ST. CLAIR COUNTY COMMUNITY MENTAL HEALTH AUTHORITY

BOARD POLICY

Date Issued 12/23

CHAPTER Administrative		CHAPTER 01	SECTION 001	SUBJECT 0040
SECTION Governance		SUBJECT Policy and Procedures Committee: Policy/Administrative Procedure and Forms Development and Review		
WRITTEN BY Peg Lawton	REVISED BY Latina K. Cates		AUTHORIZED BY SCCCMHA Board	

I. APPLICATION:

       ☒ SCCCMHA Board
       ☒ SCCCMHA Providers & Subcontractors
       ☒ Direct Operated Programs
       ☒ Community Agency Contractors
       ☒ Residential Programs
       ☒ Specialized Foster Care

II. POLICY STATEMENT:

It shall be the policy of the St. Clair Community Mental Health Authority (SCCCMHA) Board to issue agency policy. Policies are to adhere to applicable federal and state laws, regulatory body requirements e.g. Michigan Department of Health and Human Services (MDHHS), Commission on Accreditation Rehabilitation Facilities (CARF), etc., and applicable contract requirements and have a formal process for policy development, review and revision as outlined below.

III. DEFINITIONS:

A. Application: For purposes of this policy, it identifies whom the policy governs, and who is to receive a copy of the policy.

B. Form: A document used to gather and/or provide specific information, which may be required, to attain or release information or a service. Some forms require signature(s) and date.

C Policy: A document that contains the Board's policy statement, definitions, standards, procedures, and applicable references and exhibits.

D. Policy Statement: Establishes a principle or position regarding a specific matter adopted by the Board.

E. Procedure a.k.a. administrative procedures: The actions taken by designated individuals, with specific steps and responsibilities that operationalizes the Board's policy statement.

F. Purpose Statement: This item identifies the need or reason for the Administrative Procedure.

G Standard: An authoritative directive (law, rule, regulation, requirement, or good business practice) establishing an expectation of particular conduct or procedure.

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IV.   STANDARDS:

   A.   Policies should provide direction, legal framework, and operational standards that impact the entities identified in the policy application.

   B.   Policies shall have a standardized format that includes sections for: application, policy statement, definitions, standards, procedures, and if applicable references and exhibits.

   C.   Administrative Procedures shall have a standardized format that includes sections for: application, purpose statement, definitions, standards, procedures, and if applicable references and exhibits.

   D.   Policy review shall take place annually and will include review by SCCCMHA Board Members and staff, contract providers, individuals served, and their family members.

   E.   Administrative Procedures review shall take place annually and will include review by staff, contract providers, individuals served, and their family members.

   F.   SCCCMHA Board reserves the right either prospectively or retrospectively to review any policy or administrative procedure at any time. Moreover, it reserves the right to add or delete policies to the Provider Manual as it deems necessary to achieve SCCCMHA desired ends and outcomes. SCCCMHA policies and administrative procedures are divided into nine (9) major categories:

      01   Administrative
            01   Governance
            02   Operations
            03   Provider Management
      02   Access to Services
            01   Access
            02   Customer Service
            03   Utilization Management
      03   Service Delivery
            01   Treatment
            02   Records
            03   Client Services
      04   Health/Medical
            001 Drugs and Medications
            002 Health Care
            003 Residential and Day Programs
      05   Recipient Rights
            001 Recipient Rights
            002 SUD Recipient Rights
            003 Individual Rights

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06   Human Resources
     01   Personnel
     02   Training
07   Fiscal Management
     01   Budget
     02   Accounting
     03   Reimbursement
08   Information Management
     01   Information Systems
     02   Data Management
09   Facilities
     01   Building
     02   Transportation
     03   Safety

G.   SCCCMHA shall commission the Policy and Procedures Committee to conduct policy and procedure activities. The Committee Core Membership shall include representation from the following areas: Chairperson (appointed by SCCCMHA Director); Administrative Services; Adult and Family Services; Finance; Human Resources; Information Management; Medical; Recipient Rights; Support Services; Facilities.

