

COUNTY OF YOLO

HEALTH AND HUMAN SERVICES AGENCY

POLICIES AND PROCEDURES

SECTION 5, CHAPTER 9, POLICY 009 ADVANCE HEALTH CARE DIRECTIVE POLICY

A. PURPOSE

To ensure adult MH clients receiving services through HHSA BH are provided information commensurate with requirements specified by Title 42 of the Code of Federal Regulations and California Probate Code.

B. FORMS REQUIRED/ATTACHMENTS:

Advance Health Care Directive Form

Advance Health Care Directive Brochure

Advance Health Care Directive Acknowledgment Form

C. DEFINITIONS:

Advance Health Care Directive or Advance Directive: an individual health care instruction or power of attorney for health care services.

Health Care: Any care, treatment, service, or procedure to maintain, diagnose, or otherwise affect a patient's physical or mental condition.

D. POLICY

It is the policy of Yolo County Health and Human Services Agency (HHSA) Behavioral Health (BH) to ensure that department employees and contract providers inform adult mental health (MH) clients of their fundamental right to control decisions relating to their own health care under the auspices of an advance health care directive, as defined by State and Federal regulations.

E. PROCEDURES

1. Providing Written Information to Clients: HHSA BH and contract providers must provide written information in threshold languages that describes advance health care directives to MH clients

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The written information utilized by HHSA BH is contained in the <u>Advance Health Care Directive Brochure</u>. The brochure provides the MH client with a description of his or her rights under California law including the right to accept or refuse treatment, and the right to formulate an advance health care directive.

- 2. Documenting Delivery of Written Information: After a HHSA BH MH client receives the written brochure that outlines the advance health care directive and has an opportunity to ask questions, the HHSA BH clinic or contract provider must document in a prominent part of the client's medical record whether or not an advance health care directive has been executed by the utilization of the <u>Advance Health Care Directive Form</u>.
- 3. Non-Discrimination: HHSA BH will not condition care or receipt of services based on whether or not the MH client executes an advance health care directive. HHSA BH will not otherwise discriminate against the MH client based on whether or not they have executed an advance health care directive.
- **4. Complaints:** If a MH client has a complaint concerning advance health care directive non-compliance, they may contact:

California Department of Health Services, Licensing and Certification Division P.O. Box 997413 Sacramento, CA 95899-1413 (800) 236-9747

- 5. HHSA BH Employee and Contract Provider Responsibility: All HHSA BH employees and providers shall familiarize themselves with the content of this policy. Any questions concerning this policy may be directed to HHSA BH Office of Compliance at (530) 666-8654. To ensure compliance with Federal and State regulation, each HHSA BH employee shall:
 - a. Sign the Advance Health Care Directive Acknowledgment Form.
 - **b.** Provide the completed Advance Health Care Directive Acknowledgment Form to immediate supervisor.
 - c. The supervisor shall forward the signed acknowledgment form to Human Resources (HR).
 - **d.** HR shall send notification to HHSA BH Office of Compliance of any employee acknowledgment form not received to ensure follow up of timely receipt.

All newly hired HHSA BH employees will receive the Advanced Health Care Directive Policy at New Hire Orientation and will sign the required Advanced Health Care Directive Acknowledgment Form as part of the new hire packet.

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- **6. Community Education:** HHSA BH will provide community education regarding the advance health care directive by:
 - a. Placing the <u>Advance Health Care Directive Brochure</u> on the HHSA BH intranet website at http://www.yolocounty.org/health-human-services.
 - **b.** Providing <u>Advance Health Care Directive Brochure</u> brochures at all community outreach events attended by HHSA BH.

F. References

- 1. California Probate Code, Sections 4600-4678, 4695-4698, and 4735-4736
- 2. Code of Federal Regulations, Title 42, Sections 422.128, 438.6 (i)(1)(3)(4), and 489.100

Approved by:

Karen Larsen, Director

Yolo County Health and Human Services Agency

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