


BHS Policies and Procedures	
 <p>City and County of San Francisco Department of Public Health San Francisco Health Network BEHAVIORAL HEALTH SERVICES</p>	<p>1380 Howard Street, 5th Floor San Francisco, CA 94103 (415) 255-3400 FAX (415) 255-3567</p>
Policy or Procedure Title: Assisted Outpatient Treatment	
<p>Issued By: DocuSigned by: <i>Maximilian Rocha</i> EB51A346C32641B... Maximilian Rocha, LCSW Director of Systems of Care</p> <p>Date: October 18, 2022</p>	<p>Manual Number: 3.02-19</p> <p>References: BHIN No: 22-011</p>

Replaces 3.02-19 of October 19, 2015.

Equity Statement: The San Francisco Department of Public Health, Behavioral Health Services (BHS) is committed to leading with race and prioritizing Intersectionality, including sex, gender identity, sexual orientation, age, class, nationality, language, and ability. BHS strives to move forward on the continuum of becoming an anti-racist institution through dismantling racism, building solidarity among racial groups, and working towards becoming a Trauma-Informed/Trauma Healing Organization in partnership with staff, clients, communities, and our contractors. We are committed to ensuring that every policy or procedure, developed and implemented, leads with an equity and anti-racist lens. Our policies will provide the highest quality of care for our diverse clients. We are dedicated to ensuring that our providers are equipped to provide services that are responsive to our clients' needs and lived experiences.

Purpose:

This policy provides guidelines to BHS staff working as members of the Assisted Outpatient Treatment (AOT) Care Team. Behavioral Health Services is committed to providing services that are in compliance with California Welfare and Institutions Code §§5345-5349.5 and San Francisco Health Code §§4111-4119, as well as all federal, state, and local laws and regulations.

Scope:

This policy applies to BHS staff who are members of the AOT Care Team and working under the direction of the AOT Director.

Policy:

A. AOT CRITERIA

Pursuant to California Welfare and Institutions Code §5346(a) and San Francisco Health Code §4115(b), the AOT candidate (who is a resident of San Francisco) must meet all designated criteria to be considered for the program.

B. REFERRAL TO THE AOT PROGRAM

1. Pursuant to California Welfare and Institutions Code §5346(b)(2) and San Francisco Health Code §4115(a), a referral to AOT can only be made by a **Qualified Requesting Party (QRP)** who meets the designated criteria.
2. The AOT Care Team will obtain relevant collateral information from the QRP regarding the **Referred Individual (RI)**.

C. CONFIDENTIALITY AND PATIENT RIGHTS

1. The AOT Director will be responsible for ensuring that there is secure phone/fax/internet transmission of AOT referrals and protected health information.
2. Initial Contact with RI
 - a) The RI will be provided with an information sheet regarding Patients' Rights in their preferred language.
 - b) The RI will be provided with a document created by the Public Defender's Office regarding Legal Rights in their preferred language.
 - c) AOT Care Team will attempt to obtain informed consent from the RI, for assessment and treatment.
 - 1) AOT Care Team will provide a "Consent for Community Behavioral Health Services Mental Health/Drug and Alcohol Treatment Programs-Assisted Outpatient Treatment" form to the RI in their preferred language.
 - 2) AOT staff will inform the RI that information may be shared with their existing treatment provider (if one exists) for the furtherance of treatment.
 - d) AOT staff will also attempt to obtain a signed "Authorization to Release Private Health Information" from the RI to coordinate care and release medical information.
 - 1) Information can only be shared with the QRP if the above form is signed by the RI.

D. INTAKE AND INVESTIGATION

1. Throughout the investigation (i.e., clinical assessment) period, the AOT Care Team will use engagement tools and the RI's existing support system as strategies to engage the RI for a minimum of 30 days (unless significant deterioration occurs) before considering the filing of a court petition.
2. Crisis Assessment.

If the RI is in acute crisis (i.e. meets criteria for Welf. & Inst. Code §5150) the AOT Care Team

members who have been authorized to initiate involuntary holds will assess and initiate a hold as necessary and coordinate safe transition to a hospital setting, including required documentation of the assessment and any barriers to placement.

3. Safety.

If the RI has a history of violent behavior and there is a reasonable concern for staff and/or public safety, the AOT Care Team may request a civil standby protection (i.e. police officer supervising interaction) from the San Francisco Police Department (SFPD). The AOT Care Team will assess the impact of this on the therapeutic/working relationship with the RI.

