



Los Angeles County
DEPARTMENT OF MENTAL HEALTH

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DIRECTOR

October 1, 2018

The Los Angeles County Department of Mental Health (LACDMH/Department) is dedicated to providing and administering mental health services that promote hope, wellbeing, recovery, and independence with honesty and integrity. We demonstrate this commitment by adhering to the highest ethical principles and complying with all applicable laws, rules, regulations, policies, and procedures.

As a member of the Department's workforce, it is essential for you to fully understand and abide by this new edition of the *Code of Conduct, Ethics, and Compliance (Code)*. Program managers and supervisors should discuss the Code with their staff -- which details the behavioral, ethical, and professional standards and expectations to which all LACDMH workforce members are held accountable -- and be proactive in answering any and all questions that arise.

New workforce members receive a copy of the Code as they process into the Department with the Human Resources Bureau, and the access is always available on the LACDMH website at <http://lacdmh.lacounty.gov/ContractorsPolicies/index.htm>. All workforce members are required to sign a Policy Certification acknowledging that they have reviewed this document and understand its provisions as part of their Probationary/Annual Performance Evaluation Packet.

Please contact the Los Angeles County Fraud Hotline at (800) 544-6861 if you have any questions, concerns, or reason to believe there has been a violation. And many thanks for your commitment to our shared mission on behalf of all Los Angeles County residents.

Sincerely,

Jonathan E. Sherin, M.D., Ph.D.
Director, Los Angeles County Department of Mental Health

**LOS ANGELES COUNTY
DEPARTMENT OF MENTAL HEALTH**

**CODE OF ORGANIZATIONAL CONDUCT, ETHICS, AND
COMPLIANCE**

2018



LACDMH
LOS ANGELES COUNTY
DEPARTMENT OF
MENTAL HEALTH
hope. recovery. wellbeing.

Jonathan E. Sherin, M.D., Ph.D.

Director of Mental Health

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PURPOSE

The Los Angeles County Department of Mental Health (LACDMH/Department) is committed to building and supporting an organization that demonstrates honesty, integrity, ethics, and best practices. Accordingly, LACDMH has recently taken the opportunity to review and update its mission, vision, and values statements.

This document known as the *Code of Organizational Conduct, Ethics, and Compliance* (CCEC) provides the elements, purpose, and responsibilities of the Department's Compliance Program, as well as employee obligations and responsibilities. It sets forth principles and standards intended to guide the actions and decision-making processes for the entire LACDMH workforce¹.

¹ LACDMH workforce is defined as employees, volunteers, interns, trainees, and other persons whose conduct in the performance of their work is under the direct control of LACDMH, whether or not they are paid by the County.

LACDMH MISSION, VISION, AND VALUES

Mission

To optimize the hope, wellbeing, and life trajectory of Los Angeles County's most vulnerable by delivering services that promote independence through personal recovery and connectedness through community reintegration.

Vision

LACDMH envisions a county that, through diversified collaboration and with unified intention across all sectors, provides those impaired by serious mental conditions and languishing in substandard environments with timely and easy access to the services, opportunities, environments, and amenities needed to stabilize, heal, and flourish.

Values

1. **Integrity:** We conduct ourselves professionally, according to the highest ethical standards.
2. **Respect:** We recognize the uniqueness of every individual and treat all people in a way that affirms their personal worth.
3. **Accountability:** We take responsibility for our choices and the outcomes.
4. **Collaboration:** We work together toward common goals by partnering with the whole community, sharing knowledge, building consensus, and sharing decision making.
5. **Dedication:** We will do whatever it takes to improve the lives of our clients and communities.
6. **Transparency:** We openly convey our ideas, decisions, and outcomes to ensure trust in our organization.
7. **Quality and Excellence:** We identify with the highest personal, organizational, professional, and clinical standards and commit ourselves to achieving those standards by continually improving every aspect of our performance.

INTRODUCTION TO THE COMPLIANCE PROGRAM

There are many definitions of a compliance program. Basically, compliance is about prevention and detection of fraud, waste, and abuse; collaboration; and enforcement. It is a system of policies and procedures developed to assure compliance with all applicable federal, State, and County statutes, rules, regulations, policies, and procedures.

