel are at heightened risk for suicide attempts during the immediate post-discharge period. If the personnel shows any concerning behaviors, it is appropriate to contact the mental health clinic.
- 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 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..
- Consult with the Mental Health Clinic before terminating aspects of the outpatient safety plan or allowing the individual to resume sensitive duties (arming status, PRP, etc.)
- Consider referring for a Commander Directed Evaluation if the member disengages from treatment and there are ongoing concerns about safety or duty performance.