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PROGRAM DESCRIPTION
The Department of Behavioral Health at the Pit River Health Services is a comprehensive program, which incorporates critical elements of social services, substance use and abuse treatment, medication management, mental health counseling, and traditional Native American culture and spirituality to form an integrated wellness model for comprehensive care.

This behavioral health program is thought to be an important component to having a successful and effective community and Native-based primary health care center. This program strives to assist the Pit River Health Services in becoming increasingly comprehensive as well as culturally relevant to the Native American communities it serves by offering to treat each client’s psychological and social needs.

This program is designed to provide outpatient services, which are clinical services made available to adults, children and youth. These clinical services include assessment of physical, emotional, behavioral, social, legal, developmental, vocational and cultural factors, diagnosis of the full range of psychiatric disorders, psychological evaluation, treatment planning, treatment using of a variety of modalities, consultation, referral and follow-up.

In order to improve the delivery of quality behavioral health services by culturally competent providers to diverse populations, this program strives to promote, develop, and maintain a culturally competent behavioral health system.

MISSION STATEMENT
The mission of the behavioral health department at the Pit River Health Services is to design, implement, promote and coordinate a system of comprehensive behavioral health care by offering a range of culturally relevant services that promote healing, dignity, self-respect and hope to individuals, families, and the community.

PHILOSOPHY OF CARE
The behavioral health department at the Pit River Health Services is respectful of the rich body of cultural knowledge, which has been handed down from generation to generation within the various tribal groups the clinic serves. Using a wide range of services and treatment modalities, the behavioral health department strives to promote healing while honoring the customs and traditions of the Native American communities.

OBJECTIVES
The objectives of the behavioral health department are:

- To offer a wide range of clinical and community behavioral health services
- Provide services by a team of behavioral health providers who represent several disciplines
- Provide optimal continuum of care utilizing a broad spectrum of behavioral health techniques
- To promote broad social and health goals to enhance the healing of Native American individuals and groups
- To offer early intervention at the onset of mental, emotional, and behavioral disorders
- To assist rehabilitation and stabilization of advanced emotional disorders or pathology
- To improve and/or restore a client’s level of functioning
TREATMENT PROGRAM SERVICES

Medication Management
Medication management is available for children, adolescents and adults, with services being provided by a board-certified provider.

The use of psychotropic medications is often an integral part of treatment for individuals receiving care for behavioral health conditions. As such, the use of psychotropic medications must be monitored closely to help ensure that clients are treated safely and effectively.

The behavioral health department at the Pit River Health Services has developed guidelines and minimum requirements designed to:

1. Ensure the safety of clients taking psychotropic medications
2. Reduce or prevent the occurrence of adverse side effects
3. Help individuals restore and maintain optimal levels of functioning
4. Help individuals achieve positive clinical outcomes

Telemedicine
The behavioral health department at the Pit River Health Services may use teleconferencing, on an as needed basis, to extend the availability of clinical services. All clinical services provided through the interactive video teleconferencing will conform to established policies for confidentiality and maintenance of records.

Consultation/Intake Appointments
Consultations are available, per request, for various professionals and entities. Consultations are designed to evaluate an individual’s behavioral and psychological functioning, to establish a clinical diagnosis as relevant, and to create a list of treatment recommendations.

Mental Health Counseling
Individual, couples, family and group counseling is available and provided on an outpatient basis as needed. The scope, length and focus of the counseling will be determined by the treating clinician. Treatment modalities will be based on the clinician’s areas of expertise as well as the needs of the clients. Children 5 years old or younger will be referred to an appropriate outside provider that specializes in working with pediatric clients. Children 6 through 17 years of age will be provided therapy as appropriate.

Community Outreach
Community outreach is a service offered by the behavioral health department at the Pit River Health Center. It is thought that outreach services will assist in prevention, education, early intervention and treatment within the Native American community.

Outreach and Education activities focus on client driven areas. Topics are chosen from the top behavioral health services diagnostic categories and from national initiatives to ensure they are relevant to our community and address nationally acknowledged health issues.

Outreach and Education activities focus on client driven areas. Topics are chosen from the top behavioral health services diagnostic categories and from local and national data and initiatives to ensure they are relevant to our community and address nationally acknowledged health issues.