An effective compliance program is constantly evolving and is part of organizations that are committed to conducting business in an ethical way. In other words, it is a system for doing the right thing.

LACDMH has established a compliance program and is committed to operating in an ethical and compliant manner. A compliance program alone cannot maintain a culture of ethics and compliance; it requires every member of the workforce to be committed to such a culture.

LACDMH's Compliance Program is to operate independently, with objective oversight, in a manner consistent with the requirements of the Department of Health and Human Services, Office of the Inspector General², and in compliance with the requirements of the Department of Health Care Services (DHCS). The Compliance Program is responsible for promoting the highest ethical behaviors within LACDMH and within the community of the Department's contractors and stakeholders ([Appendix A](#)). These objectives are carried out through various training programs, audits, investigations, and inspections; and through instructions and priorities identified by the Compliance Program Steering Committee, County Counsel, and the Auditor-Controller. LACDMH employees are encouraged to stay informed about available training opportunities by contacting Workforce Development at (213) 251-6879 or by visiting the web site: <http://dmhhgportal1/sites/TCCB/default.aspx>. LACDMH program managers shall inform employees about available training opportunities.

Employee Responsibilities

It is the responsibility of each member of the LACDMH workforce to exercise good judgment and behave in a manner that represents the highest standards of professional and personal conduct. In addition to the guiding principles and standards discussed in this document, workforce members should review and be familiar with *LACDMH Policies and Procedures* and *LACDMH Parameters for Clinical Practice* ([Appendix B](#)). Policies and procedures can be viewed on the LACDMH internet web site; and clinical practice parameters can be found on the LACDMH internet web site:

http://dmh.lacounty.gov/wps/portal/dmh/clinical_tools/clinical_practice

Members of the LACDMH workforce are to comply with the CCEC and all policies, procedures, and practices of LACDMH that relate to their employment. Non-supervisory LACDMH workforce members are encouraged to promptly report and LACDMH supervisors and managers have an affirmative duty to promptly report perceived violations of this Code and/or

² CFR, Title 42, Section 438.608

any violations of federal, State, County, or Departmental statutes, rules, regulations, policies, or procedures. Such a report should be made to the direct supervisor or program manager, or may be made anonymously by calling the County Fraud Hotline at (800) 544-6861 as described in the *Compliance Program Communication and Reporting* section below. Failure to comply with the CCEC or with the qualitative or quantitative elements of employee performance, including reporting violations, may result in disciplinary action and/or the application of sanctions in accordance with applicable laws, regulations, County codes, and LACDMH policy.

LACDMH will not knowingly hire or continue to employ individuals who have been recently convicted of a criminal offense related to health care, or are suspended, debarred, excluded, or otherwise ineligible to provide goods or services under any federally funded health care programs. The Department reviews both the Federal and State lists for exclusions and suspensions. It is the responsibility of the workforce member to notify their program manager or supervisor in writing immediately should the member of the workforce, during the course of their employment, become suspended, excluded, or debarred from providing services under any federally funded health care program. (LACDMH Policy 106.03, [Employees Ability to Provide Goods and Services Under Federally Funded Health Care Programs](#))

LACDMH strongly believes in the dignity and value of individuals and expects the same beliefs from its workforce. As such, the LACDMH expects all of its members to act with the highest integrity when interacting with fellow workforce members, clients, other service providers, and the public. Professionals must also understand that the LACDMH CCEC does not include an exhaustive list of all applicable ethical and professional rules of conduct. LACDMH expects all of its workforce members to abide by all applicable professional and ethical canons and rules.

Questions or Concerns Related to Matters of Compliance

LACDMH recognizes the critical importance of identifying and appropriately responding to actions or behaviors that are not consistent with the CCEC, Department Policies and Procedures, or other codes, rules, regulations, or laws that relate to or govern business and clinical operations. Errors, non-compliant actions, or inappropriate behaviors are frequently a result of a lack of clarity in rules, regulations, or procedures.

