

# LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH



**Policy Title:** Access to Care

**Policy Number:** 302.07

**Policy Category:** Clinical

**Distribution Level:** Directly-Operated Programs and Contracted Agencies

**Responsible Party:** Quality Assurance

## I. POLICY STATEMENT

The purpose of this policy is to establish policy and procedures regarding access to care for initial and subsequent requests for services, including screening/triage requirements and time frames for appointments.

Contracted agencies shall develop an internal policy and associated procedures that are consistent with their organizational practices and meet the requirements set forth in this policy.

## II. DEFINITIONS

**Appointment:** A time slot allotted for a service including emergency/non-scheduled response time.

**Authorized Mental Health Discipline:** Eligible disciplines that may provide direction regarding the care of clients in the DMH System of Care. Eligible disciplines are:

- Licensed Psychiatrist/Physician, (MD/DO);
- Certified Nurse Practitioner (NP), registered Clinical Nurse Specialist (CNS), Registered Nurse (RN);
- Licensed or waived Psychologist (PhD/PsyD);
- Licensed Clinical Social Worker (LCSW) or registered Masters in Social Work (Associate Clinical Social Worker - ASW) or out-of-state licensed-ready waived Masters in Social Work;
- Licensed Marriage and Family Therapist (LMFT) or registered Marriage and Family Therapist (Associate Marriage and Family Therapist) or out-of-state licensed-ready waived Marriage and Family Therapist; and
- Licensed Professional Clinical Counselor (LPCC) or registered Professional Clinical Counselor (PCC).

**Emergency Service:** Service needed for client or potential client who may present a current danger to self or others or is immediately unable to provide for or utilize food, clothing, or shelter.

**Expedited Service:** Service needed prior to the next available routine appointment. Expedited services are not required to be provided on the same day as the request.

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***Request for Service:*** Any service request made by the client, potential client, or someone on their behalf whether for an initial or a subsequent appointment.

***Routine Service:*** Service not to necessitate emergency, urgent, or expedited services and scheduled for the first available appointment within the prescribed time frame.

***Urgent Service:*** Service needed for the client or potential client who may present with a condition or situation that, if not addressed, would be highly likely to result in an immediate emergency condition.

### III. POLICY

All requests for service whether request is made by the client, potential client, or someone on their behalf, shall be screened and/or triaged to determine whether the need for service is emergency, urgent, expedited, or routine. If the request is an initial request for services, it must also be handled in accord with DMH Policy 302.14.

- Triage is not required for all requests for services. Triage must be completed when screening indicates the client or potential client is in distress and/or they have run out of medications.

All missed or canceled appointments shall be screened and/or triaged at the point of non-attendance or cancellation to determine if the appointment needs to be re-scheduled and, if so, how soon the client or potential client needs to be seen.

Offered appointment times shall be based upon client preference and availability of the necessary service provider.

All appointments shall be offered within the time frames identified in the Procedures section.

- If multiple time frame requirements are identified based on screening and/or triage (e.g., discharge from institution, about to run out of medications, has run out of medications), the shortest required time frame must be adhered.
- If a provider is unable to meet a time frame requirement and it is determined that waiting would be detrimental to the health of the client as noted in procedures, the client or potential client shall be referred to another provider, Service Area Navigator, or Psychiatric Urgent Care Center as appropriate.

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## IV. PROCEDURES

[Click here to view procedures.](#)

## V. AUTHORITIES

[California Code of Regulations Title 28 Section 1300.67.2.2](#)

[Code of Federal Regulations Title 42 Section 438.68](#)

[Department of Health Care Services MHSUDS Information Notice No. 18-011](#)

[DMH Policy 302.12, Provision of Services without a Scheduled Appointment](#)

## VI. ATTACHMENT

[Notice of Action E \(MH 727\)](#)

## VII. EFFECTIVE DATES


Effective Date: August 15, 2003

Review Dates: September 1, 2014 Reviewed with Revisions

May 2, 2016 Reviewed with Revisions

July 10, 2019 Reviewed with Revisions

## VIII. SIGNATURE, TITLE, and DATE OF APPROVAL

  
\_\_\_\_\_  
Name/Title

  
\_\_\_\_\_  
Date