Statement by Skip Simpson: Follow-Up Matters and Emergency Department Liability

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National Suicide Prevention Lifeline has been promoting crisis center follow-up for years. The "Follow-Up Matters" web site http://followupmatters.suicidepreventionlifeline.org/#fewersuicides contains standards of care regarding follow-up; they must be followed.

The evidence about crisis center follow-up saving lives is clear for anyone who takes the time to read the Suicidology literature. Most mental health professionals don’t. I know because I regularly depose Corporate representatives of psychiatric hospitals, Emergency Departments, hospital psychiatrists, emergency department physicians, and psychiatric and ED nurses. Their knowledge about following up with psychiatric patients is pitifully poor.

Hospitals and ED's continuously discharge patients who within days or weeks kill themselves. These hospitals and ED’s claim the patient is not under our control, not our problem; but it is. Patients are ushered out ---back into dangerous waters-- expecting them to stay afloat without help. They can’t--they need help. It is the duty of health care facility to make sure they have that help.

A major duty of health care facilities is to make sure there is safe continuity- of- care (follow-up). If there isn’t and an injury or death occurs to a patient, there is legal liability to the hospital, emergency department, and employees with a duty to protect.

If health care facilities can show evidence of trying to keep the patient safe post discharge, liability is unlikely to attach to the facility. And jurors can see the facilities have an interest in the safety of their patients—in and out of the hospital. The "Follow-Up Matters" web site shows facilities how to protect patients and keep out of legal hot water.

The American Hospital Association's newly released 2018 report on hospital finance and utilization trends shows that collective profits among the nation's roughly 4,800 community hospitals increased to $76.1 billion in 2016, up from $73.3 billion in 2015. Juries get it when health care facilities are trying to save money by putting profits over patient safety.