

LANTERMAN-
PETRIS-SHORT ACT
(LPS) FACILITY
DESIGNATION
Interim Regulations

Version: 5/30/25

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Article 1. General Provisions

Section 1. Scope.

(a) The Department issues these LPS facility designation interim regulations pursuant to the authority granted in subdivision (n) of section 5008 and subdivision (e) of section 5404 of the Welfare and Institutions Code.

(b) These interim regulations supersede the following sections of chapter 4 of division 1 of title 9 of the California Code of Regulations:

(1) Article 2, Section 810. Act.

(2) Article 2, Section 811. Department.

(3) Article 3, Section 821. Approval of Facilities.

(4) Article 3, Section 822. Professional Person in Charge of a Facility.

(5) Article 6. Section 865.4. Seclusion and Restraints.

(c) These interim regulations apply to host counties and the facilities they designate to provide treatment pursuant to the LPS Act.

(d) A host county that designates a facility to provide treatment pursuant to the LPS Act shall comply with these interim regulations and ensure that all facilities it designates comply with the LPS Act and the standards in Article 3.

(e) A host county is not required to designate a facility, or obtain the Department's approval of a facility designation, to provide assessment, evaluation, and crisis intervention in accordance with subdivision (a) of section 5150 of the Welfare and Institutions Code.

Section 2. Definitions.

(a) “Addiction Specialist Physician” means a physician holding any of the following board certifications in addiction medicine:

(1) Subspecialty board certification in addiction medicine by the American Board of Preventive Medicine;

(2) Subspecialty board certification in addiction psychiatry by the American Board of Psychiatry and Neurology;

(3) Subspecialty board certification in addiction medicine by the American Osteopathic Association; or

(4) Certification by the American Board of Addiction Medicine.

(b) “Alcohol and Other Drug Counselor” means a person who is registered or certified by a certifying organization in accordance with chapter 8 (commencing with section 13000) of division 4 of title 9 of the California Code of Regulations.

(c) “Assessment” has the same meaning as defined in section 5150.4 of the Welfare and Institutions Code.

(d) “Authorized Representative” means any person or entity authorized by law to act on behalf of a patient.

(e) “Behavioral Health” means mental health and substance use disorders.

(f) “Behavioral Health Director” means the person responsible for the administration of behavioral health programs in the host county, or their designee.

(g) “Behavioral Health Personnel” means staff who do not qualify as behavioral health professionals, but who through experience, training, or formal education, are qualified to participate in patient care. Behavioral Health Personnel includes, but is not limited to, Mental Health Rehabilitation Specialists, Other Qualified Providers, Peer Support Specialists, and Alcohol and Other Drug Counselors.

(h) “Behavioral Health Physician” means a psychiatrist or addiction specialist physician.

(i) “Behavioral Health Professional” means any of the following, acting within the scope of their license, waiver, or registration in accordance with applicable State of California requirements:

(1) Psychologists.

(2) Clinical social workers.

(3) Professional clinical counselors.

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(4) Marriage and family therapists.

(5) Nurse practitioners fulfilling the requirements of section 2837.103 or 2837.104 of the Business and Professions Code and holding a certification in the psychiatric-mental health category specified in section 1481 of title 16 of the California Code of Regulations.

(6) Registered nurses with a master's degree in psychiatric-mental health nursing and two years of nursing experience in a behavioral health setting, or registered nurses with four years of nursing experience in a behavioral health setting.

(j) "Clinical Social Worker" means a person who is licensed as a clinical social worker by the California Board of Behavioral Science Examiners, is waived, or is a registered clinical social worker. A waived or registered clinical social worker shall work under any necessary supervision required by the terms of their waiver or registration.

(k) "Crisis Intervention" has the same meaning as defined in section 5008 of the Welfare and Institutions Code.

(l) "Crisis Stabilization Unit" means a provider site that is certified by the Department or a mental health plan to provide crisis stabilization in accordance with section 1840.348 of Title 9 of the California Code of Regulations and page 2e of Supplement 3 to Attachment 3.1-A of California's Medicaid State Plan.

(m) "Department" means the State Department of Health Care Services.

(n) "Designated Facility" has the same meaning as defined in section 5008 of the Welfare and Institutions Code. For purposes of these interim regulations, "designated facility" includes a facility, or a distinct part, unit, or area of a facility, that is designated by a host county and approved by the Department to provide treatment pursuant to the LPS Act.

(o) "Evaluation" has the same meaning as defined in section 5008 of the Welfare and Institutions Code.

(p) "Gravely Disabled" has the same meaning as defined in section 5008 of the Welfare and Institutions Code.

(q) "Host County" means the county that designates a facility within its borders to provide evaluation and treatment pursuant to the LPS Act.

(r) "Intensive Treatment" has the same meaning as defined in section 5008 of the Welfare and Institutions Code.

(s) "Jail LPS Unit" means a distinct unit within an adult or juvenile detention facility subject to oversight by the Board of State and Community Corrections in which the host

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county's behavioral health director controls the provision of involuntary behavioral health treatment to inmates.

(t) "Licensed Nursing Staff" means a nurse practitioner, registered nurse, licensed vocational nurse, or licensed psychiatric technician.

(u) "Licensed Psychiatric Technician" means a person licensed as a psychiatric technician by the Board of Vocational Nursing and Psychiatric Technicians.

(v) "Licensed Vocational Nurse" means a person who is licensed as a licensed vocational nurse by the Board of Vocational Nursing and Psychiatric Technicians.