The mechanism by which outreach services are offered may include interagency agreements. In an effort to reach out to the Native American community, members of the behavioral health department will actively seek out children, adolescents and adults with various behavioral health issues or concerns as well as various agencies and entities in need.
The outreach services will aim to establish service relationships, determine the needs for service and implement relevant services which accommodate the needs of the community.

**Individual Educational Planning/Assistance**
A qualified behavioral health team member is available to assist and support Native American families as needed with the Individual Education Plan (IEP) process. A member of the behavioral health team may be available to attend IEP meetings as needed and as appropriate.

**Psychological Evaluations**
Formal psychological evaluations are available and may be conducted by a licensed clinical psychologist. The purpose and scope of the evaluations will depend upon the referral questions and will include a review of records, a diagnostic interview, a mental status evaluation, formal psychological testing, diagnostic clarification, and treatment recommendations. The psychological measures used may include neurological screening tools, tests of intelligence, achievement and processing, as well as tests that assess personality and behavior.

**Substance Abuse Counseling**
The behavioral health department at the Pit River Health Services offers substance abuse counseling by a Certified provider. Supervised interns may also be available to the Native and non-Native community. The services offered include crisis response and individual and group counseling. Culturally sensitive treatment modalities will be utilized.

**Assistance with Inpatient Rehabilitation Enrollment**
A certified substance abuse counselor will be available, as needed, to assist the Native community when inpatient rehabilitation services are deemed necessary. A counselor may assist the Native community with application completion and submission, treatment placement, transportation to and from the inpatient facility, and when appropriate, a counselor may be able to offer some financial assistance.

**Support for Court Matters**
A certified substance abuse counselor is available, as needed, to coordinate with legal representatives regarding court matters. The counselor is further available to provide counseling relevant to the court matter, and to attend court as a support person when appropriate.

**Cultural Presenters**
The behavioral health team will organize and host various educational and cultural presenters, as relevant, to meet the needs of the Native American community.
**PREVENTION SERVICES**

**Guest Speakers and Healers**
The behavioral health department will arrange for guest speakers and healers to provide presentations for the community two times a year. Additionally, a presentation on Fetal Alcohol Spectrum Disorder is given annually at a Healthy Luncheon, which is provided for the Native community.

**Community Involvement**
Our substance abuse counselors continually immerse themselves in the Native and non-Native communities in order to identify and be available to anyone at risk for substance abuse.

**Cultural and Spiritual Growth**
The behavioral health department will offer culturally appropriate traditional services as appropriate.

**Transportation**
Transportation services will be provided to Native clients as needed so that they may attend appointments which fall within policy guidelines.

**Tribal Involvement**
Behavioral health staff members will participate in planning meetings with Tribal Tanf for handling family and mental health crises as needed. They will also participate in any relevant meetings and activities through the Tribe.

**OUTREACH SERVICES**
The behavioral health department will work cooperatively with the Pit River Health Services outreach department and will provide consultation, counseling and support as needed and as relevant. The behavioral health department will also strive to attend a multitude of community presentations, events and activities in order to reach out to community members and agencies that may benefit from behavioral health services.
SERVICE STRUCTURE

Client Eligibility
For clients to be eligible to receive services through the behavioral health department, they must complete and submit an intake packet form available at the Pit River Health Services clinic and on the Pit River Health Services website. If they need assistance completing the intake packet, staff is available for that purpose. Once their intake packet has been reviewed by appropriate staff and a record has been created for that client, the client is then eligible to schedule an intake or consultation appointment with a behavioral health clinician, as long as that clinician is accepting new clients at that time.

Client’s Rights
Behavioral health clients will be provided with a copy of their rights.