H.   Committee members who miss three (3) meetings of the committee within a one-year period are subject to appropriate action determined by the Chairperson, which include the option of obtaining a replacement of the individual.

I.   The Committee shall meet every other month to develop, review and finalize policies/administrative procedures through discussion and action.

J.   A "Special Issue Policy" or "Special Issue Administrative Procedure" shall be implemented when Management / Administration determines that due to a MDHHS Directive, new law, or a change in agency position, etc., a new policy needs to be issued immediately.

K.   The Chief Executive Officer/designee may issue an "Administrative Directive" when necessary to convey a change in standards and/or procedures in any agency policy/administrative procedure. Change(s) must be written in the Administrative Directive, including reference to the specific section, letter, and number (as applicable) of what is changing via the Directive. The Administrative Directive will be an attachment to the policy/administrative procedure, which now includes the change(s) as set forth in the directive, and will stand in lieu of a complete policy/administrative procedure review until scheduled for the next review at which time it will be incorporated and the Administrative Directive is removed.

L.   Forms may or may not be part of a policy/administrative procedure. Forms that are included are reviewed annually by the Policy and Procedure Committee. Form development and implementation must go to the Form Committee for approval prior to implementation.

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M.   All forms will use a standardized heading and font. Forms to include a form number, issue and revision dates, policy/administrative procedure reference, when applicable, a file path, and /or an Electronic Health Record path.

N.   All Forms on the Forms Index and in OASIS are reviewed annually.

V.   PROCEDURES:

A.   Policy/Administrative Procedure Development Process

Person Drafting / Reviewing Policy/Administrative Procedure

01   Drafts policy and administrative procedure using standard Format (See Policy Committee binder) and "Policy Drafting and Review Guidelines" (Exhibit A).

02   Forwards new policies and administrative procedures to committee Chairperson who assigns a number and assigns the policy/administrative procedure to committee member.

03   Makes revisions on the computer using "Track Changes".

04   Completes a "Required Review Sheet" (Exhibit B) on each policy/administrative procedure that are newly written, reviewed, revised, or proposed for deletion, as part of presentation.

Committee Member

05   Ensures policy/administrative procedure is on next Policy Committee agenda.

B.   Policy/Administrative Procedure Review Process

Committee Support Staff

01   Forwards the scheduled Board policies the Executive Secretary and IT Technician on the Thursday before the Board Meeting and when appropriate (usually 3 to 7 business days) forwards Board feedback to the assigned Policy Committee Member, as applicable.

Policy Committee

02   Reviews scheduled policies/administrative procedures (reviewed, revised, delete, and new), at Committee meeting.

Committee Support Staff

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03　Forwards all clinically related proposed policies/administrative procedures to the Advisory Councils for review, and when applicable forwards Advisory Council feedback to the assigned Policy Committee member.

04　Posts policies/administrative procedures to be reviewed on SCCCMHA website and sends notice to system that they are available for two-week system-wide review.

Staff Member / Contract Providers

05　Reviews Policy Review Packet by accessing on the SCCCMHA website.

06　Forwards feedback to designated Policy Committee member by due date.

Policy Committee Member

07　Receives feedback on policies/administrative procedures and determines whether to incorporate recommended changes.

08　Re-presents policy/administrative procedure to Policy Committee at next scheduled meeting if substantive changes have been made based on feedback received. In those cases, an additional two week system-wide review period may occur before being final-issued.

09　Saves in Final Committee Folder all policies/administrative procedures presented at committee in their final state: new policies/administrative procedures, final drafts, policies/administrative procedures without changes, and those proposed for deletion.

C.　**Policy/Administrative Procedures Approval/Final Issue**

　Committee Support Staff

01　Prepares finalized policies/administrative procedures for approval by Board and/or Executive Director/designee.

02　Issues approved finalized policy/administrative procedure by posting on SCCCMHA website and informing the system (staff and contract providers) via an email.