(w) "Locked facility" means entrances, exits, and windows in a facility, or in the designated area of a facility, are controlled with locking mechanisms that are inaccessible to patients. Any outside spaces and recreational areas shall be similarly enclosed to preclude egress or ingress from the premises.

(x) "LPS Act" means the Lanterman-Petris-Short Act, Part 1 of Division 5 (commencing with Section 5000) of the Welfare and Institutions Code.

(y) "Marriage and Family Therapist" means a person who is licensed as a marriage and family therapist by the California Board of Behavioral Science Examiners, is waived, or is a registered marriage and family therapist. A waived or registered marriage and family therapist shall work under any necessary supervision required by the terms of their waiver or registration.

(z) "Medication Treatment" includes prescribing, administering, dispensing, and monitoring drug interactions and contraindications of medications for behavioral health conditions or biologicals necessary to alleviate symptoms associated with behavioral health conditions. Medication treatment includes one or more of the following service components:

(1) Evaluation of the need for medication for treatment of behavioral health conditions.

(2) Evaluation of clinical effectiveness and side effects.

(3) Medication education including instruction in the use, risks, and benefits of and alternatives for medication.

(4) Assessing the appropriateness of reducing medication usage when clinically indicated.

(5) Treatment Planning.

(aa) "Medications for Addiction Treatment" means all medications approved by the United States Food and Drug Administration (FDA) for treating substance use disorders.

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(bb) “Mental Health Rehabilitation Specialist” means a person who has a baccalaureate degree and four years of clinical experience in a behavioral health setting. Up to two years of graduate professional education may be substituted for the experience requirement on a year-for-year basis; up to two years of post-associate arts clinical experience may be substituted for the required educational experience in addition to the requirement of four years’ experience in a behavioral health setting.

(cc) “Minor” means a person under 18 years of age.

(dd) “Nurse Practitioner” means a registered nurse who is certified as a nurse practitioner by the California Board of Registered Nursing and is currently licensed to practice in the State.

(ee) “Other Qualified Provider” means a person at least 18 years of age with a high school diploma or equivalent degree plus two years of related paid or non-paid experience in a behavioral health setting, including experience as a service recipient or caregiver of a service recipient, or related secondary education.

(ff) “Patient” means a person receiving assessment, evaluation, crisis intervention, treatment, or intensive treatment at a designated facility pursuant to the LPS Act.

(gg) “Peer Support Specialist” means a person with a current State-approved Medi-Cal Peer Support Specialist Certification Program certification that meets all ongoing education requirements.

(hh) “Physician” means a person licensed to practice medicine by the California Medical Board or licensed to practice osteopathy by the Board of Osteopathic Examiners.

(ii) “Professional Clinical Counselor” means a person that is licensed as a professional clinical counselor by the California Board of Behavioral Sciences Examiners, is waived, or is a registered professional clinical counselor. A waived or registered professional clinical counselor shall work under any necessary supervision required by the terms of their waiver or registration.

(jj) “Professional Person in Charge of a Facility” means a person who is a behavioral health physician or licensed behavioral health professional and appointed in writing by a designated facility as the person who is clinically in charge of the facility for purposes of the LPS Act and responsible for facility compliance with the LPS Act and these interim regulations.

(kk) “Psychiatrist” means a physician licensed to practice medicine by the California Medical Board or licensed to practice osteopathy by the Board of Osteopathic Examiners who completed the required course of graduate psychiatric education as specified by the American Board of Psychiatry and Neurology in a program of training accredited by the Accreditation Council for Graduate Medical Education, the American Medical Association, or the American Osteopathic Association.

(ll) “Psychologist” means a person who is licensed as a psychologist by the California

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Board of Psychology, or is waived. A waived psychologist shall work under any necessary supervision required by the terms of their waiver.

(mm) "Registered Clinical Social Worker" means a candidate for licensure as a clinical social worker who is registered with the corresponding state licensing authority for the purpose of acquiring the experience required for licensure in accordance with applicable statutes and regulations.

(nn) "Registered Marriage and Family Therapist" means a candidate for licensure as a marriage and family therapist who is registered with the corresponding state licensing authority for the purpose of acquiring the experience required for licensure, in accordance with applicable statutes and regulations.

(oo) "Registered Nurse" means a person who is licensed as a registered nurse by the Board of Registered Nursing.

(pp) "Registered Professional Clinical Counselor" means a candidate for licensure as a professional clinical counselor who is registered with the corresponding state licensing authority for the purpose of acquiring the experience required for licensure, in accordance with applicable statutes and regulations.

(qq) "Severe Substance Use Disorder" has the same meaning as defined in section 5008 of the Welfare and Institutions Code.

(rr) "Staff-to-Patient Census Ratio" means the number of staff members allocated per patient based on a designated facility's patient census in any twenty-four-hour period.

(ss) "Therapy" means the application, one-on-one or in a group, of cognitive, affective, verbal or nonverbal strategies based on the principles of development, wellness, adjustment to impairment, recovery, and resiliency to assist a person with acquiring greater personal, interpersonal, and community functioning or to modify feelings, thought processes, conditions, attitudes or behaviors that are emotionally, intellectually, or socially ineffective.

(tt) "Treatment" means health care provided to patients for physical or behavioral health conditions.