They will be notified about their right:
1. To have reasonable access to safe and effective care within our mission, our scope of service, and in compliance with law and regulation
2. To be referred to other providers when additional, alternative or special services are needed, and to have this access to care regardless of race, creed, age, gender, national origin, handicap, economic status, or sexual orientation
3. To receive considerate care that respects personal values, beliefs, and preferences, including the expression of psychosocial, spiritual and cultural values which influence the perception of illness and the response to care
4. To have respect for personal dignity, privacy and safety during care, and safety and security within the health care facility, and to be free from abuse, neglect, or exploitation
5. To have effective communication with staff, and to understand or be assisted with written, spoken and other communication
6. To be assured of confidentiality of health information, with information accessed only by those providing care, providing reimbursement for care, and operational aspects of care, or as authorized by written release or by law, and to access and request amendments to our records of disclosures of the personal health record
7. To have reasonable access to the electronic health care record, as appropriate
8. To understand services available, fees and payment for those services, and eligibility policies, and to request an estimate of charges for routine care prior to receiving treatment
9. To participate in making informed care decisions involving all aspects, processes and ethical issues of care, including resolution of dilemmas and refusal of care
10. To receive information concerning outcomes of care, including diagnosis, treatments, benefits, drawbacks, prognosis, recuperation, unanticipated outcomes, alternative treatments and consequences of refusal or discontinuation of care
11. To give informed consent to treatments and to refuse to participate in treatment

Client’s responsibilities
Behavioral health clients will be provided with a copy of their responsibilities.

They will be notified about their responsibility:
1. To provide, to the best of their knowledge, accurate and complete information about present complaints, past illnesses, hospitalizations, medications, and other matters relating to health or care
2. To communicate their symptom severity and level of distress accurately to their provider
3. To convey whether they understand the proposed care and what is expected of them, and if not understood, to ask questions and make this known
4. To follow the instructions and plans of care developed with the behavioral health provider and to report changes in condition
5. To express any concerns about the plan of care that is created with their behavioral health provider and their ability to understand and to follow it, and make every effort to work with the provider to adapt the plan to specific needs and limitations
6. To understand the consequences of not complying with the plan of care
7. To be responsible for the resulting outcomes if they refuse treatment or fails to follow instructions or the treatment plan
8. To keep appointments, and if unable to do so, to inform the Center or the provider
9. To follow Health Center rules and procedures affecting patient care and conduct
10. To show respect and consideration for the rights of other patients and staff, and to assist in control of noise, smoking and distractions
11. To be respectful of property of others and of the personnel and property of the Center.
12. To promptly fulfill financial obligations to the Health Center
13. To present any significant complaints or concerns about their care to the person providing care, to any other Health Center employee involved in the care, or to the Health Center administration
14. To help the Center improve its service and environment by providing feedback about service needs, expectations, and perceptions of care

**Provider’s Rights**
Behavioral health clients will be provided with a copy of their provider’s rights. They will be notified that their provider has the right to terminate services under the following conditions:
1. When it is determined treatment is no longer beneficial
2. When it is determined that another professional might be able to better serve the client
3. When the client fails to cooperate with the proposed treatment
4. When the client has not paid for the last two visits, unless special arrangements have been made
5. When the client has failed to show up for the last two visits without a 24-hour notice
6. When the client has failed to schedule future appointments, and has failed to stay in regular contact with their provider or the Pit River Health Services support staff

**Termination of Services**
Should a provider choose to terminate services with a behavioral health client:
1. A letter will be sent to the client’s last known address on record at the Pit River Health Services informing the client of their provider’s decision
2. Referral information will be sent to the client, as relevant

Should some unexpected circumstance arise wherein a provider is no longer able to continue treatment, the behavioral health director will:
1. Contact the impacted clients to inform them
2. Provide appropriate referral information

**Provider Responsibilities**
Behavioral health clients will be provided with a list of their provider’s responsibilities.

They will be informed that their provider is responsible:
1. To remain committed to lifelong learning and to be responsible for maintaining clinical knowledge and skills necessary for the provision of quality care
2. To ensure that clients are completely and honestly informed before the client consents to treatment
3. To ensure the trust and confidence of patients by maintaining appropriate confidentiality and ensure that appropriate confidentiality safeguards are applied in the disclosure of client information
4. To understand the vulnerability and dependency of patients and to ensure certain relationships between clinicians and clients are avoided. In particular, no clinician should ever exploit clients for any advantage
5. To remain dedicated to continuous improvement in quality of care
6. To work collaboratively to maximize client care, while remaining respectful and while employing any necessary remediation and conflict management skills that may be warranted
Confidentiality
Behavioral health clients will be informed that the information they share with their treating clinician is confidential. They will be told that their clinician will not disclose information provided by the client without their written consent. Further, they will be informed that once a release of information has been signed, the clinician will reveal the minimum amount of information necessary in order to respond to the release request. Clients will be advised that clinicians rarely release chart notes and instead often write summary letters so as to protect the client from overexposure. The client will be advised that behavioral health electronic records are strictly protected in such a way to ensure the highest level of confidentiality.