LACDMH believes that most questions or concerns related to actions or behaviors inconsistent with the CCEC, Department Policies and Procedures, or other codes, rules, regulations, or laws that relate to or govern business and clinical operations can be resolved promptly on a division, bureau, or organizational level. Employees are encouraged to contact their immediate supervisor or program manager to discuss questions or concerns related to compliance.

If consultation with an employee's immediate supervisor or program manager does not clarify or address the issue raised by the employee, or if the nature of the questions or concerns directly involves actions or behaviors of the supervisor or program manager, the Department has created an alternate means (see below) for employees to raise questions, express concerns, or report perceived ethical or legal violations.

***Compliance Program Communication and Reporting
(Alternative Means of Reporting)***

In addition to contact with an employee's immediate supervisor or program manager, an employee may raise questions regarding compliance, report perceived ethical or legal violations to the Compliance Officer, or make an anonymous report using the County of Los Angeles Fraud Hotline and as discussed in LACDMH Policy 106.01, [Compliance Program Communication](#). Note that the fraud reporting is handled by the Auditor-Controller Office of County Investigations (OCI). Contact information:

Auditor-Controller OCI - Web site	http://fraud.lacounty.gov/
Auditor-Controller OCI - Phone	(800) 544-6861
Auditor-Controller OCI - Email	fraud@auditor.lacounty.gov
Auditor-Controller OCI - Fax	(213) 633-0991
Auditor-Controller OCI - Mail	Office of County Investigations 500 W. Temple Street, Room 515 Los Angeles, CA 90012

Non-Retaliation for Good Faith Reporting

LACDMH complies with the County of Los Angeles Code, as does the Auditor-Controller OCI, which prohibits retaliation against anyone who, in good faith, reports an occurrence that he/she believes to constitute a work-related violation by a County officer or employee of any law or regulation; gross waste of County funds; gross abuse of authority; a specific and substantial danger to public health or safety due to an act or omission of a County official or employee; use of a County office, position, or resources for personal gain; or a conflict of interest of a County officer or employee. (Title 5 - Personnel, Section 5.02.060 [[Appendix C](#)])

Non-retaliation is consistent with federal and DHCS False Claim Acts. LACDMH employees should be familiar with the following two (2) LACDMH policies that were created and distributed in compliance with the Federal Deficit Reduction Act of 2005:

LACDMH Policy 106.05, [Fraud, Waste, and Abuse Prevention](#)

LACDMH Policy 106.06, [The False Claims Act and Related Laws](#)

THE CODE OF ORGANIZATIONAL CONDUCT, ETHICS, AND COMPLIANCE

Objectives of the Code of Organizational Conduct, Ethics, and Compliance

It is the intention of LACDMH to utilize the CCEC as a means of orienting all employees to the principles and standards that are embraced by LACDMH and to serve as a source of ongoing commitment and guidance to all employees of LACDMH. Every member of the LACDMH workforce will be required to certify in writing that they have received a copy of and will abide by the principles and standards set forth in the CCEC. Such certification will be required when the employee is hired and annually as a component of the performance evaluation process.

The CCEC applies to all employees of LACDMH and will be utilized in assessing employee job performance. All employees are expected to comply with the CCEC and supervisors are obligated to ensure compliance. Adherence to the highest ethical and legal behavior will not only further LACDMH's ability to effectively carry out its mission, but will serve to maintain and foster a relationship of trust between LACDMH and its clients, families, and community we serve.

In addition to covering the LACDMH workforce, the CCEC also governs the conduct of persons and entities that contract with LACDMH. LACDMH provides its contractors with copies of the CCEC.

Principles and Standards Governing Organizational Conduct

The following principles and associated standards are intended to guide actions and decision-making processes by LACDMH's workforce³. Members of the LACDMH workforce are expected to abide by these principles and standards and are to conduct business in a manner consistent with the values, principles, and standards described in the CCEC. Members of the LACDMH workforce should be familiar with *LACDMH Policies and Procedures* and, as appropriate to an employee's position and classification, the *LACDMH Parameters for Clinical Practice*. These resources should be used to clarify specific steps to ensure departmental compliance.

