



Shasta County Mental Health, Alcohol and Drug Department

Writing and Implementing Policies and Procedures

No. 1000
 Date: March 15, 2010
 Rev. 1.0
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 Author: Celeste Buckley

1.0 Purpose

This document establishes guidelines for creating policies and procedures in the Shasta County Mental Health, Alcohol and Drug Department (SCMH/ADP), including the requirements and who is responsible for reviewing, authorizing, and implementing internal department policies and procedures.

2.0 Revision History

Revisions will be tracked to ensure that all edits are documented and affected staff is aware of new information and have the most up-to-date policy.

Date	No.	Action:
03-15-2010	1.0	Implementation

3.0 Persons/Programs Affected *(Check all that apply)*

<input type="checkbox"/> All Employees		<input type="checkbox"/> All Managers		<input type="checkbox"/> All Program Coord/Supervisors	
Adult		Bus Admin		Crisis	
<input type="checkbox"/> Access		<input type="checkbox"/> Avatar		<input type="checkbox"/> CRRC	
<input type="checkbox"/> MH-ADP		<input type="checkbox"/> Bus Office		<input type="checkbox"/> CSS	
		<input type="checkbox"/> Med Records		<input type="checkbox"/> MD's	
		<input type="checkbox"/> Other Support Services		<input type="checkbox"/> NP's	
				<input type="checkbox"/> RN's	
MHSA		Quality Management		MH-ADP Youth	
<input type="checkbox"/> Admin		<input type="checkbox"/> Compliance		<input type="checkbox"/> Breslauer Way	
<input type="checkbox"/> INN		<input type="checkbox"/> Managed Care		<input type="checkbox"/> California St & Yuba St	
<input type="checkbox"/> STAR		<input type="checkbox"/> QM		<input type="checkbox"/> Regional Sites	
<input type="checkbox"/> WET					
Other: <i>(Specify)</i>					

**All employees include all individuals employed by the SCMH/ADP Department full-time, part-time and extra-help.*

4.0 Policy

All SCMH/ADP Policies and Procedures (P-Ps) will include:

- Policy Number
- Purpose Statement
- Revision History
- Persons and Programs Affected
- Policy and Procedure
- Implementation Strategy
- Definitions
- Attachments
- References and Citations
- Authorization and Signatures

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- Sunset Date, if applicable

The originating division is responsible for writing the proposed P-P and ensuring that all internal stakeholders have reviewed and understand the information. When drafting a new P-P, ensure that the information is clear and succinct, complies with regulatory requirements, and supports the mission, vision, and values of the Department.

A P-P template will be utilized for all new P-Ps, and is available on the Shasta County Internet home page at:

County Departments → Mental Health → All Employees → Department Policies and Procedures

5.0 Procedure

To get started with a new P-P access the website link above, save the template to your computer, and edit as needed. The site includes two templates—one with and one without prompts. The prompts describe each field, required information, and an example if appropriate. Do not change the template—P-Ps submitted on alternate or obsolete templates will be returned for corrections.

Policies and procedures created prior to this format are still in effect and will be numbered but will not be updated until a revision is scheduled or required. Policies and procedures will be reviewed annually for updates. The Managed Care/Compliance Division will send an annual reminder to all staff by the end of the current fiscal year requesting their updated policies and procedures. Programs will be given adequate time to revise and turn in their revisions. Implementation and revision of all P-Ps will be tracked by the Quality Management Division. Avatar staff will be responsible for posting the final procedures to the Internet.

Routing for Finalization and Approval: Department Directors, Division Chiefs, Program Managers, Program Coordinators, and/or Supervisors are required to review all draft P-Ps, comment, and provide written recommendations to the Division Chief, if an alternative procedure is desired.

An electronic distribution of the proposed P-P with all attachments and due date is recommended. However, if this is not an option, one (double-sided) hardcopy of the P-P package with a completed routing slip (Attachment B) and due date should be forwarded to each stakeholder. Final approval will be obtained from the Directors after all others have reviewed, commented, and signed. The author and program secretary are responsible for routing, obtaining buy-in, and making changes. At times, it may be



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difficult to obtain concurrence from all stakeholders. Alternative processes may be recommended by another division but should be submitted in writing to the directors for consideration. The Department Director and Deputy Directors will review alternative recommendation(s) and all supporting documents and make a decision that:

1. Conforms with regulatory requirements pertaining to service delivery, quality of care, and Medi-Cal claiming processes; and
2. Supports the mission, vision, values of the department; and
3. Addresses the overall needs, goals, and objectives of the entire department; and
4. Is practical, realistic, and improves the overall effectiveness of the department.