Limits to Confidentiality
Behavioral health clients will be informed that under certain legally defined situations, a behavioral health provider has a duty to reveal information told to them during the course of treatment and that such information will be disclosed without written consent. Behavioral health clients will be notified that their provider is not required to inform them if such a disclosure has been made. The behavioral health clients will be informed that these legally defined situations include:

1. Revealing active child abuse or neglect
2. Revealing that an alleged perpetrator is in contact with minors wherein there is a reasonable suspicion that he or she may be acting in an abusive manner
3. Revealing active abuse of a dependent adult or an elder
4. Having serious and actual intent to harm another person
5. Having serious and actual intent to self harm
6. Participating in a court-ordered matter
7. Receiving a legitimate subpoena for treatment records

Clinic Safety
Behavioral health clients will be informed that the Pit River Health Services is compliant with all safety regulations. Further, they will be informed that disaster plans have been created and that such information is available upon request and as relevant.

Staff and Client Safety
Behavioral health clients will be informed that the Pit River Health Services will take all steps necessary to ensure the safety of staff and clients. The Center will not tolerate any violations of respect, personal space or safety, intentional or unintentional, and will take immediate action to intervene if such an incident occurs. Clients will be informed that, if such an incident occurs, the offending party may be removed from the premises by relevant Tribal security and/or law enforcement.

Record Keeping
Behavioral health clients will be informed that their records will be secure and maintained according to all applicable state and federal statutes, regulations and guidelines applicable to Federal Health Care programs, accreditation standards and all behavioral health department policies and procedures.

Payment and Insurance
Behavioral health clients will be informed that payment is expected at the time of service if paying cash. They will be informed that if they provide all the necessary information, the Pit River Health Services will bill their insurance company for them, as appropriate.

Length of Treatment
Behavioral health clients will be informed that their total length of treatment will be dependent upon a multitude of factors and that their provider will discuss their course of treatment with them.
Program Hours of Operation
Behavioral health clients will be informed that the behavioral health department will be open Monday through Friday, 8:00 a.m. to 12:00 p.m. and 1:00 p.m. to 5:00 p.m., and such hours will be posted in clear view at the service program.

Emergencies and Client Crisis
Behavioral health clients will be told that an emergency or crisis is an unexpected event that requires immediate attention, which can potentially be a threat to a person’s life or health. They will be told that if an emergency or crisis arises during business hours, they can call the Pit River Health Services at 530-3350340 and inform the office staff that they are in need of immediate help. Upon receiving such a phone call, the office staff will alert relevant behavioral health staff who will respond accordingly.

Per the system of care for Shasta County, if the client requires psychiatric hospitalization, the staff member will arrange for that client to be taken to a local emergency room or to the Shasta County Behavioral Health Department Crisis Assessment and Intervention Program (CAIP) for assessment. Should they present with a medical emergency, the staff member will assist in arranging for emergency services. They will also be informed that should an emergency arise outside of business hours, they must do one of the following:

1. Call 911
2. Call the 24-Hour Help Line at 800-273-8255
3. Go directly to the nearest emergency room
4. Go directly to the Shasta County Behavioral Health Department Crisis Assessment and Intervention Program (CAIP)

Referrals for Treatment, Case Assignment and Transfers
Should an outside agency or entity, a Pit River Health Services employee, or private citizen request or refer a client for treatment, that referral will be routed to the behavioral health director for consideration or directly to a clinician, if a specific clinician is requested. Upon receipt of the referral, the director or clinician will determine if the referral is appropriate, within the scope of practice available, and whether the appropriate clinician is accepting new clients. If criteria are met, the director will assign a clinician if one has not been specifically requested, the client will be contacted by the director or relevant staff member and an initial appointment will be scheduled. Should the clinician or client desire a transfer to another provider, such a transfer will be handled by the director, the clinician or relevant staff member as appropriate. However, if criteria are not met, the client will be contacted and appropriate referrals will be provided as relevant. If the staff member managing the referral decides the client is in need of emergency services that staff member will assist in arranging for emergency services. Such emergency services may involve, but may not be limited to psychological, medical or detoxification services.