1. Legal Compliance

LACDMH is committed to conducting all administrative, clinical, and/or service activities in an ethical manner, complying with all applicable laws, regulations, standards, and codes.

- a) Members of the LACDMH workforce are prohibited from making or causing to be made any false or fraudulent statement or representation that relates to the

³ LAC DMH Workforce is defined in footnote 1 on page 1.

benefits or payment from any federally funded health care program or other third party payer source.

- b) Members of the LACDMH workforce are prohibited from soliciting or receiving any payment or other benefit (e.g., lunch provided by pharmaceutical companies), directly or indirectly, for referring an individual for items or services reimbursable in whole or in part by any federally funded health care program.
- c) Members of the LACDMH workforce are prohibited from soliciting or receiving any payment or benefit in exchange for recommending or arranging for the purchase of goods or services for which a federal health care program will pay.
- d) LACDMH shall recommend only qualified mental health providers (specifically, contractors who are not excluded, suspended, or ineligible to bill federal programs) and other vendors of goods to the Board of Supervisors for contract awards in accordance with all applicable County policies and procedures utilizing established evaluation criteria.
- e) Members of the LACDMH workforce are prohibited from engaging in any personal political activity whatsoever during working hours or on County premises.
- f) Members of the LACDMH workforce may not directly or indirectly use official authority to interfere with any election or influence political actions of other County employees or any member of the general public; however, the LACDMH Legislative and Public Information Officers may offer recommendations concerning legislation or regulations being considered through recognized channels of communication with the Office of Legislative Affairs, Chief Executive Office.
- g) LACDMH is committed to providing a work environment that is free from harassment, discrimination, and inappropriate conduct toward others. (LACDMH Policy 605.02, [Harassment](#))
- h) Employees may not be appointed, reduced, removed, favored, or discriminated against in employment on the basis of any protected status identified under State and/or federal law(s).

2. Professional Ethics

LACDMH is committed to conducting administrative and service activities in compliance with professional codes of ethics.

- a) Members of the LACDMH workforce shall avoid misrepresentation of his/her own professional qualifications, affiliations, and purposes; or those of the colleagues, institutions, and organizations with which the staff member is associated.
- b) Members of the LACDMH workforce shall demonstrate respect and dignity to those persons encountered in the line of work.

- c) Members of the LACDMH workforce shall not deny services to clients because of their sex, race, ancestry, age, color, religion, national origin, disability, marital status, medical condition, sexual orientation, or any other legally recognized protected class.
- d) All members of the LACDMH workforce shall comply with the Department's sexual harassment policies (LACDMH Policies 605.02, [Harassment](#) and 302.05, [Reporting Alleged Sexual Behavior with Clients](#)). The professional relationship between a therapist and a client shall be based on accepted therapeutic principles and standards as determined by LACDMH and the therapist's professional code of ethics.

3. Business Ethics

LACDMH is committed to conducting business in an honest and ethical manner.

- a) Members of the LACDMH workforce shall be honest and perform their duties with the highest integrity.
- b) Members of the LACDMH workforce shall not knowingly make misrepresentations or false statements, or encourage others to knowingly misrepresent or make false statements, to any clients, families, community members, or others doing business with or monitoring services by LACDMH.
- c) Members of the LACDMH workforce shall not inappropriately use confidential or other information that belongs to, or is the property of another person or entity, including computer software, publications, and other proprietary documents.
- d) All contractors doing business with LACDMH shall comply with the CCEC and all applicable laws, regulations, codes, and Departmental policies.

4. Conflict of Interest

Members of the LACDMH workforce shall not use their position as Department employees to profit in any way or assist others to profit in any way as a result of their employment or association with LACDMH.

