

**SECTION - ADMINISTRATION
ADMINISTRATIVE DIRECTIVE NO. 154
(Replaces A.D. No. 154 dated 12/7/06)**

Effective Date: February 16, 2007

SUBJECT: PUBLIC RELATIONS

I. PURPOSE

- A. Coalinga State Hospital (CSH) recognizes the importance of good public relations, and its responsibility to provide accurate and timely information to the public, community, consumer groups, and the media.
- B. The hospital must also conform to the requirements of established law, and the policies and directives of the Department of Mental Health and the Health and Welfare Agency. These requirements are especially applicable whenever the confidentiality of Individual information is involved.
- C. All staff are responsible to promote a favorable relationship with the public and protect the privacy and confidentiality of Individual information.

II. AUTHORITY

California Code of Regulations, Title 22, Sections 71547(c) and 73543(b); California Government Code, Section 6250, et. seq; Welfare and Institutions Code, Section 5328; Special Order 261 Release of Information to the News Media Regarding Significant Events Concerning Individuals Served at State Hospitals and Psychiatric Programs and Special Order 524 Access to Public Records; Policies and Procedures of the Department of Mental Health and the Health and Human Services Agency, and by Order of the Hospital Executive Director.

III. POLICY

CSH staff must have the permission of the Executive Director in order to hold a press conference or otherwise address the public as a representative of the hospital. This includes contacts with the media, civic organizations, or other groups to provide information on hospital services, treatment approaches, or outcomes.

IV. METHOD

- A. To ensure consistency, executive staff briefing, and a centralized point of contact, all inquiries from the media, public officials and dignitaries shall be directed to the Public Information Officer (PIO).

- B. The PIO shall immediately notify the DMH Headquarters' PIO (also referred as Assistant Director, External Affairs) of any significant event affecting an Individual.
1. The PIO shall consider all requests from the media as public information requests and shall limit the release of information to the following:
 - a. Confirmation that a significant event did occur and the approximate time.
 - b. Confirmation that the proper authorities have been notified.
 - c. Confirmation that an internal investigation of the event will be conducted by the state hospital.
 - d. A statement that no further information about the Individual will be released from the hospital or facility in accordance with Privacy laws and regulations.
 - e. Other information not specific to an Individual receiving care may be deemed appropriate for release to the media in certain situations.
 - f. General information and responses to questions from the media and the community about the incident or event must receive advance authorization from DMH Headquarters' PIO (also referred as Assistant Director, External Affairs) and be consistent with restrictions set forth by laws and regulation concerning privacy, investigation, and investigatory procedures.
- C. Any documents intended for publication, including program evaluation studies, review articles, theoretical papers or books that involve data or any other information derived from the context of employment at the hospital, shall be processed through the "Public Document Approval Process" required by the Health and Human Services Agency. The Executive Director has designated the PIO to coordinate this process.
- D. Presentations by staff at outside conferences, workshops or similar professional settings require approval in advance by the Executive Director. Abstracts shall be submitted to the PIO for processing.
- E. Requests for hospital wide Individual events shall originate from the Chief of Central Program Services, and include a description of the benefit(s) to the patient body, which is then directed to the PIO for Executive Committee approval.

- F. All requests for filming/photography inside and outside the hospital are coordinated and approved by the PIO with the following exceptions:
1. The Chief of Plant Operations may authorize filming/photography for the purpose of conducting essential physical plant related business.
 2. The Chief of Protective Services/designee may authorize filming/photography for investigative reasons.
 3. Clearance is not required for Individuals taking pictures from Jayne Avenue or of the CSH sign located at the front entrance.
- G. All public records of CSH are subject to disclosure to any member of the public. To ensure compliance with the law, and a centralized point of contact, all requests from the media, public officials or dignitaries for public records will be directed to the Public Records Act Coordinator in the External Affairs Unit.
- H. All CSH employees will be provided annual training on public relations and the Public Records Act.



W. T. VOSS
Executive Director

Cross Reference(s):

- A.D. No. 146 Administrative Rules
- A.D. No. 182 Sentinel Events
- A.D. No. 302 Patient Escape and Notification Policy
- A.D. No. 414 Research
- A.D. No. 418 Audio or Visual Recording Procedures
- A.D. No. 528 Patient Death
- A.D. No. 580 Patient Medical Records: Confidentiality and Information Release, Maintenance, Retention, and Disposition
- A.D. No. 584 HIPAA Health Information Privacy and Security Program
- A.D. No. 638 Hospital-wide Events Involving Individuals
- Special Order No. 236.01 Filming on State Hospital Grounds
- Special Order No. 237.01 Notification of Authorities
- Special Order No. 261 Release of Information to the News Media Regarding Significant Events Concerning Individuals Served at State Hospitals and Psychiatric Programs