Collaboration and Coordination of Behavioral Health Care and Medical Care
Behavioral health and medical staff members will meet weekly to discuss client care however, additional meetings will be arranged as needed and as relevant. Behavioral Health staff will attend daily huddle in clinic, as schedule permits.

Managing Agitated Clients
Should a behavioral health staff member encounter an agitated client, that staff member will utilize all relevant conflict resolution skills and symptom reduction strategies while interacting with the client. If the staff member determines that they are a risk of harm, they will conclude the session immediately, remove themselves from the situation and seek support through the clinic intercom system, including clinic codes on the phone system. The staff member will also reach out to Tribal security and law enforcement as relevant, and once the situation is safe for the staff member, they will assist in obtaining whatever emergency services the client may require.
Consent for Treatment
Consent for behavioral health services will be obtained, in writing, by all behavioral health clients.

Consent for Contact
Consent for contact by phone and mail will be obtained, in writing, by all behavioral health clients.

Consent for Third Party billing
Consent for third party billing will be obtained, in writing, by behavioral health clients, as relevant.
THE CLINICAL RECORD

In order to assure that the behavioral health clinical records are accurate and comprehensive, federal and state guidelines and standards regarding organization, content, maintenance and retention of records will be followed.

Maintaining current, accurate, and comprehensive behavioral health records is important for many reasons. The information included in the record assists behavioral health providers in successfully treating and supporting clients. Documentation in the behavioral health record facilitates appropriate diagnosis and treatment as well as coordination of care. Documentation supports billing reimbursement, and provides evidence of compliance during periodic record reviews.

The behavioral health clinical record is maintained electronically and access is limited to authorized behavioral health professionals in order to assure the confidentiality of the behavioral health client.

1. Identifying information
   a. Name
   b. Date of birth
   c. Gender
   d. Ethnicity
   e. Guardian information
   f. Contact information
   g. Employer
   h. Insurance
   i. Payment information

2. A signed therapeutic agreement, which details:
   a. Client’s rights
   b. Client’s responsibilities
   c. Provider’s rights
   d. Provider’s responsibilities
   e. Record keeping
   f. Confidentiality
   g. Limits to confidentiality
   h. Clinic safety
   i. Staff and client safety
   j. Payment expectations
   k. Parameters for length of treatment
   l. Office hours
   m. What to do in the event of an emergency or crisis
   n. Consent for treatment
   o. Consent for contact
   p. Consent for third party billing

3. A summary of the initial assessment, which includes:
   a. Reason for referral
   b. Presenting complaints and symptoms
   c. Biopsychosocial assessment
   d. Mental status examination
   e. Provisional diagnosis
   f. Treatment recommendations

4. A progress note for each therapeutic encounter, which includes:
   a. Date
   b. Type of session
c. Summary of existing and new issues
d. Progress toward treatment goals
e. Assessment
f. Treatment plan/recommendations
g. A signature by the treating clinician

5. In the event that services are not provided due a client cancelling the appointment or failing to show, or due to the clinician cancelling, the provider will document this in a progress note.

6. A note for each correspondence, including:
   a. Summary of phone calls received and/or made
   b. Summary of verbal material exchanged, as relevant
   c. Copy of written material sent or exchanged

7. A treatment plan, to be reviewed every 2 months or as relevant, which includes:
   a. Statement of the problem
   b. Diagnosis
   c. Goals for treatment (Realistic and measureable)
   d. Objectives
   e. Action steps
   f. Target dates for accomplishment of objectives
   g. Treatment recommendations
   h. Aftercare plans
   i. Clinician signature
   j. Indication that client participated in treatment planning.