(uu) "Waivered" means:

(1) For a psychologist candidate, an individual who either is gaining the experience required for licensure or was recruited for employment from outside California, has sufficient experience to gain admission to a licensing examination, and has been granted a professional licensing waiver approved by the Department to the extent authorized under state law.

(2) For a clinical social worker candidate, a marriage and family therapist candidate or professional clinical counselor candidate, "waivered" means a candidate for licensure who was recruited for employment from outside California, whose experience is

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sufficient to gain admission to the appropriate licensing examination and who has been granted a professional licensing waiver approved by the Department to the extent authorized under state law.

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Article 2. Facility Designation Approval

Section 3. Facility Designation Requirements.

(a) A host county may designate a facility listed in subsection (b) to provide one or more of the following levels of treatment to a patient pursuant to Chapter 2 of the LPS Act.

(1) Evaluation and treatment in accordance with Article 1 (commencing with section 5150).

(2) Intensive treatment in accordance with Article 4 (commencing with section 5250).

(3) Additional intensive treatment in accordance with Article 4.5 (commencing with section 5260).

(4) Additional intensive treatment in accordance with Article 4.7 (commencing with section 5270.10).

(5) Postcertification treatment in accordance with Article 6 (commencing with section 5300).

(b)(1) A host county shall only designate the following types of facilities to provide treatment pursuant to the LPS Act.

(A) Health facilities licensed by the State Department of Public Health in accordance with Chapter 2 of Division 2 of the Health and Safety Code.

(B) Psychiatric health facilities licensed by the Department in accordance with section 4080 of the Welfare and Institutions Code and section 1250.2 of the Health and Safety Code.

(C) Psychiatric residential treatment facilities licensed by the Department in accordance with section 4081 of the Welfare and Institutions Code and section 1250.10 of the Health and Safety Code.

(D) Mental health rehabilitation centers licensed by the Department in accordance with section 5675 of the Welfare and Institutions Code.

(E) Hospitals operated by the United States Department of Veterans Affairs.

(F) Crisis stabilization units.

(G) Jail LPS units.

(H) Another type of facility that is licensed by the Department or the State Department of Public Health and permitted under the terms of its licensure to provide treatment to patients with a mental health disorder, severe substance use disorder, or co-occurring

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mental health disorder and severe substance use disorder, and meets the standards in Article 3.

(2) A host county shall only designate a facility to provide treatment to patients deemed gravely disabled due solely to a diagnosis of a severe substance use disorder or a co-occurring mental health disorder and severe substance use disorder if the facility is permitted to provide substance use disorder treatment under the terms of its licensure or certification.

(3) Notwithstanding subsection (a), a host county that designates a crisis stabilization unit or any other type of outpatient facility shall only designate these facility types to provide evaluation and treatment in accordance with Article 1 of Chapter 2 of the LPS Act (commencing with section 5150).

(c)(1) A host county shall only designate a facility that is a locked facility and meets all the standards in Article 3.

(2) If the entire premises of a facility will not continually satisfy all the standards in Article 3, then a host county shall only designate the distinct part, unit, or area of the facility that continually meets those standards.

Section 4. Process for Approving County Designation of Facility.

(a) A host county's Behavioral Health Director shall submit a complete application for approval of a facility designation to the Department via email at LPSinfo@dhcs.ca.gov.

(b) Within 30 calendar days of receiving a host county's application for approval of a facility designation, the Department shall notify the Behavioral Health Director in writing of whether the application is complete and accepted for review, or incomplete.

(1) If the application is incomplete, the Department shall notify the Behavioral Health Director in writing of the information required to complete the application. The Behavioral Health Director shall provide the missing information within 30 calendar days of the date of the Department's written notice. If the Behavioral Health Director fails to provide the missing information within 30 calendar days, the application shall be deemed withdrawn. A host county deemed to have withdrawn an application does not have a right to review and may reapply by submitting a new application.

(2) If the application is complete, the Department shall provide written notice to the Behavioral Health Director of the Department's decision to approve or deny the application within 60 calendar days of accepting a complete application. A notice denying the application for approval shall set forth the reasons for denial.

(c) The Department shall approve a host county's designation of a facility if the Department determines through review of the application that the designated facility is compliant with the LPS Act and the standards in Article 3.

(d) If the Department denies an application for approval or renewal of approval of a facility designation, affirms a denial on review, or revokes its approval of a facility designation, the host county shall:

(A) Terminate the facility's designation and comply with subsection (a)(3) of Section 19.

(B) Not resubmit an application for approval of that facility until at least 30 calendar days after the effective date of the Department's action. The host county's application shall demonstrate that the deficiencies identified by the Department were corrected prior to resubmitting the application.

Section 5. Facility Designation Application Content.

A complete application for approval of a facility designation shall include the following:

(a) An Application for Facility Designation Approval or Renewal of Approval form DHCS XXX (date), which shall include:

- (1) The name and address of the facility.
 - (2) The type of facility, as specified in subsection (b)(1) of Section 3.
 - (3) The name, phone number, and email address of the professional person in charge of the facility.
 - (4) The total number of beds in the facility and total number of beds designated for treatment pursuant to the LPS Act.
 - (5) The levels of treatment, as specified in subsection (a) of Section 3, that the facility is designated to provide.
 - (6) The behavioral health conditions the facility is designated to treat.
 - (7) Whether the facility will admit adults, minors, or adults and minors, and the minimum age of patients that will be admitted.
 - (8) The Behavioral Health Director's name, phone number, and email address.
 - (9) An attestation from the Behavioral Health Director ensuring the following:
 - (A) The designated facility maintains compliance with the legal authorities governing its licensure, certification, or accreditation, as applicable, or a Jail LPS Unit maintains compliance with the Board of State and Community Corrections' Minimum Standards for Local Detention Facilities found in subchapter 4 of chapter 1 of division 1 of title 15 of the California Code of Regulations;
 - (B) They will monitor the designated facility and require the facility to comply with the LPS Act and the standards in Article 3 and to promptly correct any deficiencies; and
 - (C) They or their designees will investigate all alleged patients' rights violations pursuant to section 5326.9 of the Welfare and Institutions Code.
 - (10) The Behavioral Health Director's signature.
- (b) A written program statement and supporting documentation meeting the requirements of Section 6.