Policy Number: All approved P-Ps will be assigned a number by the Managed Care/Compliance Division. Each program/division will have a unique range of numbers that will identify their P-Ps as follows:

Division	Policy No.	Division	Policy No.
Access	0000-0999	Crisis/Urgent Care	5000-5499
Admin Mgmt	1000-1999	Crisis Residential	5500-5999
Adult	2000-2999	Compliance	6000-6499
ADP	3000-3999	Managed Care	6500-6999
Business Services:	4000-4999	Medical Staff	7000-7999
Avatar	4000-4299	MHSA	8000-8999
Business Office	4300-4599	MH-ADP Youth:	9000-9999
Medical Records	4600-4699	Breslauer Way	9000-9499
Other Support Services	4700-4999	California St & Yuba St	9500-9999

6.0 Implementation Strategy

The originating program is responsible for ensuring that all internal stakeholders have been informed of the new P-P and supporting documents.

Recommended methods for communicating new P-Ps include, but are not limited to: Division staff meetings, internal training sessions, “Morning Coffee” or other all-staff meetings, performance evaluations, electronic mail, and/or voicemail.



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It is the Program Coordinator and Division Chief's responsibility to ensure that regionally-based (or co-located) staff is aware of the new P-P, especially those who may not have regular access to the County computer system.

As a result of the Health and Human Services Agency (HHS) integration, communication regarding P-P's with other HHS Branches and Programs may be necessary (e.g., Perinatal, Children & Family Services, Adult Protective Services.) If this is the case, it is the responsibility of the Division Chief or Program Manager to ensure that all internal stakeholders have received the information.

- **Note:** For those P-Ps identified as "Mission Critical", staff signature will be required as acknowledgement of receipt. These policies are critical to the ongoing operations and fiscal viability of the department and are considered Core Competencies that will be included as part of the employee's performance evaluation criteria.

7.0 Definitions

Core Competencies: The fundamental requirements of any position that an employee is expected to know and understand to successfully do their job. Core competencies are performance evaluation criteria that may vary based on employee roles, responsibilities, and/or job functions.

Division/Program: Often used interchangeably to communicate the separation of services and teams at SCMH/ADP. Refer to the *Programs and Persons* affected section of this document for a listing of all Department Divisions and Programs.

Mission Critical P-Ps: Those policies identified critical to the ongoing operations and fiscal viability of the department. Mission critical P-P's are considered core competencies that will be included as part of the employee's performance evaluation criteria. Not all mission critical P-P's have the same level of importance to all staff. As an example, it is critically important for the Business Office to submit reimbursement claims in a timely manner but it is not necessary to evaluate staff in other divisions by the same criteria. If this is the case, it should be noted in the *Programs and Persons* affected section. Directors' will determine which P-P's are mission critical.

P-P Template: The template used by SCMH/ADP staff when creating or revising policies and procedures. There are two versions of the template posted on the department website one with prompts and one without. The prompts in red font explain each required field and help to create consistency in operations throughout the department. Writers' should delete all prompts prior to submitting the draft P-P for review.

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Quality Management Division: Refers to the Division responsible for all Managed Care, Compliance, and Quality Management functions.

Regionally-Based Staff: Refers to a variety of programs and/or teams delivering mental health alcohol and drug treatment services outside of the Breslauer Campus. Regional sites may include, off-site county offices (owned or leased), schools, hospitals, Federally Qualified Health Centers, organizational providers, community centers, and other sites where access to computer systems may not always be an option.

8.0 Attachments

Attachment A: P-P Templates

Attachment B: Routing Slip

9.0 References and Citations

None

10.0 Authorization

All Department P-Ps must be authorized prior to implementation. Submit all draft P-P's to the Executive Assistant for review at the next weekly Director/Deputy Directors meeting. At that time the information will be authorized or returned for corrections. All policies must be reviewed and have the concurrence of the Quality Management Division before Directors' review. It is recommended that draft policies be submitted for authorization no later than the Friday before the weekly Directors' meeting.

Required signatures for this policy include:

- Department Director
- All Deputy Directors
- Managed Care Compliance Officer
- All Clinical Division Chiefs
- Executive Assistant
- All Administrative Secretaries



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10. Authorization

The above policy and procedure has been reviewed and is authorized for immediate implementation:

[Signature of Mark Montgomery]
Mark Montgomery, Director

3/15/10
Date

[Signature of Celeste Buckley]
Celeste Buckley, Deputy Director

3/15/10
Date

[Signature of David Reiten]
David Reiten, Deputy Director

March 15, 2010
Date

[Signature of Maxine Wayda]
Maxine Wayda, Deputy Director

3/15/10
Date

[Signature of Connie Harrah]
Connie Harrah, Compliance Officer

March 15, 2010
Date

[Signature of Lynne Jones]
Lynne Jones, Clinical Division Chief

March 16, 2010
Date

[Signature of Marie Osborne]
Marie Osborne, Clinical Division Chief

March 15, 2010
Date

[Signature of Doug Shelton]
Doug Shelton, Clinical Division Chief

3.15.10
Date

I acknowledge that I have reviewed and understand the Policy and Procedure described herein. I also understand that the above required procedures will be reviewed as a Core Competency in my annual performance evaluation.

Employee Name/Title

Date