03　Updates Table of Contents and Policy/Administrative Procedures Database.

D.　**Form Implementation and Review**

　Staff

01　Completes a Request to Create, Modify or Delete a Form, form #284.

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02 Submits Request to Create, Modify or Delete a Form with a draft Word Format (if this is a new form) OR most recent version of the form to modify or delete an existing form.

E.   Forms Committee Chairperson/Designee

01 Acknowledges receipt of form #284.

02 Adds request to Forms Committee agenda for processing.

03 Ensures a response is sent to requesting party within two weeks from acknowledgment date.

04 Ensures new, modified or deleted form is updated on the Forms Index and in OASIS.

05 Informs staff of availability of new/revised form.

06 REFERENCES:

None Available

07 EXHIBITS:

A. Policy Drafting and Review Guidelines

B. Review Sheet

VIII. REVISION HISTORY:

Dates issued 11/02, 06/05, 05/08, 09/11, 01/13, 01/14, 01/15, 01/16, 01/17, 01/18, 01/19, 01/20, 01/21, 2/22.

Policy Drafting and Review Guidelines

1. HEADER INFORMATION: When completing this section of the policy, refer to the Table of Contents to determine the appropriateness of selecting these titles.

   Chapter 01 ADMINISTRATIVE
   >   01   Governance
   >   02   Operations
   >   03   Provider Management

   Chapter 02 ACCESS TO SERVICE
   >   01   Access
   >   02   Customer Services
   >   03   Utilization Management

   Chapter 03 SERVICE DELIVERY
   >   01   Treatment
   >   02   Records
   >   03   Client Services

   Chapter 04 HEALTH/MEDICAL
   >   01   Drugs and Medicine
   >   002 Health Care
   >   003 Residential and Day Programs

   Chapter 05 RECIPIENT RIGHTS
   >   01   Recipient Rights
   >   02   SUD Recipient Rights
   >   003 Individual Rights

   Chapter 06 HUMAN RESOURCES
   >   01   Personnel
   >   02   Training

   Chapter 07 FISCAL MANAGEMENT
   >   01   Budget
   >   02   Accounting
   >   03   Reimbursement

   Chapter 08 INFORMATION MANAGEMENT
   >   01   Information Systems
   >   02   Data Management

   Chapter 09 FACILITIES
   >   01   Building
   >   02   Transportation
   >   03   Safety

2. APPLICATION: Identifies to whom the policy/administrative procedure is sent and/or who should read/review. Check the appropriate boxes that indicate to whom this policy/administrative procedure should apply.

3. POLICY STATEMENT: This should be a brief statement that expresses the Board's position on the subject matter of the policy. This should begin with "It shall be the policy of ….." The actual statement of position should follow this. If there is more than one position statement, they should be identified separately by "A.... B ...", however, this is not usually recommended.

4. PURPOSE STATEMENT: This should be a brief statement that explains the need or reason for the administrative procedure.

5. DEFINITIONS: These statements indicate the meaning of a word, phrase, or title. Whenever possible, definitions should be consistent when used throughout various policies/administrative procedures. The writer should refer to other policies/administrative procedures that may contain the definition. Definitions should never be in contradiction with authoritative definitions, e.g., definitions provided within the Mental Health Code, etc. Definitions are not required and should be included only when it is absolutely necessary to understand/implement the procedures. When definitions are used, they should be listed alphabetically.

6. STANDARDS: These authoritative statements establish the criteria or parameters within which the procedures are written. The source of the standards could be internal and therefore an extension of the policy or purpose statement, or the source could be external. Standards are an optional item. They should be included only when it is absolutely necessary to understand or implement the procedures; or as a reference of standards that are mandated by an outside inaccessible source. This section should NOT include procedures.

7. PROCEDURES: This section describes the actions that should be taken to implement the policy/administrative procedure. It clearly identifies "Who" is responsible for some action. The section numerically identifies what action should be taken and therefore, to be consistent, should ALWAYS begin with a verb. Writers should avoid putting too many tasks under one step. Procedural statements should be simple and brief. If there is a need to clarify further by referencing another policy/administrative procedure or special circumstance, the writer should, within the procedures section, indicate this by using "NOTE:...." or "SPECIAL NOTE:...." If other policies/administrative procedures are referenced, both the title and number should be indicated. When exhibits are referenced, they should be referenced in order (Exhibit A, Exhibit B, etc.).