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- (c) A copy of the facility's licenses, certifications, and accreditations, as applicable, including licensing, certifying, or accrediting agency or organization and license, certificate, or accreditation number.
- (d) A sketch of the facility and its designated areas, including a floor plan depicting the designated areas of the facility and beds, including for minors and adults, if applicable.
- (e) A copy of the facility's fire clearance issued by the county's Fire Marshal or other authorized governmental entity.
- (f) A written description of the Behavioral Health Director's process for overseeing the designated facility and ensuring the designated facility complies with the LPS Act and the standards in Article 3.

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Section 6. Designated Facility Program Statement.

(a) A host county shall ensure that a facility it designates to provide treatment pursuant to the LPS Act maintains a program statement as described in this section.

(b) A designated facility's program statement shall include all of the following documents and information.

(1) Job descriptions, daily staffing schedules, professional licenses and credentials, as applicable, for the professional person in charge of the facility, nursing head of service, behavioral health physicians, behavioral health professionals, licensed nursing staff, and behavioral health personnel.

(2) Documentation that the professional person in charge of the facility, nursing head of service, and their designees are qualified in accordance with Section 12.

(3) An organizational chart listing facility staff and staff-to-patient census ratios demonstrating compliance with Section 12.

(4) A description of the population admitted by the facility, including age range and genders.

(c) Nothing in this Section prohibits a host county from requiring a designated facility to include additional information in its program statement.

Section 7. Review of Denial of Approval of Facility Designation.

(a) A Behavioral Health Director may request a review of the Department's denial of a facility designation approval or renewal of approval by sending a written request for review by certified mail to Licensing and Certification Division, Mental Health Licensing and Certification Branch, P.O. Box 997413, MS 2800, Sacramento, CA 95899-7413, or via e-mail to LPSinfo@dhcs.ca.gov.

(1) A request for review shall be submitted to the Department no later than 30 calendar days after the date of the notice denying approval. The Department may decline to review an untimely request.

(2) The Behavioral Health Director shall submit all relevant documents, information, and arguments the host county wishes the Department to consider with the request for review.

(3) If necessary, the Department may request the Behavioral Health Director to provide additional information.

(b) Within 60 calendar days of receiving the request for review, the Department shall notify the Behavioral Health Director in writing of its decision to affirm or reverse the denial. The Department's decision shall be final.

Section 8. Renewal of Approval of Facility Designation.

(a) The Department's approval of a host county's designation of a facility to provide treatment pursuant to the LPS Act shall expire and be subject to renewal every three years. The expiration date is three years after the date on which the Department last approved a facility designation.

(b) To apply for renewal of approval of a facility designation, a host county shall submit a complete application containing all the documents and information described below to the Department via email to LPSinfo@dhcs.ca.gov at least 90 calendar days before the expiration date.

(1) An Application for Facility Designation Approval or Renewal of Approval form **DHCS XXX** (date), which shall include all information specified in subsection (a) of Section 5.

(2) A program statement and supporting documentation meeting the requirements of Section 6, updated to reflect current information as of the date of the application for renewal. All modifications made to the program statement since the last time the Department approved the facility's designation shall be clearly marked.

(3) The information required by subsections (c) through (f) of Section 5, if any of the information changed since the last time the department approved the facility designation.

(c) An application for renewal of a facility designation is subject to the application review process set forth in Section 4 and the review process set forth in Section 7.

Section 9. Changes to Designated Bed Capacity.

(a) During the three-year period of designation approval, a host county may change the number of beds in a facility that are designated for treatment pursuant to the LPS Act only with the Department's prior approval.

(b)(1) The host county's Behavioral Health Director shall submit a written request for approval to the Department before the date on which a facility's designated bed count is scheduled to change.

(2) If the host county seeks approval for an increase in the number of designated beds at a facility, its request for approval shall include the following:

(A) A copy of the designated facility's license, certification, or accreditation reflecting changes to the total number of authorized beds, if applicable;

(B) The levels of treatment, as described in subsection (a) of Section 3, that the facility will provide in the additional beds;

(C) The behavioral health conditions that the facility will treat in the additional beds; and

(D) Documentation that the entire facility, or the designated area of the facility, as applicable, will meet the staffing standards in Section 12 after the increase in designated bed capacity.

(3)(A) The Department shall approve the bed capacity change if it determines, based on the information provided by the Behavioral Health Director pursuant to this section, that the facility will meet the standards in Article 3 after the change in designated bed capacity.

(B) If the Department disapproves the bed capacity change, it shall notify the Behavioral Health Director in writing of the denial and the reasons for the denial before the date on which the facility's designated bed count was scheduled to change. The Department's decision shall be final. The host county may submit a new request for approval if it can demonstrate the facility will meet the standards in Article 3 after the change in designated bed capacity.

