

# County of San Bernardino Department of Behavioral Health

## Clients with Physical Medical Conditions Policy

**Effective** 12/14/09  
**Approved** 10/07/10



Allan Rawland, Director

**Policy** It is the policy of the Department of Behavioral Health (DBH) to determine client basic medical condition as part of a completed assessment and to encourage clients with physical medical conditions to seek treatment at appropriate medical facilities as needed.

**Purpose** To provide staff with guidelines to facilitate treatment for clients with physical medical conditions.

**DBH Appropriate Actions** Each DBH clinic/program shall develop an internal protocol to use during intake/screening, to address the needs of clients who present with physical medical conditions. The guidelines in the chart below will be incorporated by the clinic/program.

**Note:** Clients with emergent physical medical conditions or who are in acute physical distress shall be advised to not leave the clinic.

When A Client...	Then...
<p>Is clearly in an emergent situation or is in acute physical distress</p>	<ul style="list-style-type: none"> <li>• Immediately call 911</li> <li>• Assist the client to sit or lie down in a quiet, uncongested area as indicated by the client's condition</li> <li>• Clinic staff will stay with client until emergency personnel arrive and assume care</li> <li>• Clinic staff will assist emergency personnel as needed</li> <li>• Document in the client's chart:               <ul style="list-style-type: none"> <li>○ Presenting symptoms</li> <li>○ Reason client came to the clinic</li> <li>○ Advice issued</li> <li>○ Care provided</li> <li>○ Final disposition</li> </ul> </li> </ul> <p><b>Note:</b> Conduct a telephone follow-up within three (3) business days.</p>

*Continued on next page*

# County of San Bernardino Department of Behavioral Health

## Clients with Physical Medical Conditions Policy, Continued

**DBH  
Appropriate  
Actions**  
(continued)

When A Client...	Then...
Reports a non-emergent physical medical condition and has medical treatment insurance	<ul style="list-style-type: none"> <li>• Advise the client to make an appointment to seek treatment; if possible, with the personal primary care physician</li> <li>• Advise client to dial 211 for advice in locating a personal primary care physician if the client does not have one</li> <li>• Attempt to obtain a release of information authorization when needed to request relevant medical records</li> <li>• Document the reported information as indicated above</li> </ul>
Reports a non-emergent physical medical condition and is unsponsored	<ul style="list-style-type: none"> <li>• Provide the client with:               <ul style="list-style-type: none"> <li>○ Telephone number to a local Medically Indigent Adult (MIA) facility, or</li> <li>○ County Public Health facility, or</li> <li>○ Advice to dial 211 to seek direction on locating a facility</li> </ul> </li> <li>• Obtain relevant medical records as needed and specified in the authorization to release medical information</li> <li>• Document the reported information as indicated above</li> </ul>
Refuses to seek treatment for a reported physical medical condition	Document the refusal and explanation for refusal