

SECTION - SUPPORTIVE SERVICES
ADMINISTRATIVE DIRECTIVE NO. 644
(Replaces A.D. No. 644 dated 4/13/06)

Effective Date: May 10, 2007

SUBJECT: TRUST OFFICE FUNCTIONS

I. PURPOSE

The purpose of this Administrative Directive is to illustrate Coalinga State Hospital's (CSH) policy regarding Trust Office functions.

II. AUTHORITY

California Code of Regulations, Title 22, Sections 71555 and 73557; California Welfare and Institutions Code (WIC) Sections 4136 and 7281; Department of Developmental Services (DDS) Client Financial Services (CFS) Manual; Department of Mental Health (DMH) Special Orders 215.01, 718.01, 801, 812, and 813.01.

III. POLICY

It is the policy of CSH to ensure that policies and procedures are in compliance with the applicable sections of Title 22, the WIC; DDS CFS Manual; DMH policy; California Department of Corrections and Rehabilitation (CDCR); Director's Rules; and various paying agencies such as Social Security Administration, Veterans Administration, etc.

IV. METHOD

- A. Trust functions are under the supervision of the Patient Benefit and Insurance Officer I/II (Trust Officer) who is responsible to the Accounting Administrator.
- B. The Trust Office shall provide functional assistance to unit staff, Admissions, Patient Packages, Library, and the Mail Room, regarding Individuals' funds, specific valuable property, and funds for photocopies or postage.
- C. The Trust Office shall maintain a correlation with the CFS Section, which provides functional guidance and assistance for trust related issues.

V. FUNCTIONS AND RESPONSIBILITIES

- A. Locate, Protect, and Obtain Assets of Individuals:
 - 1. The Trust Officer shall act in a fiduciary capacity to assume responsibilities similar to a guardian or conservator of an Individual's estate.
 - 2. Locate and obtain all benefits entitled to CSH Individuals.

3. Manage Individuals' assets in a prudent manner consistent with existing laws and DMH policies.

B. Care and Treatment Charges:

1. Determine sources responsible to pay for care and treatment charges per WIC 7281, Special Order 812, and as required in the Statement of Financial Liability Trust form #40-045 (DS1261).
2. Establish payment guidelines from unearned income and earned income per Special Order 812.
3. Each account over \$500.00 shall be reviewed for potential care and treatment charges.
4. Individuals shall be provided with a copy of the Statement of Financial Liability and Authorization for Deposit and Withdrawal forms at the time of the Trust Office admission interview and notified of their liability to pay for care and treatment charges.

C. Financial Guidance:

1. Monitor Individual's \$200 monthly spending limit per Special Order 801.
2. Individuals shall be provided a quarterly statement of their ledger activity.
3. Unit staff may call the Patients' Accounts Helpline to leave a message for questions regarding patient account information. Helpline calls shall be returned within 24 hours of receiving.
4. Telephone calls from Individuals will not be accepted by the Trust Office.
5. Patient's Trust Account information shall only be provided for the Individual by means of a phone call from appropriate staff, or hand written requests signed by the Individual. Trust information shall not be provided to the Individual directly, unless an appointment has been scheduled by the Trust Office, to meet with the Individual.

D. Individuals' Personal Valuable Property:

1. Individuals' personal valuable property transferred from Atascadero State Hospital shall be audited with the Individual in the visiting room as soon as possible after admission, and recorded on the Receipt and Record of Patients' Valuables form, as required by the CFS Manual. Valuables are defined as watches, rings, misc. jewelry, checkbooks, identification, financial statements, misc. small or valuable property considered to be contraband, etc. and shall be placed in a fireproof vault for safekeeping by the Trust Office.