Article 3. Designated Facility Standards

Section 10. Maintenance of License, Certification, or Accreditation.

(a)(1) Except as provided in subsections (a)(2), (a)(3), and (c), a designated facility shall maintain an active license to operate from the Department or State Department of Public Health.

(2) A crisis stabilization unit shall maintain a certification from the Department or a county mental health plan to participate in Medi-Cal.

(3) A federal Veterans Affairs Hospital shall maintain health care accreditation as required by the United States Department of Veterans Affairs.

(b)(1) A designated facility shall notify the Behavioral Health Director:

(A) Within 24 hours of the suspension, revocation, or termination of its license, certification, or accreditation.

(B) Within 10 calendar days of any other change to its license, certification, or accreditation.

(c) This section does not apply to jail LPS units subject to oversight by the Board of State and Community Corrections.

Section 11. Minimum Behavioral Health Treatment Services.

(a)(1) At a minimum, a designated facility shall provide the following behavioral health treatment services 24 hours per day:

(A) Assessment;

(B) Evaluation;

(C) Crisis intervention;

(D) Medication treatment for mental health and substance use disorders;

(E) Therapy; and

(F) Care coordination, in accordance with the requirements set forth in sections 5152 and 5257.5 of the Welfare and Institutions Code.

(2) A designated facility shall provide the services required by subsection (a)(1) seven days per week, unless the Department approved an exemption under section 5151 of the Welfare and Institutions Code.

(b) A designated facility shall individually determine a patient's length of stay based on evidence-based clinical standards and the patient's assessed need for behavioral health treatment.

(c)(1) A designated facility shall directly provide all Food and Drug Administration approved medications for addiction treatment to patients on site, as indicated, except as provided by this subsection.

(2) A designated facility shall establish an effective process for initiating or continuing a patient's treatment with methadone. The facility's process shall include:

(A) Procedures for initiating or continuing a patient's treatment with methadone while admitted to the facility, which shall include transportation to appointments for medication administration, if necessary; and

(B) Procedures for referring discharged patients to narcotic treatment programs, community health centers, or other providers of medication for opioid use disorder.

(d) A designated facility that admits patients diagnosed solely with a severe substance use disorder or a co-occurring mental health and severe substance use disorder for withdrawal management shall do the following:

(1) At all times, assign staff who are trained to provide withdrawal management services to conduct one-on-one physical checks of withdrawal management patients.

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(2) Conduct physical checks of withdrawal management patients at least once every 30 minutes during the first 72 hours after admission.

(3) Monitor withdrawal management patient vital signs at least once every six hours during the first 72 hours after admission.

(e) A designated facility shall maintain a suicide prevention policy addressing all the following elements of care for patients expressing suicidal ideation or engaging in self-harming behavior.

(1) Risk assessments.

(2) Safety precautions.

(3) Visual observation policies and staffing to maintain compliance with visual observation policies.

(4) Incident documentation requirements.

(5) Methods by which hazardous objects, including plastic bags and trash can liners, are kept inaccessible to patients.

Section 12. Staffing Standards.

(a) This section contains minimum staffing requirements for designated facilities. A designated facility shall comply with this section in addition to any licensing, certification, or accreditation requirements for staffing.

(b)(1) A designated facility shall employ the following staff on a full-time basis:

(A) A professional person in charge of the facility who is either a behavioral health physician or licensed behavioral health professional; and

(B) A nursing head of service who is a registered nurse with at least one year of experience in psychiatric nursing supervision within the last six years.

(2) The professional person in charge of the facility and nursing head of service, or their designee, shall be present and on duty in the designated facility at least 40 hours per week.

(3) Any designee of the professional person in charge of the facility or nursing head of service for purposes of the meeting the requirement in subsection (b)(2) shall be another member of the facility's staff who meets the respective qualification in subsection (b)(1).

(4) The professional person in charge of the facility shall supervise the treatment services provided to patients and be responsible for the facility's compliance with the LPS Act and the standards in this article.

(5) The nursing head of service shall have administrative oversight authority with responsibility for the nursing services provided by the designated facility, and shall not:

(A) Be counted in the staff-to-patient census ratio in subsection (d); or

(B) Have any charge nurse responsibilities.

(c) A designated facility shall employ or contract with the following staff in the quantity required to meet the applicable staff-to-patient census ratio in subsection (d):

(1) Behavioral health physicians.

(2) Behavioral health professionals. Waivered psychologists, and waivered or registered clinical social workers, marriage and family therapists, and professional clinical counselors, shall only count towards the staff-to-patient census ratio for behavioral health professionals in subsection (d) if the supervision requirements of their waiver or registration are satisfied.

(3) Licensed nursing staff.

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(4) Behavioral health personnel.

(d)(1) A designated facility shall meet the following full-time equivalent staff-to-patient census ratios in any 24-hour period. Required staff shall be present and on duty at the facility in accordance with the patient census.

	Minimum Number of Required Full-Time Equivalent Staff									
Patient Census	1-10	11-20	21-30	31-40	41-50	51-60	61-70	71-80	81-90	91-100
Behavioral Health Physicians	1	1	2	2	3	3	4	4	5	5
Behavioral Health Professionals	1	2	3	4	5	6	7	8	9	10
Licensed Nursing Staff	4	5	6	8	10	12	14	16	18	20
Behavioral Health Personnel	3	5	8	10	13	15	18	20	23	25
Totals	9	13	19	24	31	36	43	48	55	60

(2) A designated facility with capacity for more than 100 patients shall staff the facility in accordance with the staff-to-patient census ratios in paragraph (1).