8. Results of psychological testing, as relevant, which includes:
   a. Test protocols
   b. Test results
   c. Test reports

9. Description of known or prescribed medications, as relevant including:
   a. Names of medications
   b. Dosages
   c. Frequency of administrations
   d. Efficacy
   e. Treatment plan
   f. Allergies and sensitivities
   g. Names of prescribing physician

10. Copy of relevant records, including:
    a. Medical
    b. Behavioral health
    c. Academic
    d. Legal

11. Releases of information, as relevant

12. A Discharge summary will be created at the conclusion of treatment and will include:
    a. Summary of initial assessment
    b. Course and types of treatment
c. Relapse prevention utilized  
d. Final assessment of the client’s condition and progress  
e. Recommendations for follow-up as relevant  
f. Referrals for follow-up as relevant  
g. Aftercare plans as relevant  

13. Termination documentation, as relevant, including one of the following:  
   a. Chart note reflecting termination of services  
   b. Written correspondence to the client discussing termination  
   c. Summary of direct communication with client wherein termination was discussed
CODE OF CONDUCT
The behavioral health department will maintain high ethical standards and will remain committed to complying with all applicable statutes, regulations and guidelines. The behavioral health department and each of its employees and contractors will follow this code of conduct.

The purpose of the code of conduct is to ensure that all behavioral health department staff members and contractors are committed to conducting their activities ethically and in compliance with all applicable state and federal statutes, regulations and guidelines, and with all behavioral health department policies and procedures. This code of conduct also services to demonstrate behavioral health department’s dedication to providing quality care to its patients and to submitting accurate claims for reimbursement to all payers.

The code of conduct is intended to provide behavioral health department employees and contractors with general guidelines to enable them to conduct the business of the behavioral health department in an ethical and legal manner. Every behavioral health department employee and contractor is expected to uphold the code of conduct. Failure to comply with the code of conduct, or failure to report reasonable suspected issues of non-compliance, may subject the behavioral health department employee or contractor to disciplinary action, up to or including termination of employment or contracted status. In addition, such conduct may place the individual or behavioral health department, at substantial risk in terms of its relationship with various payers. In extreme cases, there is also the risk of action by a governmental entity up to and including an investigation and criminal prosecution.

The code of conduct is as follows:

All behavioral health department employees and contractors:
1. Shall perform their duties in good faith and to the best of their ability
2. Shall comply with all statutes, regulations, and guidelines applicable, and with the behavioral health department’s own policies and procedures
3. Shall refrain from any illegal conduct. When an employee or contractor is uncertain of the meaning or application of a statute, regulation, or policy, or the legality of a certain practice or activity, he or she shall seek guidance from his or her immediate supervisor or the designated administrator through the Pit River Health Services
4. Shall not obtain any improper personal benefit by virtue of their employment or contractual relationship with behavioral health department
5. Shall notify the immediate supervisor or appropriate administrator through the Pit River Health Services immediately upon the receipt (at work or at home) of any inquiry, subpoena, or other agency or government request for information regarding the behavioral health department
6. Shall not destroy or alter behavioral health department information or documents in anticipation of, or in response to, a request for documents by any applicable government agency or from a court of competent jurisdiction
7. Shall not engage in any practice intended to unlawfully obtain favorable treatment or business from any entity, physician, patient, resident, vendor, or any other person or entity in a position to provide such treatment or business
8. Shall not accept any gift of more than nominal value or any hospitality or entertainment, which because of its source or value, might influence the employee's or contractor's independent judgment in transactions involving the behavioral health department
9. Shall disclose the immediate supervisor or appropriate administrator through the Pit River Health Services any financial interest, official position, ownership interest, or any other relationship that they (or a member of their immediate family) has with the behavioral health department’s vendors or contractors
10. Shall not participate in any false billing of patients, government entities, or any other party
11. Shall not participate in preparation of any false cost report or other type of report submitted to the government
12. Shall not pay or arrange for the behavioral health department to pay any person or entity for the referral of patients to the behavioral health department, and shall not accept any payment or arrange for
the behavioral health department to accept any payment for referrals from the behavioral health department
13. Shall not use confidential behavioral health department information for their own personal benefit or for the benefit of any other person or entity, while employed at or under contract to the behavioral health department, or at any time thereafter
14. Shall not disclose confidential medical information pertaining to the behavioral health department’s clients without the express written consent of the patient or pursuant to court order and in accordance with the applicable law and behavioral health department applicable policies and procedures
15. Shall promptly report to the immediate supervisor or appropriate administrator through the Pit River Health Services any and all violations or reasonably suspected violations of the code of conduct by other employees or contractors
16. Shall promptly report to the immediate supervisor or appropriate administrator through the Pit River Health Services any and all violations or reasonably suspected violations of any statute, regulation, or guideline applicable or violations of the behavioral health department’s own policies and procedures by other employees or contractors
17. Shall have the right to confidentially make disclosures without fear of retaliation with respect to disclosures
18. Shall not engage in or tolerate retaliation against employees or contractors who report suspected wrongdoing
QUALITY ASSURANCE