2. Individuals' personal valuable property in the custody of the Trust Office shall not be released to the Individual at any time during the initial audit procedure in the visiting room.
3. The Individual shall be advised of the policy to remove or place valuables in his Trust property during the initial audit procedure, which shall require a Patient Property Slip signed by the Individual and the Unit Supervisor. The Individual shall also be advised that the hospital is not responsible for the loss or damage of personal valuables in possession of the Individual.
4. In cases of missing personal property that was lost enroute to the hospital, the Individual may file a "Missing Property" form with the Department of Police Services "Missing Property Coordinator".
5. The Individual shall also have the opportunity to file a Claim for \$1000 or less, Form #MH 5399, for missing or lost property.
6. Individuals may not give, trade, barter, or sell any personal property to another Individual or employee. Special circumstances may be approved by Program Management.

E. Individuals' Personal Deposit Funds:

1. The Trust Officer acts as trustee/fiduciary for any funds received at the hospital for Individuals.
2. All monies received for an Individual upon admission or during the Individual's residency shall be brought to the Trust Office for deposit into the Individual's personal deposit fund as required by WIC 7281.
3. Refusal of endorsement by an Individual shall result in the check, money order or other negotiable instruments being returned to the sender by the Trust Office. No receipt shall be written if the Individual refuses endorsement.
4. Unit Staff shall submit to the Trust Office along with the return address or envelope, all checks, money orders or other negotiable instruments that an Individual refuses to endorse. The Trust Office shall return the funds to the sender with a letter of explanation, via certified mail and keep a log for tracking purposes.
5. Returned Certified Mail shall be placed in the Individual's Trust property if undeliverable for any reason.
6. Individuals are not allowed to endorse checks, money orders or other negotiable instruments from visitors in the visiting room.

7. Individuals are not allowed to endorse incoming checks/money orders or forward incoming checks/money orders or cash to another person. All funds coming into the hospital for Individuals shall be deposited into the Individual's account.
8. Persons acting on an Individual's behalf (including Individual's families, current Individuals or previous Individuals) is prohibited from transferring or sending funds, purchasing gifts, or giving special favors to other Individuals. Special circumstances may be approved by Program Management.
9. To ensure clearance of sufficient funds, a 10 business day hold shall be placed on all incoming personal checks, unknown/unfamiliar business checks, out of state checks, or other financial instruments. Special circumstances may be approved by Program Management.
10. Visitors requesting to deposit funds to an Individual's account shall disclose their name, address, and relationship to the Individual for our records. Funds shall not be accepted if the visitor declines to disclose this information.
11. Visitors are allowed to deposit funds to one Individual's account and shall not be allowed to deposit funds to numerous Individuals' accounts. Special circumstances may be approved by Program Management.
12. Credit card, bank transfers, Western Union, etc. type deposits are not acceptable.
13. All payment type of transactions pertaining to Individuals shall be managed by the Trust Office.
14. The Trust Officer shall be responsible to make certain the Individual's personal deposit funds for care and treatment charges are processed and maintained appropriately.
15. Individuals receiving checks or money orders in the name of an alias shall endorse the check with the alias name, and staff shall write the alias name in parentheses on the receipt along with the official hospital record name and hospital number (CO #).
16. Staff shall not provide a receipt to the Individual for any returned (uncashed) State checks issued from the Individual's account. These checks shall be submitted to the Trust Office by Unit staff and credited back to the Individual's account. The Trust Office shall provide the Individual with a "Receipt for Returned Coalinga State Hospital Check", Trust Form #40-024.

F. Monthly Spending Limit:

1. The current monthly spending limit is \$200.00 as set by the DMH, Special Order 801. The Trust Office shall monitor every Individual's account to ensure the monthly spending limit is not exceeded.
2. The Executive Director may authorize the Individual to exceed the monthly spending limit on a case by case basis if requested by the Individual.
3. The \$200 monthly spending limit must be exhausted prior to requesting approval to exceed the monthly spending limit.
4. Requests to exceed the \$200 monthly spending limit shall be clearly noted by the Individual on the appropriate withdrawal form. A well-defined explanation to exceed the monthly spending is required to determine the need to exceed the monthly spending limit and shall also be noted by the Individual.
5. Program Management shall review and validate the Individual's request to exceed the monthly spending limit, prior to forwarding to the Trust Officer.
6. The Trust Officer shall submit a memo to the Executive Director to obtain approval for the Individual to exceed the monthly spending limit.
7. The Trust Officer or Executive Director may request additional supporting documentation from the Individual prior to approval to exceed the monthly spending limit.
8. Requests to exceed the monthly spending limit may be delayed and require an undetermined amount of days to process due to the additional review and validation process.
9. The original Withdrawal of Patients Funds form or a copy shall be returned to the Individual with a memo of explanation if the request is denied.
10. Requests to exceed the monthly spending limit may not be accepted during the last week of each month, due to insufficient time to process prior to the month ending.
11. Requests to exceed the monthly spending limit that have not received approval prior to the end of the month shall be processed and deducted from the following month's spending limit.

