



Prism Mental Health Solutions Inc.

Patient Emergencies & Crisis Care Policy



Transforming Mental Health Through Compassion, Clarity, and Clinical Excellence

1. Our Commitment to Your Safety



Prism Mental Health Solutions Inc. (Prism MHS) provides outpatient mental health services with compassion, respect, and attention to your safety. We work collaboratively with patients to identify concerns, develop practical safety plans, and determine when additional support may be needed.

2. When to Seek Immediate Help



If you or another person is in immediate danger, call 911 or go to the nearest emergency department. For a mental health or emotional crisis, you may call or text 988 to reach the Suicide & Crisis Lifeline. Pennsylvania county crisis services may also provide assessment and support. Do not wait for a response from Prism MHS when immediate assistance is needed.

3. Our Availability and Communication Limits



Prism MHS is not a 24-hour crisis center or emergency response service. TherapyNotes secure messages and office voicemail are not monitored continuously, including outside established business hours. These methods must not be used to request urgent or emergency intervention. Contact emergency or crisis services directly when immediate help is needed.

4. Talking With Your Clinician About Safety



Please tell your clinician about changes in your safety, including thoughts of suicide or self-harm, threats or fears of violence, severe distress, or symptoms that make it difficult to remain safe. Your clinician will consider the specific circumstances and available supports. Having distressing thoughts does not automatically mean that hospitalization is necessary.

5. Collaborative Safety Planning



When appropriate, you and your clinician may create or update a safety plan. This may identify warning signs, coping strategies, trusted support people, professional crisis resources, and steps to reduce access to dangerous means. A safety plan supports care but does not replace emergency services when immediate danger exists.

6. Emergency Assessment and Higher Levels of Care



Sometimes outpatient therapy alone cannot safely meet a patient's immediate needs. Your clinician may recommend county crisis assessment, urgent psychiatric evaluation, an emergency department, intensive outpatient services, partial hospitalization, inpatient treatment, or another appropriate level of care. Whenever clinically safe, Prism MHS seeks to use collaborative and less restrictive options.

7. Confidentiality and Safety Exceptions



Your privacy remains important during a crisis. However, applicable law may permit or require limited disclosure of information to respond to serious danger, protect an identifiable person, or fulfill a mandatory reporting obligation. When disclosure is necessary, Prism MHS seeks to share only information reasonably needed for the protective or reporting purpose.

8. Abuse, Neglect, and Protective Reporting



Prism MHS clinicians have legal and professional responsibilities concerning suspected child abuse and certain protective-services situations involving adults. Reporting requirements vary with the circumstances and applicable law. When appropriate and safe, your clinician may explain the reporting process and available support. A legally required report does not depend on a patient's permission.

9. Telehealth and Emergency Contacts



During telehealth appointments, your clinician may ask you to confirm your current physical location and emergency contact information so that local assistance can be arranged if necessary. Please keep this information accurate. An emergency contact does not automatically have access to your treatment information; disclosures are limited by authorization and applicable law.

10. Transitions and Continuity of Care



If your needs change or a higher level of care is recommended, Prism MHS will consider appropriate referrals and reasonable continuity-of-care steps. Recommendations are based on clinical need and safety, not punishment. You may discuss your concerns, preferences, and available options with your clinician. A referral does not guarantee another program's acceptance or availability.

11. Questions and Patient Acknowledgment



Please ask your clinician if you have questions about crisis planning, confidentiality, emergency resources, or treatment transitions. By receiving this policy, you are informed that Prism MHS is an outpatient practice and that TherapyNotes messaging and office voicemail are not emergency services. This information does not replace individualized clinical guidance or emergency assistance.

I acknowledge that I have received or been provided access to the Prism MHS Patient Emergencies and Crisis Care Policy. I understand that routine written communication takes place through TherapyNotes secure client messaging, telephone communication uses the Prism MHS office telephone system, and neither channel is an emergency service.

Patient / Responsible Party: _____ Date: _____