- a) Members of the LACDMH workforce shall conduct themselves in such a way as to avoid any perceived or actual situations involving conflict of interest. This includes, but is not limited to:
 - Referral of clients receiving mental health services from LACDMH to any private service – whether psychological, legal, or the like – that may be of potential monetary benefit to the employee, employee member's associates, or immediate family;
 - Any work-based activity which may affect or appear to affect private interests, financial or non-financial; or

- Any apparent preferential treatment to any private/public organization or individual.
- b) Non-supervisory LACDMH Employees are encouraged to promptly report, and LACDMH supervisors and managers have an affirmative duty to promptly report, potential conflict of interest situations and consult with the appropriate supervisor regarding procedures to be followed in situations where potential or actual conflict of interest situations may exist.
- c) LACDMH employees designated within the [Statement of Economic Interest](#) (Form 700), as approved by the County of Los Angeles Board of Supervisors, shall accurately represent and disclose personal financial information in compliance with the procedures outlined in LACDMH Policy 608.06, [Statements of Economic Interests](#).

5. Confidentiality

Members of the LACDMH workforce shall maintain the confidentiality/privacy of client and employee information in accordance with all applicable laws including, but not limited to, the Health Insurance Portability and Accountability Act (HIPAA) regulations ([Appendix D](#)), County codes, and Department policies. (Welfare and Institutions Code, Section 5328)

- a) Members of the LACDMH workforce shall safeguard all forms of confidential information and take appropriate steps to prevent any unauthorized disclosure.
- b) Confidential client information (also referred to as Protected Health Information [PHI]) includes any information that is held by LACDMH and was originally obtained by any individual or entity in the course of providing services to an individual, whether oral or recorded, in any form or medium.
- c) Confidential employee information includes any information related to the hiring and employment of individuals, such as information contained in personnel files, payroll information, medical leave information, disciplinary actions, and similar information.

6. Protection of Assets

Members of the LACDMH workforce shall safeguard the County's assets from loss. Assets include revenues, property, and other Department and/or County resources.

- a) Reports relating to claims for services, employee time sheets, or other financially related data reports shall be compiled in an accurate and non-misleading manner.
- b) Members of the LACDMH workforce shall utilize Department assets, property, and resources in a prudent and effective manner.

- c) Members of the LACDMH workforce are prohibited from using County-owned equipment, materials, or property for personal use and/or profit.

7. Quality

LACDMH is committed to providing the highest quality of care by operating a comprehensive program of continuous quality improvement.

- a) Members of the LACDMH workforce shall maintain the highest standards of professional competence and quality.
- b) Members of the LACDMH workforce shall be responsible for recognizing the limitations of their competencies and will provide only services or perform procedures with which they are qualified and familiar.
- c) Members of the LACDMH workforce shall seek appropriate consultation for problematic issues of client care.
- d) Members of the LACDMH workforce shall make every effort to recognize and avoid personal behavior and situations that may impair their ability to treat clients (e.g., use of drugs, undue emotional stress, and lack of proper rest).
- e) When any member of the LACDMH workforce observes a colleague behave or act in a way that may harm a client, non-supervisory staff is encouraged to, and all supervisory staff must, intervene and stop this conduct.
- f) LACDMH shall provide appropriate and effective clinical services that are medically necessary, client focused, evidence-based, and delivered in the least restrictive manner possible. Services shall also be deemed appropriate by LACDMH based on accepted community standards of care. Controversial or unconventional approaches shall be used with extreme caution and approved by appropriate supervisory or management staff prior to initiation.
- g) LACDMH shall maintain an effective quality improvement program that, at a minimum, examines those areas mandated by DHCS.
- h) LACDMH shall provide effective planning and program administration, including ongoing training opportunities designed to provide employees the means to improve the efficiency and effectiveness of their employment responsibilities.

8. Clinician-Client Relationships

LACDMH is committed to maintaining high professional standards and behaviors between clinician and client.

- a) The relationship between a clinician and a client shall be based on accepted therapeutic principles and standards as determined by LACDMH and the clinician's profession, as established in pertinent professional codes of ethics.

