



MARK A. REFOWITZ
DIRECTOR

RICHARD SANCHEZ
ASSISTANT DIRECTOR

MARY R. HALE
DEPUTY AGENCY DIRECTOR
BEHAVIORAL HEALTH SERVICES

BEHAVIORAL HEALTH SERVICES

MAILING ADDRESS:
405 W. 5th STREET, 7th FLOOR
SANTA ANA, CA 92701

TELEPHONE: (714) 834-6032
FAX: (714) 834-5506
E-MAIL: mhale@ochca.com

November 14, 2016

To: Orange County Hospital Providers

Subject: Involuntary Holds Within Non-designated Facilities

It has been the policy of Behavioral Health Services to require that persons who are not County staff or County-contracted staff be on staff of an Orange County Designated Facility to qualify to become a Designated Individual. This serves multiple purposes. Operating within the context of an Orange County Designated Facility ensures that the individual has recent experience operating within the California regulatory requirements for involuntary holds. It also ensures that the required training and re-training of that Designated Individual is monitored and occurs under a Designated Trainer at the Designated Facility. Also, that Designated Trainer provides a point person within the facility (organization) who can be available to consult with staff and Designated Individuals as questions related to the involuntary hold process arise. The Designated Trainer receives annual training and update(s) from Orange County Behavioral Health Services to ensure that the trainer stays up to date on modifications to regulations and to County practices.

Each facility is encouraged to review issues related to the involuntary hold process with their own legal counsel. Below is the understanding of Orange County Behavioral Health Services, in consultation with County Counsel's office.

When an involuntary hold is initiated and the patient is in a non-designated facility, that hold remains in place only so long as a Designated Individual remains in the facility.

The Designated Individual does not have to be the Designated Individual who initiated the hold.

The Designated Individual taking over responsibility for the hold initiated by another Designated Individual should be aware of the patient and support the probable cause findings for the hold.

If an involuntary hold is in place, it is in effect regardless of whether the patient is in the ED or is on a medical floor.

If an involuntary hold is in place, a Designated Individual in the facility may discontinue that hold if an assessment has been conducted and documented and the patient is found to no longer meet the requirements for probable cause

Although the involuntary hold is not in place when there is no Designated Individual in the facility, hospitals are reminded to consider their options under Health & Safety Code 1799.111 if deemed appropriate.

If a CAT or PET staff member or a Designated consulting psychiatrist comes to the non-designated facility and initiates an involuntary hold, that hold will also be in effect only as long as there is a Designated Individual in the facility, as described above. Once CAT, PET or the Designated consulting psychiatrist leaves, there is no hold in place unless there is another Designated Individual in the facility who is aware of the patient and supports the probable cause findings for the hold. In this situation the hospitals are reminded to consider their options under Health & Safety Code 1799.111.

If a facility is holding a patient under Health & Safety Code 1799.111, the patient will need to be placed onto an involuntary hold to transport to the Designated Facility if the client remains unwilling to accept treatment. While a CAT or PET staff member or a Designated consulting psychiatrist is available to assist with this process, the facility should have a bed in a Designated Facility arranged. If the facility does not have a bed arranged, then when the CAT, PET, or Designated consulting psychiatrist leaves, once again there will be no hold in place. If this situation should occur, facilities are reminded to consider their options under Health & Safety Code 1799.111.

The above process of having a CAT or PET Designated Individual return in order to place a hold simply for transport when the patient has been held under Health and Safety Code 1799.111 is potentially cumbersome and may add to wait times in the non-designated facility. In order to address these concerns, BHS will modify current procedures to create a pathway for those ER physicians in non-designated facilities and who are not on staff at designated facilities to become designated. As long as a Designated Individual remains in the facility, this allows for the maintenance of the hold under 5150 while a suitable inpatient placement is arranged, and for the timely transportation of the patient to the inpatient facility.

Historically BHS has required the physicians to be on staff at a designated facility in order to ensure oversight of practice and thorough training in the current California laws and regulations related to designation. This has been accomplished by each Designated Facility appointing a person to become a Designated Trainer. That Designated Trainer, in turn, trains the staff who will be Designated Individuals. Under the modified requirements, the non-designated facility may:

1. Utilize the Designated Trainer associated with a Designated Facility within their hospital system to perform this function.

Involuntary Holds Within Non-designated Facilities

November 14, 2016

Page 3 of 3

2. For those non-designated facilities that are not part of a hospital system with a Designated Facility, the non-designated facility may appoint a person on their staff to become the Designated Trainer for the non-designated facility.
 - a. Under this option, in order to continue to ensure adequate training regarding designation regulations for these physicians, the non-designated facility's appointed trainer will be expected to complete the same process to become a Designated Trainer as is completed by those Designated Trainers who are associated with a Designated Facility. The Designated Trainer will, in turn, train the ER physicians in compliance with the same processes as are followed by the Designated Trainers at Designated Facilities (see HCA BHS P&P [Designation of Facility Lanterman-Petris-Short Act \(LPS\) Trainers](#))
<https://media.ocgov.com/civicax/filebank/blobdload.aspx?BlobID=50654>

Please contact Debbie Lent, Program Manager Adult and Older Adult Services, if you have any questions or need additional information. Debbie can be reached at (714) 834-5035 or via email at dlent@ochca.com .

Sincerely,



Mary R. Hale, MS, CHC
Deputy Agency Director

MRH:sg

cc: Mark Refowitz, Director, Health Care Agency
Richard Sanchez, Assistant Director, Health Care Agency
Whitney Ayers, Orange County Regional Vice President, HASC