    There are two (2) other options for drafting within the procedural section. If the policy/administrative procedures involves more than one set of procedural steps, these should be separated by "A....", "B... "; the numbering of steps would start over within each sub-procedural area. In addition, if a procedure is particularly complicated, or a detailed concurrent procedure, the writer could indicate as a procedural step "Follows the procedures established in Exhibit A." The Exhibit would then outline procedures.

8. REFERENCES: Authoritative laws, rules, guidelines, regulating bodies, etc., that drive the policy/administrative procedure. Some examples include Michigan Compiled Laws, MDHHS, Mental Health Code, Medicaid Manual, CARF, etc.

9. EXHIBITS: All exhibits to a policy/administrative procedure must be labeled. They should be alphabetical, with numerical indicators if needed, e.g., A-1, A-2, B, C, etc.... The writer, when changing an exhibit, should keep in mind whether or not the exhibit is contained in other policies/administrative procedures. The subject matter of exhibits should not contain material that frequently changes (e.g., staff names should not be used, rather that person's title).

10. REVISION HISTORY: All dates the document was finalized prior to the most recent issue date.

POLICY/ADMINISTRATIVE PROCEDURE REVIEW SHEET

Name of Reviewer:

Title and Number of Policy/Administrative Procedure Being Reviewed:

1. The policy/administrative procedures is: ☐ required ☐ needed ☐ proposed for deletion
   Give rationale (include Code or Rule reference, etc.):

2. Is the Chapter and Section Number still appropriate? ☐ Yes ☐ No

3. Is application accurate, as far as you know? ☐ Yes ☐ No

   Check all entities to which policy applies:
   ☐ SCCCMHA Board
   ☐ SCCCMHA Providers & Subcontractors
   ☐ Direct Operated Programs
   ☐ Community Agency Contractors
   ☐ Residential Programs
   ☐ Specialized Foster Care

4. Is the name user friendly? ☐ Yes ☐ No; Name suggested:

5. In reviewing this policy/administrative procedure, did you consult with anyone? ☐ Yes ☐ No;
   List with whom:

6. Is special review required for this policy/administrative procedure: ☐ Yes ☐ No By:

   ☐ Finance   ☐ Compliance   ☐ Professional Discipline
   ☐ Customer Relations   ☐ Information Systems   ☐ Recipient Rights Office
   ☐ Quality Management   ☐ SCCCMHA Board   ☐ Advisory Council
   ☐ Utilization Management   ☐ Other:

7. Please identify all Forms that are referenced in this policy/administrative procedure.
   Form # _____ Change:☐ *Yes ☐ No *Make changes to existing form and attach to review sheet.
   Form # _____ Change:☐ *Yes ☐ No *Make changes to existing form and attach to review sheet.
   Form # _____ Change:☐ *Yes ☐ No *Make changes to existing form and attach to review sheet.
   Form # _____ Change:☐ *Yes ☐ No *Make changes to existing form and attach to review sheet.
   Form # _____ Change:☐ *Yes ☐ No *Make changes to existing form and attach to review sheet.

8. **What are the significant changes being proposed to this policy/administrative procedure and why?**

POLICY/ADMINISTRATIVE PROCEDURE (Name & #) BEING REVIEWED:

Send FEEDBACK To Policy Member:

Email Address:

FEEDBACK Due Date:

INSTRUCTIONS:
1) Review the policy/administrative procedures.
2) Provide written feedback and/or suggested language changes on this sheet or on the policy/administrative procedure.
3) NOTE: It is the Policy Committee's intent to notify each staff as to the disposition of his/her comments/suggestions.

NAME	PAGE #(S) COMMENTED ON	COMMENTS/LANGUAGE CHANGES