- b) The clinician shall make every effort to maintain professional and objective personal conduct with clients, clients' families, and/or close associates.
- c) The clinician shall have a professional concern for his/her client and make every effort to maintain professional concern within the bounds of the clinician's professional responsibilities so as to safeguard the welfare of the client both during and after treatment.
- d) The clinician shall make every effort to discourage the development of personal favors and/or obligations in the therapeutic relationship.
- e) A clinician, in collaboration with management, shall monitor services in such a way as to avoid the fostering of personal obligations, such as sexual favors or financial collaborations.
- f) The clinical relationship shall never include behaviors on the part of the clinician which reasonable persons could agree are abusive, damaging, or demeaning to the client and not in the client's best interest. Any sexual behavior is interpreted to be abusive or damaging.
- g) Per California State law, sexual involvement with a client constitutes unprofessional conduct and is grounds for disciplinary and legal action, both during treatment and for at least two years following termination of the therapist client relationship. (Civil Code 43.93)
- h) A clinician, in consultation with his/her supervisor, shall attempt to terminate services and/or transfer a client when it is reasonably clear that the client will not benefit from the current clinical relationship.
- i) With the support of LACDMH management, care shall be taken to ensure an appropriate setting for clinical work to protect both client and clinician.
- j) A clinician having pre-existing social ties or relationships with a person seeking service shall carefully evaluate with the supervisor his/her capability to treat the client effectively.
- k) Each clinician shall make every effort to ensure the continuity of his/her client's care.
- l) A clinician shall not knowingly offer clinical services to a client who has a pre-existing professional relationship with a colleague without the colleague's knowledge unless requested by the client and/or in an emergency situation.

9. Dress Code

LACDMH provides a wide variety of client-centered, family-focused, and recovery-oriented services. The professional image of its employees is intended to foster respect and earn the confidence of clients, contract providers, the public, vendors, and fellow

employees; promote a positive work environment; and ensure safety and security while working.

- a) All members of the LACDMH workforce shall comply with the Department's dress code. (LACDMH Policy 609.08, [Professional Appearance in the Workplace](#))
- b) Employees shall appear neat and groomed; dress appropriately for their assignment; and take into consideration contact with the public, clients, patients, and other individuals, including government officials and other professionals.
- c) Supervisors shall monitor appropriate dress and advise staff.

10. Cultural Competence

LACDMH is committed to providing culturally competent services and programs ([Appendix E](#)).

- a) All LACDMH workforce members shall show respect for persons of all cultural and linguistic backgrounds by providing clinically competent, culturally sensitive, and linguistically appropriate services.
- b) All LACDMH workforce members shall avoid participation in or condoning discriminatory practices and shall treat each other and each client equally and with compassion.

11. Just Culture

LACDMH, as a part of the Health Agency and together with the Departments of Health Services and Public Health, strives to foster a Just Culture by utilizing a fair and systematic approach that balances a non-punitive learning environment with the equally important need for accountability. Just Culture is a guiding principle and practice that recognizes that adverse events are a result of human error or system failures, rather than reckless or intentionally malicious behavior, and works to identify and fix systemic flaws to prevent harm without placing inappropriate blame on individuals. It is a culture in which the identification of system problems is seen as a means for improving safety and quality of services and can, therefore, be easily reported without retaliation (LACDMH Policy 100.05, [Just Culture](#))

12. Equity

All LACDMH workforce members shall conduct themselves in accordance with the County's [Policy of Equity](#). The County will not tolerate unlawful discrimination on the basis of age (40 and over); ancestry; color; ethnicity; religious creed (including religious dress and grooming practices); denial of family and medical care leave; disability (including mental and physical disability); marital status; medical condition (cancer and genetic characteristics); genetic information; military and veteran status; national origin

(including language use restrictions); race; sex (including pregnancy, childbirth, breastfeeding, and medical conditions related to pregnancy, childbirth, or breastfeeding); gender; gender identity; gender expression; sexual orientation; and any other characteristic protected by State or federal law.

13. Communication

LACDMH will provide information regarding laws, regulations, County codes, and Department standards and expectations to its employees, clients, families, and other members of the mental health community. LACDMH will also facilitate the exchange of information from all organizational levels to its employees, clients, and other members of the mental health community.