Quality Records Review
On a quarterly basis, the behavioral health staff will meet in order to review open and closed electronic health care records for clients served within the past year. Each provider will have 2 active charts reviewed by departmental staff.

The purpose of the review is to monitor the quality, appropriateness, and utilization of services provided. Items reviewed will include:

1. Whether the person served was provided with a complete orientation and whether they were actively involved in making informed choices regarding the services they received
2. Whether the assessments of the person served were thorough, complete and timely
3. Whether the goals and service/treatment objectives of the persons served are based on the results of the assessments and the input of the persons served
4. Whether the services are related to the goals and objectives
5. When applicable, whether the transition plan and/or discharge summary have been completed
6. Whether services are documented in accordance with the program policy
7. Whether the individual plan is reviewed and updated in accordance with the departmental policy

Client Satisfaction Surveys
The behavioral health department will conduct twice yearly client satisfaction surveys. The survey period will last one month. The surveys will be handed out to clients by all relevant staff. Completed surveys will be submitted to the behavioral health director for review. The director will discuss results with behavioral health staff in order to improve overall services.
PROGRAM MANAGEMENT

Program Manager
The behavioral health program will be managed by a director. The behavioral health director will be managed by the clinic director for the Pit River Health Services.

Program Staff
The program will strive to include licensed providers including; psychologists, social workers, and substance abuse counselors.

Job Descriptions
Job descriptions for the behavioral health employees will be readily available.

Staff Meetings
Staff meetings will occur on a consistent basis. They will include, but will not be limited to:
   1. Behavioral health staff meetings
   2. Provider meetings
   3. Coordination of care meetings
   4. Peer review meetings
   5. Treatment planning conferences
   6. Interagency meetings

Behavioral Health Staff Meetings
Behavioral health staff meetings will occur on a monthly basis.

Provider Meetings
Provider meetings will occur twice monthly.

Coordination of Care Meetings
Coordination of care meetings will occur with clinic staff on a weekly basis.

Peer Review Meetings
Peer review meetings will occur quarterly.

Treatment Planning Conferences
Treatment planning conferences will occur on a monthly basis.

Interagency Meetings
Meetings with outside agencies will occur when scheduled.

Case Presentations
Behavioral health case presentations will be done, at regular intervals, during staff meetings

Consultation
Consultation will be available for behavioral health staff as needed.

Supervision
Supervision will be available for behavioral health staff as required and/or needed.
Professional Fees
Professional fees will be provided for behavioral health staff as dictated by board-approved annual budgets.

Inclement Weather
All behavioral health staff members will be expected to come to work, on time, during inclement weather. Should the clinic director choose to delay the beginning of business hours, or to close the clinic for the day, the clinic director will inform the behavioral health director, who will then inform all behavioral health staff. If staff members have not heard from the behavioral health director, they will arrive for work on time.

Time-Off Requests
All behavioral health staff members will request time off using the approved Time and Labor procedure. If the time off request is approved, the behavioral health staff member will then fill out a schedule change form and submit to the behavioral health director.

Sudden Absences
All behavioral health staff will report any sudden absences to the behavioral health director and to the appropriate front office staff at the earliest possible moment to ensure maximum time availability for the rescheduling of clients.

Legislative History:

    Originally approved by the PRHS Board of Directors February 22, 2018

    Amended by the PRHS Board of Directors April 25, 2018