G. Receipt Books:

1. The Trust Office shall keep a log and assign a receipt book to each unit.
2. A separate log shall be maintained to track individual receipts by date for each unit.

3. The receipt book shall consist of three part (NCR) receipts. The Individual shall receive the original white receipt, the yellow copy shall be submitted to the Trust Office with funds attached, and the pink copy shall remain in the receipt book.
4. Unit staff shall be responsible for completing the receipt with the following information: Individual's complete name, CO #, current date, dollar amount (numeric and handwritten), complete name and address of sender, staff signature and Unit number.
5. Trust Office staff shall verify the funds, initial the amount on the yellow receipt, and retain the yellow receipt as a record for posting the funds.
6. The pink receipts shall be retained in the receipt book and submitted to the Trust Office in exchange for a new receipt book when needed.
7. Voided receipts shall remain in the receipt book with all three copies stapled together, with "VOID" written across the receipt, and the Trust Office shall be notified of voided receipt numbers.
8. Unit staff shall be responsible to ensure Individual funds on the Units are submitted to the Trust Office on a daily basis.
9. Trust Office staff shall be available to collect funds from a central location as needed when unit staff is unable to bring funds to the Trust Office.

H. AB1013 (\$12.50):

1. By authority of Special Order 813.01 and in accordance with Section 4136 of the Welfare & Institutions Code. Each indigent Individual residing in a state hospital for a period of at least 30 days shall receive a stipend for his/her personal and incidental needs. The stipend, when added to his/her income, shall equal a maximum of twelve dollars and fifty cents (\$12.50) per month.
2. The eligibility date for Individuals who meet the requirements to receive AB1013 (\$12.50) shall be the date of admission and the date shall remain unchanged per Special Order 813.01 or if the Individual was receiving the monthly stipend at another facility, the date will remain unaffected upon transfer to CSH.
3. Each Individual must continuously physically reside in the state facility for at least 30 days. Medical or therapeutic leaves of less than 30 days will not constitute a break in residency.
4. If an Individual elects to do so, an Individual may save all or any portion of his or her monthly amount of aid provided for personal and incidental needs for expenditure in subsequent months.

5. Funds available to the Individual within or outside of the facility are to be considered in determining the Individual's eligibility for the \$12.50 stipend.
6. Individuals who are discharged or deceased prior to expending the funds shall have the stipend returned to CSH Accounting.

I. Advanced Gate Money:

1. CDCR shall submit a CDCR 102 form to the Trust Office authorizing the amount of Advance Gate Money for each eligible Individual when directly discharged to the community from CSH.
2. The Trust Office shall keep a file of CDCR 102s and utilize as authorization to disburse Advanced Gate Money to eligible Individuals upon direct discharge to the community.
3. The CDCR 102 shall be remitted to the Paso Robles Regional Accounting Office (RAO) for reimbursement of Advance Gate Money.
4. Advance Gate Money shall not be disbursed to Individuals upon direct discharge to the community if a CDCR 102 Authorization is not on file in the Trust Office.
5. CDCR 102s on file for Individuals discharged while on court leave shall be returned to RAO with a memo notifying CDCR of the Individual's status. These Individuals shall not receive Advanced Gate Money from the Trust Office.
6. Individuals may receive a check for Gate Money to utilize while detained at CSH only if the check is accompanied by a court order authorizing the issuance of gate funds. Gate money checks received without a copy of the court order will not be accepted for deposit and will be returned to the appropriate agency.