(3) A designated facility shall calculate full-time equivalent by adding up the total number of hours worked by staff in the same category in seven days and dividing that number by 40 hours.

(4) A designated facility may count the professional person in charge of the facility toward the required number of full-time equivalent staff for the applicable category of the staff-to-patient census ratio in subsection (d)(1).

(e) Notwithstanding subsection (d)(1), a designated facility shall ensure that, at all times, behavioral health professionals and behavioral health personnel are present and on duty in numbers sufficient to provide all behavioral health treatment required by subsection (a)(1) of Section 11.

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(f) Licensed nursing staff shall be present and on duty at a designated facility 24 hours per day, seven days per week.

(g)(1) During the hours that a behavioral health physician is not present and on duty at a designated facility, the designated facility shall have at least one behavioral health physician on-call.

(2) On-call means that a behavioral health physician is immediately available for consultation with the designated facility by telephone or synchronous interaction telehealth and able to reach the designated facility within 30 minutes.

(3) A designated facility shall ensure that staff on each shift are provided with the name, location, and contact information for the on-call behavioral health physician.

(h) A host county may require a designated facility to provide additional staff if it determines that additional staff are needed to provide for the health, safety, or behavioral health care needs of patients. In making this determination, the host county may consider the designated facility's patient census, experience and education of current staff, frequency of deficiencies, severity of deficiencies, as well as any other relevant considerations, including the behavioral health conditions, acuity, and needs of the patients.

Section 13. Use of Seclusion and Restraints.

(a) In addition to complying with the requirements specified in this section, a designated facility that uses seclusion or behavioral restraints shall comply with all other applicable federal and state legal authorities governing its use of seclusion and behavioral restraints.

(b) A designated facility may use seclusion or behavioral restraints only as a measure to prevent immediate injury to the patient or others and only when less restrictive alternative measures are not sufficient to protect the patient or others from injury.

(c)(1) A designated facility shall not use seclusion or behavioral restraints for the convenience of staff, to punish or discipline a patient, or as a substitute for a less restrictive alternative form of treatment.

(2) A designated facility shall not allow *pro re nata* (as needed) orders for seclusion or behavioral restraint.

(d) A designated facility shall document the following in a patient's record each time it uses seclusion and/or behavioral restraint:

(1) Each use of seclusion and/or behavioral restraint, in accordance with the requirements set forth in section 865.3 of title 9 of the California Code of Regulations.

(2) Any patients' rights listed in section 5325 of the Welfare and Institutions Code that are denied while a patient is in seclusion and/or behavioral restraints.

(e) For purposes of this section, the following definitions apply:

(1) "Behavioral restraint" means "mechanical restraint" or "physical restraint" as defined in this section, used as an intervention when a patient presents an immediate danger to self or to others.

(2) "Mechanical restraint" means the use of a mechanical device, material, or equipment attached or adjacent to the patient's body that they cannot easily remove and that restricts the freedom of movement of all or part of a patient's body or restricts normal access to the person's body, and that is used as a behavioral restraint.

(3) "Physical restraint" means the use of a manual hold to restrict freedom of movement of all or part of a patient's body, or to restrict normal access to the patient's body, and that is used as a behavioral restraint. "Physical restraint" is staff-to-patient physical contact in which the patient unwillingly participates. "Physical restraint" does not include briefly holding a patient without undue force in order to calm or comfort, or physical contact intended to gently assist a patient in performing tasks or to guide or assist a patient from one area to another.

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(4)(A) "Seclusion" means the involuntary confinement of a patient alone in a room or an area from which the patient is physically prevented from leaving.

(B) Notwithstanding subsection (a), "seclusion" in a jail LPS unit means placement of an inmate patient in a safety cell in accordance with section 1055 of title 15 of the California Code of Regulations.

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Section 14. Staff Orientation and Training.

(a)(1) A designated facility shall provide an orientation to all newly employed and contracted staff who provide treatment pursuant to the LPS Act prior to their direct contact with patients. The orientation shall include training on the designated facility's organization, policies and procedures for complying with the LPS Act and the standards in this article, and the contents of the facility's program statement.

(2) A designated facility shall require staff who provide treatment pursuant to the LPS Act to repeat the orientation at least annually.

(3) Prior to direct contact with patients, a designated facility shall train staff who provide treatment pursuant to the LPS Act on the following additional topics:

(A) De-escalation, crisis intervention, positive behavior management techniques, and prevention and management of assaultive and self-injurious behavior;

(B) The safe use of restraint and seclusion, including the ability to recognize and respond to signs of physical distress in patients who are in restraint or seclusion;

(C) Suicide prevention techniques; and

(D) Withdrawal management services, which shall include topics such as information on medications used for withdrawal management and signs and symptoms that warrant referral or transfer of a patient to a higher level of care.

(b) A designated facility shall provide full-time staff with at least 20 hours per year of continuing training. A designated facility may prorate the required number of hours for part-time staff.

(c)(1) A designated facility shall document all staff orientation and training sessions by maintaining a record of the training title and date, syllabus or curriculum, training materials, and sign-in sheets of attendees.

(2) A designated facility shall document completed orientation and training sessions in personnel records, including the name of the person certifying completion.

