

 <p style="text-align: center;">County of Sacramento Department of Health Services Division of Behavioral Health Services Policy and Procedure</p>	Policy Issuer (Unit/Program)	BHS-CMH-YDF
	Policy Number	04-05
	Effective Date	10/2009
	Revision Date	07/2017
Title: 5150 Applications		Functional Area: Legal
Approved By:		
Matthew Quinley, LCSW Health Program Manager		Christopher Eldridge, LMFT Mental Health Program Coordinator

Background/Context:

Juvenile Justice Institutions Mental Health Team (JJIMHT) 5150 Designees assess appropriateness for evaluation and treatment services as outlined in Welfare and Institutions Code (W&I) 5150 et seq. Title 15, Section 1437 requires a provision for timely referral, transportation to and admission to licensed mental health facilities, and follow-up for youth whose psychiatric needs exceed the treatment capability of the Youth Detention Facility (YDF).

Purpose:

The objective of this policy and procedure is to detail the process by which JJIMHT 5150 Designees will utilize when completing an application for an involuntary hold for the purpose of evaluation and treatment.

Details:

1. Procedures
 - A. JJIMHT 5150 Designees may be requested to assess youth for 5150 criteria or may become aware of the need for a youth to be placed on an application while conducting an assessment.
 - B. The JJIMHT clinician shall consult with the JJIMHT Program Coordinator and the JJIMHT Psychiatrist in person or by phone prior to initiating an application unless the circumstances are so acute the consultation cannot be completed prior. The JJIMHT Program Coordinator and JJIMHT Psychiatrist shall be notified as soon as possible.
 - C. Youth who require acute medical care along with psychiatric care will be sent to an acute care general hospital for medical treatment. The JJIMHT clinician may initiate an application prior to the youth being sent for medical treatment or request the Probation Officer transporting the youth inform staff from the acute care general hospital assess for 5150 criteria once the youth has been medically cleared.

2. Application

- A. The JJIMHT Designee initiating the application shall complete the “Application for Assessment, Evaluation and Crisis Intervention or Placement for Evaluation and Treatment” form.
- B. The form must be complete with all necessary information including:
 - I. Advisement Complete or Advisement Incomplete
 - II. Name of the person completing the advisement, position, language used and date of the advisement.
 - III. Name of the 5150 designated facility.
 - IV. Name of the youth, adult/minor, type of legally responsible party, name, address and phone number of the responsible party.
 - V. Legibly completed reason for the youth being called to your attention and probable cause stating specific facts.
 - VI. Type of application: DTS, DTS/O, GD Adult, GD Minor.
 - VII. Legible date and time the application was completed.
 - VIII. Signature, name, address and phone number of the Designee completing the form.
- C. The original application form must accompany the youth upon transport to the facility.

Reference(s)/Attachments:

DHCS 1801 (07/2014) Application for Assessment, Evaluation, and Crisis Intervention or Placement for Evaluation and Treatment

Welfare and Institutions Code 5150

Related Policies:

BHS-CMH-YDF-06-01-Mental Health Services Protocol

BHS-CMH-YDF-06-03-Suicide Risk Classification

BHS-CMH-YDF-06-04-Emotionally Disturbed Youth

BHS-CMH-YDF-06-06- Psychiatric Hospitalization

BHS-CMH-YDF-06-09-Response and Recommendations to Probation

Contact Information:

Christopher Eldridge, LMFT, Mental Health Program Coordinator, (916)876-9339,
eldridgec@saccounty.net