



Quality Assurance Bulletin

Quality Assurance Unit

County of Los Angeles – Department of Mental Health

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UPDATED CONSENT FOR SERVICES

This Bulletin provides an overview of the updated Consent for Services process and form per California Assembly Bill (AB) No. 665 regarding Minor Consent as well as 42 CFR §438.236 regarding clinical practice guidelines.

Assembly Bill No. 665: Minor Consent

AB 665 has broadened the situations under which a minor can consent for their own mental health services. Up to this point, Section 6924 of the Family Code required the minor to meet one of the following in order to consent to mental health services on their own: (A) would present a danger of serious physical or mental harm to self or to others without the mental health treatment or counseling or residential shelter services, or (B) is the alleged victim of incest or child abuse. Under the provisions of AB 665 effective July 1, 2024:

“a minor who is 12 years of age or older may consent to mental health treatment or counseling on an outpatient basis, or to residential shelter services, if the minor, in the opinion of the attending professional person, is mature enough to participate intelligently in the outpatient services or residential shelter services.”

This removes the requirement to meet option A or option B above and retains the requirement to be at least 12 years of age and mature enough to participate. The Consent for Services form has been updated to reflect the new requirements of AB 665 and has removed reference to minor consent under Health & Safety code which was introduced in [QA Bulletin 11-07](#) as it is no longer needed due to the broadened requirements under AB 665.

In addition, the professional person who is treating or counseling the minor shall make their best efforts to notify the parent/guardian of the provisions of services and involve them in treatment unless the professional person, after consulting with the minor, determines the involvement would be inappropriate. A “professional person” as defined in AB 665 and CCR Title 9 Sections 622 to 626 is a psychiatrist, psychologist, social worker, marriage and family therapist, or professional clinical counselor. There must be documentation in the clinical record of the consultation with the minor along with the decisions to include or not include the parent/guardian in treatment and the reason why. The Consent for Services form has also been updated to include fields to indicate the date of consultation and decisions made.

42 CFR §438.236: Practice Guidelines

Federal Regulations (42 CFR § 438.236) requires DMH and its providers to adopt clinical practice guidelines that are based on valid and reliable clinical evidence and the needs of clients and/or consensus of providers in mental health. In addition, they must be reviewed and/or updated periodically. The practice guidelines must be disseminated to all providers and to clients. The DMH [clinical practice parameters](#) identify critical factors to be considered in the provision of care and represent the consensus among DMH practitioners, clinicians and other experts within each specific scope of practice. They are reviewed and updated on a regular basis and can be found on the DMH website. The Consent for Services form has been updated to provide information to clients on the DMH clinical practice parameters and well as notify clients on where to find them.

Effective July 1, 2024, Directly Operated providers, shall use the updated Consent for Services form. Translated versions of the form will become available as they are completed. Contracted providers shall ensure the consent process and/or form utilized is updated to include the provisions of this Bulletin.

If Directly-Operated or contracted providers have questions related to this Bulletin, please contact the QA Policy & Technical Development team at QAPolicy@dmh.lacounty.gov.

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