(d) A designated facility shall retain all staff orientation and training records and materials for a minimum of three years from the last date the staff worked at the designated facility.

(e) A designated facility shall make all staff orientation and training records and materials available to the Behavioral Health Director.

Section 15. Requirements for Admitting Minors.

(a) A designated facility shall only admit minors if the host county has specifically designated it to do so and it implements a treatment program specifically designed for minors.

(b) A designated facility that admits adults and minors shall house minors and adults in separate areas, utilize separate treatment staff, and implement treatment programs specifically designed to for minors.

(c) Notwithstanding subsection (b), a designated facility may house adults and minors together if the Department granted the host county a waiver for that facility pursuant to section 5751.7 of the Welfare and Institutions Code.

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Section 16. Treating Patients Outside of Designated Areas.

(a) A designated facility that is licensed by the State Department of Public Health as a general acute care hospital or correctional treatment center, or is a federal Veterans Affairs Hospital, may provide physical health care services to a patient receiving treatment pursuant to the LPS Act in undesignated areas of the facility if all the following requirements are met:

- (1) The patient has a medical need for a physical health care service that cannot be provided in the facility's designated area.
 - (2) The patient remains in an undesignated area of the facility only for the length of time necessary to receive the physical health care service.
 - (3) The patient consents to the physical health care service, the patient's authorized representative consents to the physical health care service, or a court ordered the involuntary physical health care service because the patient lacks capacity to consent.
 - (4) The designated facility continues to provide behavioral health treatment to the patient, unless the patient's physical health condition prevents the patient from receiving behavioral health treatment.
- (b) A designated facility shall count the time a patient spends outside of the designated area in accordance with subsection (a) toward the person's total period of detention, as required by section 5258 of the Welfare and Institutions Code.

Section 17. Reporting Unusual Occurrences.

(a)(1) A designated facility that is licensed by the State or subject to federal accreditation requirements shall report unusual occurrences to its licensing or accreditation authority in accordance with its applicable licensing or accreditation requirements.

(2) This section shall only apply to crisis stabilization units, jail LPS units, and designated facilities approved by the Department under subsection (b)(1)(H) of Section 3 that are not required to report unusual occurrences to a licensing or oversight authority.

(b) For purposes of this section, “unusual occurrence” includes the following:

(1) Cases of communicable disease reportable under section 2500 of title 17 of the California Code of Regulations.

(2) Poisonings.

(3) Fires.

(4) Physical injury to any person which, consistent with good medical and professional practice, would require treatment by a physician.

(5) Death of a patient, employee, or visitor from unnatural causes.

(6) Physical or sexual assaults on patients, employees or visitors.

(7) All instances of patient abuse. For purposes of this requirement, “abuse” means maltreatment, sexual maltreatment, financial maltreatment, sexual exploitation, sex trafficking, solicitation, abandonment, isolation, abduction, or other treatment with resulting physical harm or pain or mental suffering, or deprivation by a care custodian of goods or services that are necessary to avoid physical harm or mental suffering.

(8) Actual or threatened walkout by staff, or other curtailment of services or interruption of essential services provided by the facility.

(9) Suspected criminal acts on the premises, by or against patients, employees or visitors.

(10) Any other occurrence that threatens the welfare, safety, security, or health of patients, staff, or visitors.

(c)(1) A designated facility shall notify the Behavioral Health Director of an unusual occurrence within 24 hours of the occurrence, in the form and manner specified by the Behavioral Health Director.

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(2) A designated facility shall also report an unusual occurrence that involves suspected criminal acts to the local law enforcement authority as soon as possible, and in no case later than 24 hours after the act.

(d) A designated facility shall submit a written unusual occurrence report to the Behavioral Health Director within seven calendar days of the unusual occurrence. At a minimum, the unusual occurrence report shall contain all the following:

(1) The date, time, and setting of the occurrence;

(2) A detailed description of the occurrence;

(3) A description of any injuries to patients, staff, or visitors;

(4) The staff response to the occurrence; and

(5) The designated facility's plan to investigate, follow-up, and prevent a reoccurrence.

(e) The designated facility shall cooperate fully with an investigation, provide all records and information requested, and, if applicable, comply with a corrective action or enforcement action by the host county.

(f) A designated facility shall retain an unusual occurrence report for at least one year from the date of the occurrence.

Article 4. Host County Oversight and Enforcement

Section 18. Host County Oversight and Notification to Department.

The Behavioral Health Director shall do the following:

(a) Ensure that a designated facility maintains compliance with the LPS Act and the standards in Article 3 for the duration of its designation.

(b)(1) Implement policies and procedures for receiving complaints about designated facility compliance with the LPS Act and the standards in Article 3.

(2) Investigate complaints received about designated facility compliance with the LPS Act and the standards in Article 3 and take any actions the host county deems necessary to resolve those complaints, including, but not limited to, imposing a corrective action plan or terminating the facility's designation.

(c)(1) Investigate alleged patients' rights violations pursuant to section 5326.9 of the Welfare and Institutions Code.

(2) Comply with the complaint resolution process for patients' rights violations in section 864 of title 9 of the California Code of Regulations.

(d) Provide the Department with a report of its resolution of all complaints received pursuant to this section within 30 calendar days of resolving a complaint.

(e)(1) Investigate all unusual occurrence reports received pursuant to Section 17.

