DEPARTMENT OF MENTAL HEALTH
POLICY/PROCEDURE

SUBJECT: **PROVISION OF OFF-SITE MENTAL HEALTH SERVICES**	POLICY NO. **202.27**	EFFECTIVE DATE **11/15/02**	PAGE **1 of 3**
APPROVED BY: Director	SUPERSEDES	ORIGINAL ISSUE DATE **11/15/02**	DISTRIBUTION LEVEL(S) **2**

PURPOSE

1.1 To delineate ethical, legal and professionally appropriate clinical practices and minimize risk in the provision of mental health clinical services as places other than the clinic site or specifically designated areas, schools and other health and social agencies.

POLICY

2.1 The provision of mental health services outside of the clinic environment shall be in accordance with all Department of Mental Health (DMH) policies, parameters and legal requirements, including, but not limited to, those related to DMH Code of Ethics, appropriate documentation and reporting of service activities and the maintenance of client confidentiality.

PROCEDURE

3.1 General guidelines for the provision of professionally appropriate off-site services include:

3.1.1 DMH staff must conduct themselves in a professional, businesslike demeanor during a contact. All actions must be directly conducive to the process of meeting the client's treatment goals.

3.1.2 DMH staff providing off-site services should wear professionally appropriate attire and wear or carry a DMH Identification Badge.

3.1.3 Staff should not smoke in a client's home or in the course of providing services.

3.1.4 Under no circumstances should a client ever enter a DMH clinician's home.

3.1.5 Except for a handshake or arm around a shoulder in the case of a child, or physical contact required by an appropriately licensed clinician to conduct a necessary physical assessment, NO PHYSICAL CONTACT between a DMH staff and client and/or significant others should occur. Professional boundaries must be maintained at all times in accordance with DMH Policy 100.1 "Department of Mental Health Code of Ethics".

3.1.6 With certain exceptions, services provided in a consumer's home or other off-site location should be done only after obtaining the verbal permission of the client, his/her conservator, and/or the client's caretaker(s). Exceptions include LPS assessment and

instances where absence of refusal can appropriately be interpreted as assent, e.g., the necessary assessment of an individual who appears to be severely cognitively compromised.

3.1.7 Responsible privacy and confidentiality should be maintained in contacting clients and providing services outside of DMH facilities, including minimizing opportunities for outside observers to see or hear interactions or receive unauthorized information.

3.1.8 Any concerns regarding off-site services should be brought to the immediate attention of the staff member's supervisor.

3.1.9 All treatment sessions must be carefully and thoroughly documented.

3.1.10 Any confidential client documents, including clinical information, present outside a designated site, when not in immediate use, must be maintained in a locked container under the control of the DMH clinician and must be returned to the designated site in accordance with clinic procedures.

3.1.1.1 Off-site services should be provided in accordance with the Safety and Health Programs Section of the LAC DMH Illness and Prevention Program (See the LAC DMH Injury and Illness Prevention Program manual, Section C r (pages 48-52.)

3.1.1.2 Transportation of consumers must be in accordance with DMH Policy 102.22 "Transportation of Consumers and Their Family Members".

4.1 DMH staff should rarely spend time alone with a minor consumer outside of a clinic or other specifically designated areas. Should a circumstance arise where it is deemed therapeutically necessary to be alone with a minor client, the following guidelines must be followed:

4.1.1 The case should be discussed with the staff member's supervisor.

4.1.2 Clients with a history of making unsubstantiated allegations should **NEVER** be alone with a staff member.

4.1.3 Detailed and accurate documentation should always be maintained.

AUTHORITY

DMH Policy #10.1 "Department of Mental Health Code of Ethics"
LAC DMH Illness and Prevention Program
LAC DMH Injury and Illness Prevention Program
DMH Policy #102.22 "Transportation of Clients and Their Family Members"

REVIEW DATE

This policy shall be reviewed on or before November 15, 2004.