- a) LACDMH will provide current information to its workforce, contractors, clients, and family members regarding the rules, regulations, rights, and obligations that govern their participation in the LACDMH system of service delivery.
- b) Members of the LACDMH workforce should seek advice from their supervisor or program manager regarding issues about which they are unclear or uncertain, such as job responsibilities, interpretation of policy and procedures, or ethical dilemmas.
- c) Members of the LACDMH workforce may contact the Compliance Officer, either formally or informally, to clarify questions or concerns related to ethical, legal, or policy matters. To contact the Compliance Officer please call (213) 739-2390 or send an e-mail to: compliance@dmh.lacounty.gov.
- d) The County of Los Angeles operates a Fraud Hotline that may be contacted to report perceived ethical or legal violations. Informants may remain anonymous. Contact the County of Los Angeles Fraud Hotline by calling (800) 544-6861 or by submitting an e-mail to: fraud@auditor.lacounty.gov.
- e) LACDMH complies with the *County of Los Angeles Code* ([Appendix C](#)), which prohibits retaliation against anyone who, in good faith, reports something that they believe to be:
 - A work-related violation of any law or regulation by a County employee or officer;
 - Gross waste of County funds;
 - Gross abuse of authority;
 - Specific and substantial danger to public health or safety due to an act or omission of a County official or employee;
 - Use of a County office, County position, and/or County resources for personal gain; or
 - A conflict of interest of a County officer or employee.

14. Research Ethics

It is the policy of LACDMH that any research conducted in the Department shall meet the highest clinical and ethical standards.

- a) The Human Subjects Committee reviews all proposed research projects and approves only those that adhere to the highest clinical and ethical standards.
- b) In accordance with the standards set forth in the *Belmont Report*⁴, the Human Subjects Committee will uphold the following principles:
 - Respect - All participation in research is voluntary and will only occur following informed consent. Pressure or coercion of any sort will not be tolerated.
 - Beneficence - The well-being of our clients is paramount. Subjects of research will not be intentionally harmed, nor will their involvement in research compromise the delivery of the highest quality care. Research will be directed at maximizing possible benefits. Every effort will be made to monitor and minimize any potential risks.
 - Justice - The burdens and benefits of research must be distributed fairly. No one should be exposed to risk, if there is no potential for him or her to benefit. Individuals with mental illnesses must not carry the burdens of research for society at large.

⁴ The *Belmont Report* is a report created by the former United States Department of Health Education and Welfare (renamed Health and Human Services) entitled, "Ethical Principles and Guidelines for the Protection of Human Subjects of Research," and is an important historical document in the field of medical ethics.

APPENDIX A

The Compliance Officer

The Compliance Officer is responsible for the day-to-day operations of the Compliance Program. This includes working with staff to develop policies and procedures, training programs, and communication tools. The Compliance Officer also provides support to Compliance Program staff who follow up on allegations of fraud, waste, and abuse; conduct risk assessments, audits, and monitoring reviews; and write and assist LACDMH in establishing, updating, and retiring Departmental policies and procedures.

Compliance Program Oversight

LACDMH has established a Compliance Program Steering Committee (CPSC) that is responsible for oversight, monitoring, and direction of the LACDMH Compliance Program. CPSC also works with the Compliance Program in the coordination and resolution of significant policy issues for the Department.

APPENDIX B

LACDMH Policies and Procedures Manual

The purpose of *LACDMH Policies and Procedures* is to provide information, guidelines, and standardization for Department operations. The manual covers program, clinical, administrative, fiscal, and operating policies and should be used as the basis for work performance. Due to the scope of information covered by LACDMH Policies and Procedures, reference cannot be made to each individual policy. Employees should consult the LACDMH Policy and Procedures Manual to obtain specific information on the implementation of LACDMH policies, or to review new or revised policies. In particular, employees should be familiar with those policies and procedures that govern the performance of their work and responsibilities as a Department employee.

LACDMH Policies and Procedures may be viewed on the LACDMH internet at <http://lacdmh.lacounty.gov/ContractorsPolicies/index.htm>

LACDMH Parameters for Clinical Practice

The *LACDMH Parameters for Clinical Practice* represent critical factors to be considered in the provision of care and are neither absolute nor comprehensive treatment guidelines. These parameters reflect current interpretation of best practices and are subject to change as new information and techniques become available.