J. Individual's Disbursements:

1. The majority of Individuals' expenditures shall be submitted on a Withdrawal of Patients Funds Form # Trust 40-028 with the exception of cash card purchases.
2. All out of hospital disbursements shall be initiated on a Withdrawal of Patient's Funds Form # Trust 40-028 and signed by the Individual. This form shall be routed to the Unit Supervisor and Nursing Coordinator to determine if the disbursement is permissible prior to their authorized signature and prior to forwarding to the Trust Office to process.
3. Withdrawal requests received in the Trust Office shall be date stamped and processed within 2-3 working days of date stamp, except for special circumstances may require additional days to process.

4. The Trust Office is not responsible for withdrawal requests that are delayed for various reasons prior to forwarding to the Trust Office, including delays by intra-office mail, or delays from Unit or Program staff or withdrawals that have been lost or misplaced.
5. Withdrawal requests that are questionable, not legible or unclear for any reason may cause the request to be delayed for an undetermined amount of days.
6. Disbursements to current CSH Individuals, former DMH Individuals, Individuals at other CDCR or DMH facilities, volunteers, CSH employees, previous State employees, relatives or friends to any of the previously mentioned are not allowed. Individuals may request approval from Program Management or the Executive Director for special circumstances. Requests for approval for special circumstances shall be reviewed by Program Management or the Executive Director on a case by case basis. Volunteers, CSH employees, previous DMH employees, or any of their families shall not be considered for special circumstances.
7. Disbursements to anyone with the same mailing address as any of the group mentioned in the above (# 2) shall also be restricted and not allowed. Individuals may also request approval from Program Management or the Executive Director for special circumstances.
8. Individuals shall receive up to \$50.00 disbursed from their account when going out on a court leave. If the court leave exceeds 30 days, the Individual may send a written request to the Trust Office for additional funds from his account.

K. Special Purpose Trust Accounts (Club/Unit Party Account):

1. The Department Supervisor shall notify the Trust Officer to request appropriate forms for activating a new Special Purpose Trust Account.
2. A Special Purpose Trust Authorization shall be on file in the Trust Office prior to activation of account. The authorization shall include the names and signatures of the staff person and alternate staff person responsible for the fund, Nursing Coordinator/Assistant Chief, Program Director/Dept. Head, and/or Hospital Administrator/Executive Director.
3. All club and party funds shall be utilized for education and/or entertainment purposes only. Staff shall utilize these funds for the benefit of all Individuals and funds shall not be utilized for the benefit of just one Individual.
4. Individuals may donate once a month a minimum of \$1.00 or a maximum of \$25.00 to an authorized Special Purpose Trust Account (club or unit party account). Donations shall be disbursed from the Individual's account and shall be deducted from the Individual's monthly spending limit.

5. All Individual donations to the party fund are final and shall not be reversed for any reason.
6. Individuals shall donate to their home Unit and are not allowed to donate to other Units.
7. Disbursements from these accounts shall be initiated on a three part Withdrawal of Client's Funds form and submitted to the Trust Office to generate a check. This form shall include the club/party fund name, account number, signature of responsible staff person on file, and the Nursing Coordinator or Program Director authorizing disbursement.
8. The Trust Office shall retain the original copy, stamp the second copy and return the second and the third copy to the responsible staff person.
9. A check shall be issued to an individual vendor and shall not be cashed and/or utilized at various stores/vendors. If funds are required for various stores/vendors, a Withdrawal of Client's Funds form shall be initiated to issue a check for each vendor.
10. Staff shall be responsible for submitting receipts verifying purchase amount and/or returning exact amount of funds not expended to the Trust Office on the next working day.
11. Staff shall also be responsible for obtaining another program management signature on the stamped second copy of the Withdrawal of Client's Funds to verify items were purchased as authorized.
12. Disbursements shall not be authorized from Special Purpose Trust Accounts with outstanding receipts or missing program management verification signatures.
13. Special Purpose Trust Accounts that are inactive for 12 consecutive months shall be closed and any remaining funds shall be transferred to the Patient Benefit Fund.