(2) Take any action against a designated facility the host county deems appropriate based on the findings of the investigation, including, but not limited to, placing a designated facility on a corrective action plan or terminating its designation.

(3) Provide the Department with a report of its resolution of the investigation within 30 calendar days of concluding the investigation.

(f) Notify the Department in writing:

(1) Within 72 hours of learning that a facility's license, certification, or accreditation will be, or was, suspended, not renewed, or revoked.

(2) Within ten calendar days of receiving notice from a designated facility pursuant to Section 10 of a change to its license, certification, or accreditation.

(3) At least 72 hours before terminating a facility's designation in accordance with subsection (b) of Section 19.

Section 19. Host County Termination of Facility Designation.

(a)(1) A host county may terminate its designation of a facility.

(2) A host county shall terminate a facility's designation upon termination or revocation of the facility's license, certification, or accreditation.

(3) A host county that terminates a facility's designation shall ensure the following:

(A) Appropriate transfer or discharge of patients admitted pursuant to the LPS Act prior to the date of termination, and in no circumstances more than 10 calendar days following the termination.

(B) The facility immediately ceases admitting patients for treatment pursuant to the LPS Act.

(b) If a host county terminates its designation of a facility, the Behavioral Health Director shall notify the Department of the termination and effective date of termination at least 72 hours before the effective date of termination.

Article 5. Department Oversight and Enforcement

Section 20. Corrective Action Plans.

- (a) The Department may impose a corrective action plan on a host county for its noncompliance with the LPS Act or these interim regulations.
- (b)(1) When the Department determines that a host county is not in compliance with the LPS Act or these interim regulations, the Department shall issue a notice of noncompliance to the Behavioral Health Director by certified mail or email.
- (2) The notice of noncompliance shall include the following:
- (A) The details of the noncompliance;
 - (B) A date by which the host county must correct the noncompliance; and
 - (C) A requirement for the host county to prepare and implement a corrective action plan to come into compliance.
- (c)(1) The host county shall submit a corrective action plan within 30 calendar days of receiving the notice of noncompliance, or within five calendar days if the Department finds that there is an immediate risk of harm to the welfare, safety, or health of patients, staff, or visitors.
- (2) The host county's corrective action plan shall be subject to the Department's approval. The Department shall notify the behavioral health director of its decision to approve or disapprove the corrective action plan within 15 calendar days of receipt.
- (3) If the Department disapproves the host county's corrective action plan, the Department shall specify the corrective action it deems necessary to correct the noncompliance and the deadline for corrective action.
- (d) The host county shall implement corrective actions in accordance with the deadlines specified by the Department.
- (e) If the host county does not submit a corrective action plan, or the host county fails to come into compliance by the deadline specified by the Department, the Department may revoke its approval of the facility's designation pursuant to Section 23.

Section 21. Termination of Department Approval of Facility Designation.

(a)(1) The Department's approval of a facility's designation is dependent upon maintenance of the following:

(A) An active license, except for jail LPS units; or

1. If the facility is a crisis stabilization unit, an active certification to participate in Medi-Cal; or

2. If the facility is a federal Veterans Affairs Hospital, an active health care accreditation; and

(B) An active designation by the host county.

(2) The Department's approval of a facility's designation shall automatically terminate on the effective date of termination or revocation of the facility's license, certification, or accreditation, or the host county's termination of designation.

(b) The Department's approval of a facility's designation is not transferrable to a new or different license or certification. If a designated facility will operate under a different license or certification than last approved by the Department, the host county shall submit a new application for approval of facility designation.

Section 22. Inspection of Designated Facility Site and Records.

(a) At any time, with or without prior notice, the Department may inspect a designated facility's site and its records, including medical records, to determine whether the host county is in compliance with the LPS Act and the standards in Article 3.

(b) The designated facility shall cooperate with the Department's inspection, including by providing the Department with all information and documents requested and making staff and patients available for interviews.

(c) A designated facility shall provide all requested information and records by the deadline specified by the Department.

(d) The Department shall notify the Behavioral Health Director if a designated facility fails to comply with this section.

Section 23. Revocation of Approval of Facility Designation.

(a) The Department may revoke its approval of a facility designation for host county noncompliance with the LPS Act or these interim regulations.

(b)(1) At least 30 calendar days before the revocation effective date, the Department shall notify the Behavioral Health Director of its intent to revoke its approval of a facility designation in writing. The notice shall include the Department's basis for revocation and the revocation effective date.

(2) Notwithstanding subsection (b)(1), the Department may revoke its approval of a host county's designation with five calendar days' notice if it determines that the facility's or host county's failure to comply with the LPS Act or these interim regulations creates an immediate risk of harm to the welfare, safety, or health of patients, staff, or visitors.

(c)(1) To request a review of the Department's decision to revoke its approval of a facility designation, the Behavioral Health Director shall submit a written request by certified mail or email to the Department at the address in Section 7 within 30 calendar days of the date of the Department's notice. The Department may decline to review an untimely request.

(2) A request for review shall contain all information, arguments, and supporting documentation the host county wishes the Department to consider.

(3) The Department shall issue a final written decision within 120 calendar days of receiving the host county's request for review.

(4) The Department may stay the effective date of revocation of approval while the revocation is under review.

(d)(1) The host county's designation shall automatically terminate on the effective date of revocation of approval, or if the effective date is stayed, on the date of the Department's final decision.

(2) Upon revocation of approval, the Behavioral Health Director shall comply with subsection (a)(3) of Section 19.