The *LACDMH Parameters for Clinical Practice* are designed to encourage consultation, monitoring, and supervision at all clinical sites. Practice outside of LACDMH parameters requires special justification, documentation, and, in some instances, supervisory approval.

LACDMH Parameters for Clinical Practice may be viewed on the internet at: http://dmh.lacounty.gov/wps/portal/dmh/clinical_tools/clinical_practice.

APPENDIX C

No Retaliation

Los Angeles County Code, Title 5, Personnel, Section 5.02.060, Retaliation for reporting fraud, waste or misuse of County resources prohibited

- A. No officer or employee of the County of Los Angeles shall use or threaten to use any official authority or influence to restrain or prevent any other person, acting in good faith and upon reasonable belief, from reporting or otherwise bringing to the attention of the County Auditor-Controller or other appropriate agency, office, or department of the County of Los Angeles any information which, if true, would constitute: a work-related violation by a County officer or employee of any law or regulation; gross waste of County funds; gross abuse of authority; a specific and substantial danger to public health or safety due to an act or omission of a County official or employee; use of a County office or position or of County resources for personal gain; or a conflict of interest of a County officer or employee.
- B. No officer or employee of the County of Los Angeles shall use or threaten to use any official authority or influence to effect any action as a reprisal against a County officer or employee who reports or otherwise brings to the attention of the Auditor-Controller or other appropriate agency, office or department of the County of Los Angeles any information regarding subjects described in subsection A of this section.
- C. Any person who believes that he or she has been subjected to any action prohibited in subsections A or B of this section may file a complaint with the director of personnel. The director shall investigate the complaint and thereafter prepare a report thereon which shall be forwarded to the Board of Supervisors.
- D. Any officer or employee of the County of Los Angeles who knowingly engages in conduct prohibited by this section shall be disciplined, including but not limited to discharge, in accordance with the personnel rules and regulations of the County of Los Angeles. (Ord. 88-0162 § 1, 1988)

APPENDIX D

The Health Insurance Portability and Accountability Act

The Health Insurance Portability and Accountability Act (HIPAA) is a federal law that is designed to protect the privacy of identifiable client information, provide for the electronic and physical security of health and client medical information, and simplify billing and other electronic transactions through the use of standard transactions and code sets (billing codes).

The Privacy Rule sets the standards for how protected health information (PHI) should be controlled. PHI is confidential, personal, identifiable health information about clients that is created or received by LACDMH and is transmitted or maintained in any form (paper or electronic). PHI includes written documents, electronic files, and verbal information. Examples of PHI include medical records, claims, and related claim reports, letters of correspondence, and documentation notes.

The LACDMH Privacy Officer has developed policies and procedures in compliance with HIPAA Privacy Rules. These policies and procedures apply to the entire LACDMH workforce, including employees, volunteers, interns, trainees, and other persons whose conduct in the performance of their work is under the direct control of LACDMH, whether or not they are paid by the County. It is essential that the LACDMH workforce read, understand, and comply with the HIPAA policies and procedures.

For questions regarding privacy, please contact the Privacy Officer at (213) 251-6428.

For questions regarding security, please contact the Security Officer at (213) 251-6466.

APPENDIX E

Cultural Competency

Welfare and Institutions Code Section 5600.2(g)

All services and programs at all levels should have the capacity to provide services sensitive to the target populations' cultural diversity. Systems of care should:

- 1) Acknowledge and incorporate the importance of culture, assessment of cross-cultural relations, and vigilance towards dynamics resulting from cultural differences; the expansion of cultural knowledge; and the adaptation of services to meet culturally unique needs.
- 2) Recognize the culture implies an integrated pattern of human behavior, including language, thoughts, beliefs, communications, actions, customs, values, and other institutions of racial, ethnic, religious or social groups.
- 3) Promote congruent behaviors, attitudes, and policies enabling the system, agencies, and mental health professionals to function effectively in cross-cultural institutions and communities.