E. FILING A COURT PETITION

1. There are seven categories of people authorized to request a petition with the AOT Director: (1) anyone over 18 with whom RI resides, (2) a close relative of the RI, (3) a current provider, (4) the director of a mental health service or hospital, (5) the director of a treatment facility where the RI resides, (6) a peace, probation, or parole officer who is assigned to supervise the individual, or (7) a judge of a superior court before whom the RI appears. (Welf. & Inst. Code §5346(b)(2) and S.F. Health Code §4115(a).)
2. Based on the assessment completed in the investigation phase, the AOT Director will determine if there is clear and convincing evidence to support a petition (Welf. & Inst. Code §5346(b)(3) and S.F. Health Code §4115(e).). If this standard is met, the AOT Director or their designee will submit a referral packet, a supporting affidavit from a licensed mental health care provider, and a petition to the District Attorney's Office for determination that the petition meets jurisdictional standards (Welf. & Inst. Code §5346(b)(5)(A)-(B) and S.F. Health Code §4115(c).)
3. The petition must state the criteria from the Welfare and Institutions Code and the S.F. Health Code. (Welf. & Inst. Code §5346(a) and S.F. Health Code §4115(b).).
4. The AOT Care Team will provide the RI with a copy of the petition and Notice of Hearing. The City Attorney's Office will provide a copy of both to the Public Defender's Office, San Francisco Mental Health Patient's Rights, current treatment provider (if one exists), and relevant support person designated by RI. (Welf. & Inst. Code §5346(d) and S.F. Health Code §4116(a).)
5. The RI shall also be advised of his/her rights to be represented by counsel, and if the RI cannot afford counsel, to be represented by the Public Defender, to be present at all of the hearings, to his/her right to judicial review by habeas corpus, to present evidence, call and examine witnesses, cross-examine witnesses, and to appeal the court's decision. This information will be reviewed by counsel. (Welf. & Inst. Code §5346(d)(4) and S.F. Health Code §4116(a).)

F. COURT HEARING AND COURT ORDERED TREATMENT

1. The RI may enter into a Settlement Agreement (SA) and treatment engagement will be monitored by the court. (Welf. & Inst. Code §5347, S.F. Health and Safety §4115(d).)

2. If RI does not enter into a SA, the court will hold a hearing within five days from when the court receives the petition, excluding weekends and holidays. (Welf. & Inst. Code §5346(d)(l).)
3. The court will not mandate treatment unless a licensed mental health provider, who has personally examined the RI/made reasonable efforts to examine the RI and available treatment history within the period commencing 10 days before the filing of the petition, testifies at the hearing. (Welf. & Inst. Code §5346(d)(2).)
4. If the court finds that the RI meets the AOT criteria and there is no other feasible, less restrictive alternative, it may order the RI to receive AOT for an initial period not to exceed 180 days. If the RI does not meet the criteria, the court will dismiss the petition. (Welf. & Inst. Code §5346(d)(5) S.F. Health Code §4115(e).)
5. If the AOT Director determines the RI requires additional treatment, he/she may request, before the expiration of the initial court ordered treatment period, an additional treatment period not to exceed 180 days beyond the initial order. (Welf. & Inst. Code §5346 (g., S.F. Health Code §4116(g).)
6. The AOT Director will file an affidavit at intervals no less than 60 days to affirm that the RI continues to meet the AOT criteria. The RI has the right to a hearing at the time of filing to determine whether he/she continues to meet the AOT criteria. The RI also has the right to file a petition for a writ of habeas corpus requiring the AOT Director to prove that the RI continues to meet the criteria for treatment. (Welf. & Inst. Code §5346(h), (i), S.F. Health Code §4116 (c), (h).)

G. TREATMENT

1. Voluntary Services.

- a) The AOT Care team will offer voluntary services throughout the investigation and will offer clinically appropriate resource information and services. (S.F. Health Code §4114.)
- b) If an RI initially consents to treatment, but fails to engage, the mental health treatment agency may contact the AOT Care Team to initiate an ongoing investigation.

2. AOT Services

If an RI enters an SA or is ordered by the court to participate in treatment, they will be connected to the Full-Service Partnership (FSP) contracted to provide designated services in compliance with the treatment plan of care for the term of the court ordered treatment.

H. DOCUMENTATION

The AOT Care Team shall maintain appropriate documentation of all activities as outlined in California Welfare and Institutions Code §§5345-5349.5 and San Francisco Health Code §§4111-4119.

I. RECORDS

The AOT Care Team shall maintain appropriate records of all activities in accordance with all federal, state, and local laws and regulations.

Contact Person: AOT Director

Attachment(s):

Attachment 1: Consent for Community Behavioral Health Services Mental Health/Drug and Alcohol Treatment Programs-Assisted Outpatient Treatment

Attachment 2: Authorization to Release Private Health information

Attachment 3: Patients' Rights

Attachment 4: Legal Rights

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