MENTAL HEALTH POLICY NO.: 91-17

SUBJECT: Referral Standards – County or County Contract 24-Hour Treatment Facilities

AUTHORITY: Divisional

SUPERSEDES: Prior Practice

PURPOSE:

To assure appropriate and continuous care; to promote quality in treatment planning and documentation; and to assure compliance with all relevant legal standards.

POLICY:

All clients discharged from County or County Contract 24-hour acute and sub-acute treatment facilities to county mental health services must be referred via the appropriate regional clinic’s intake procedure.

A particular county therapist may be requested when that clinician’s area of expertise or other special circumstances indicate to the referring agency that this would be in the clinical best interest of the client. The final decision for assignment of the referral will be made by the regional Unit Chief; the decision may be appealed to the Director of Mental Health Services or her Deputy.

Before a client is discharged from County or County Contract 24-hour treatment to a private therapist, the chief of the pre-hospitalization treatment team should be consulted about this change in outpatient care provider. Also, before a client is discharged from County or County Contract 24-hour treatment to a new geographic catchment area, the chief of the pre-hospitalization treatment team should be consulted if a change in outpatient care provider is anticipated.

The chief of the pre-hospitalization treatment team is to be notified immediately when a client leaves County or County Contract 24-hour treatment against medical advice (AMA).

All referrals to private therapy must follow procedures described in Mental Health Policy No.: 91-18, Patient/Client Referrals, (to follow).
Discharge summaries shall be forwarded in a timely manner from the 24-hour treatment facility, as described in Mental Health Policy No. 90-5, *Documentation of Services*.

Approved: ________________________________
Gale Bataille, Director
Mental Health Services Division