



Section	Psychiatric Health Facility (PHF)	Effective:	02/01/1998
Sub-section	Administration and Management	Version:	3.0
Policy	Behavioral Wellness and PHF Employees and Their Immediate Family Requiring Acute Inpatient Psychiatric Care	Last Revised:	DRAFT
Director's Approval	_____	Date	_____
	Pamela Fisher, PsyD		
PHF Medical Director's Approval	_____	Date	_____
	Ole Behrendtsen, MD		
Supersedes:	County Employees and Their Immediate Family Requiring Acute Inpatient Psychiatric Care rev. 2/01/2012		
Approvals:	PHF Medical Practice Committee: PHF Governing Board:		

1. PURPOSE/SCOPE

1.1. To ensure all Santa Barbara County Department of Behavioral Wellness (hereafter, the "Department") and Santa Barbara County Psychiatric Health Facility (hereafter, the "PHF") employees and their immediate families have access to appropriate and confidential care.

2. POLICY

2.1. When an employee of the Santa Barbara County Psychiatric Health Facility (hereafter, "the PHF") Santa Barbara County Mental Health and/or their immediate family members are in need of acute psychiatric inpatient care it shall be the policy of the Department of Alcohol Drug and Mental Health Services PHF to will insure confidentiality, and to the extent possible, to protect his/her their anonymity and assist in appropriate care. The PHF will make hospitalization arrangements in the closest available appropriate facility for Department and PHF employees and/or their immediate family members who need acute psychiatric inpatient care.

2.1.2.2. The PHF Chief Executive Officer (CEO) and/or the PHF Medical Director may approve exceptions to this Policy.

1. If the PHF CEO and PHF Medical Director disagree on exceptions to this Policy, the PHF CEO will have final decision-making authority.

2. If exceptions are made, the PHF will notify the Health Information Management team so that they can handle the patient's chart.

~~2.2. When an employee and/or their immediate family is in need of acute inpatient psychiatric care, arrangements will be made to provide for hospitalization in the closest available appropriate facility.~~

~~Any exceptions to this Procedure must be approved by the PHF CEO and/or the ADMHS Medical Director.~~

REVISION RECORD

DATE	VERSION	REVISION DESCRIPTION
DRAFT	<u>3.0</u>	<u>Updated the format and revised language. Added language about who will have final decision-making authority should CEO and Medical Director disagree on exceptions. Added language to reflect that HIM needs to be notified if exceptions to this policy are made.</u>

Culturally and Linguistically Competent Policies

The Department of Behavioral Wellness is committed to the tenets of cultural competency and understands that culturally and linguistically appropriate services are respectful of and responsive to the health beliefs, practices and needs of diverse individuals. All policies and procedures are intended to reflect the integration of diversity and cultural literacy throughout the Department. To the fullest extent possible, information, services and treatments will be provided (in verbal and/or written form) in the individual's preferred language or mode of communication (i.e. assistive devices for blind/deaf).