L. Gift Tran System:

1. Gift Tran shall be a cash card system utilized by Individuals and managed by the Trust Office.
2. The Individual's picture I.D. card shall be the Individual's cash card and shall be used for purchases at the canteen, grill, and library.
3. The Trust Office and Protective Services shall correlate the production and distribution of the Individual's photo I.D. to be utilized as a cash card.
4. The cash card shall be issued to the Individual upon admission with a zero balance.

5. The Individual shall submit a request to the Trust Office to have funds transferred from his ledger account to the cash card.
6. The Individual shall be allowed to transfer available funds up to the \$200 monthly spending limit onto the cash card.
7. For approval by the Executive Director to exceed the monthly spending limit, the Individual is required to note on the cash card form, "Request to Exceed the Spending Limit". The absence of this note shall result in the cash card being routed back to the Individual and not processed.

M. Notary Service:

1. The Trust Office shall be notified of the type of documents to be notarized by the Individual's social worker.
2. Notary appointments shall be scheduled by the Trust Office on a week day convenient to the Notary's schedule, between the hours of 10:00 a.m. – 1:00 p.m. in the visiting room.
3. Individuals shall be responsible for the \$10.00 (per signature) Notary fee plus the travel fee amount established by the current Notary Public, regardless of indigent status.
4. Cancellations must be communicated to the Trust Office at least one hour before the appointment time. The Individual shall be responsible for the "travel fee" if cancellation is not communicated prior to the Notary's arrival.
5. The Individual's treatment team must review all notary papers except birth certificate application forms. A note must be written in the Individual's chart stating he understands the document to be notarized. A copy of the note shall be attached to the Individual's Withdrawal of Patient's Funds form when submitted to the Trust Office.
6. Individuals shall be responsible to bring all required documents to the visiting room on the scheduled appointment date.
7. Individuals shall be informed; documents shall not be signed prior to their Notary appointment.

N. Birth Certificate/Department of Motor Vehicles (DMV) Identification Cards:

1. The Individual shall be responsible for acquiring and completing the appropriate application forms required to obtain a birth certificate. The social worker shall assist the Individual with acquiring or completing the appropriate forms if needed.

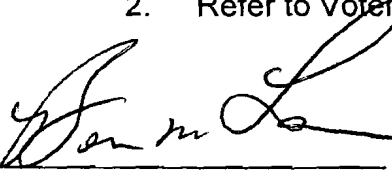
2. Requests for a birth certificate shall be submitted to the Trust Office with the appropriate completed birth certificate application form(s) attached to the Withdrawal of Patients' Funds form.
3. The state shall pay the fee for indigent Individuals in need of a birth certificate.
4. CSH is unable to provide DMV I.D. cards to Individuals as the DMV is unable to provide this service.

O. Advanced Directives:

1. The social worker shall contact the Patient's Rights Advocate to coordinate an appointment time and date for the Individual with the Patient's Rights Advocate.
2. The Patient's Right Advocate shall act as a witness and shall provide (1) additional witness as required for appropriate signatures on the Advanced Directive.
3. The Patient's Rights Advocate shall make certain the Individual has completed the Advanced Directive without influence from others, prior to the Individual signing.

P. Voter Registration:

1. The Trust Office shall coordinate the voter registration process with the social worker and the County Clerk's Office.
2. Refer to Voter Registration A.D. No. 650 for detailed policy.



BEN MCLAIN
Executive Director (Acting)

Cross References:

- A.D. No. 528 Individual Death
- A.D. No. 564 Advance Directives
- A.D. No. 602 Union Square (Canteen)
- A.D. No. 608 Patient Access to the Courts
- A.D. No. 624 Individuals' Mail and Packages
- A.D. No. 650 Patient Voter Registration