

## CBHS Policies and Procedures



City and County of San Francisco  
Department of Public Health  
San Francisco Health Network  
BEHAVIORAL HEALTH SERVICES

1380 Howard Street, 5th Floor  
San Francisco, CA 94103  
415.255-3400  
FAX 415.255-3567

### POLICY/PROCEDURE REGARDING: **Community Behavioral Health Services (CBHS) Policies/Procedures**

Issued By: Jo Robinson, MFT  
Director of Community Behavioral Health Services

Date: January 13, 2015

Manual Number: 1.04-02

References:

**(Substantive Revision. Replaces 1.04-02 of March 31, 2010)**

#### **I. PURPOSE**

This policy provides guidelines for CBHS staff on how to develop and/or revise policies/procedures; ensure policies/procedures have the standard format; and inform staff of how policies/procedures are communicated and distributed.

#### **II. SCOPE**

This policy applies to CBHS staff who develop and/or revise policies/procedures.

#### **III. POLICY**

##### **A. DEVELOPING NEW CBHS POLICIES/PROCEDURES:**

###### **1. What is considered a CBHS Policy/Procedure?**

Any policy/procedure affecting CBHS programs (Civil Service and/or Contract) for at least the next year and a maximum of five years is to be included in the CBHS Policy and Procedure Manual. A policy/procedure can cover any aspect of CBHS's system of care.

###### **2. Who Develops and Approves New Policies/Procedures?**

A new policy/procedure may be recommended and/or drafted at any level of the system of care. CBHS staff proposes new policies/procedures to a CBHS administrative director for discussion. The administrative director or designee will be responsible for drafting the new policy/procedure. CBHS unit directors are generally responsible for any policy/procedure affecting their units. The Community Behavioral Health Services Director is ultimately responsible for all CBHS policies/procedures. Once drafted, the unit director brings the new policy/procedure draft to the Executive Committee for discussion. The Executive Committee must approve the new policy/procedure by vote. Final approval must be given by the Community Behavioral Health Services Director (or designee) and her/his signature must appear on the policy/procedure for it to be official.

## BHS Policies and Procedures



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### POLICY/PROCEDURE REGARDING: **Behavioral Health Services (BHS) Policies/Procedures**

Issued By: Jo Robinson, MFT  
Director of Behavioral Health Services

A handwritten signature in blue ink, appearing to read "Jo Robinson", written over a horizontal line.

Manual Number: 1.04-02

Date: January 13, 2015

References:

**(Substantive Revision. Replaces 1.04-02 of March 31, 2010)**

#### I. PURPOSE

This policy provides guidelines for BHS staff on how to develop and/or revise policies/procedures; ensure policies/procedures have the standard format; and inform staff of how policies/procedures are communicated and distributed.

#### II. SCOPE

This policy applies to BHS staff who develop and/or revise policies/procedures.

#### III. POLICY

##### A. DEVELOPING NEW BHS POLICIES/PROCEDURES:

###### 1. What is considered a BHS Policy/Procedure?

Any policy/procedure affecting BHS programs (Civil Service and/or Contract) for at least the next year and a maximum of five years is to be included in the BHS Policy and Procedure Manual. A policy/procedure can cover any aspect of BHS's system of care.

###### 2. Who Develops and Approves New Policies/Procedures?

A new policy/procedure may be recommended and/or drafted at any level of the system of care. BHS staff proposes new policies/procedures to a BHS administrative director for discussion. The administrative director or designee will be responsible for drafting the new policy/procedure. BHS unit directors are generally responsible for any policy/procedure affecting their units. The Behavioral Health Services Director is ultimately responsible for all BHS policies/procedures. Once drafted, the unit director brings the new policy/procedure draft to the Executive Committee for discussion. The Executive Committee must approve the new policy/procedure by vote. Final approval must be given by the Behavioral Health Services Director (or designee) and her/his signature must appear on the policy/procedure for it to be official.

### 3. Format

a. After the policy/procedure has been approved by the Executive Committee but before it is signed by the Behavioral Health Services Director, it must be sent electronically in its final form to DPH Compliance Office for review, assignment of manual number, assurance that standard format is used, preparation for intra- and internet posting, and entering the policy/procedure title and date in the "Table of Contents" for the manual and on the BHS policy index page for the DPH web site.

b. The format of the standard policy/procedure is attached below. The reference item in the header box is used when a policy/procedure is written to implement policies or procedures developed at a higher level (e.g., Department of Public Health, Mayor's Office, Department of Health Care Services, the Federal Government) or references other BHS policies/procedures.

c. Posting of policies/procedures on the intra- and internet will be in accordance with DPHNet standards and guidelines, and the format for posting will vary accordingly, although the policy content as approved will not be altered.

### B. REVISING EXISTING POLICIES/PROCEDURES:

1. Policies/procedures are required to be reviewed, revised, and/or sunsetted during its five year life. DPH Compliance Office is primarily responsible for keeping track of when the policies/procedures need to be reviewed. A policy/procedure may be revised before it expires. The contact person/author for the policy/procedure, usually a BHS administrative director, is responsible for its content and for its revision. DPH Compliance Office staff will send the policy/procedure to the contact person/author. The contact person/author (or a designee) will have no more than one (1) month to respond. Any policy/procedure not re-approved after five years will sunset. Sunset means a policy/procedure will be removed from distribution.

2. There are three types of revisions: (a.) substantive revisions, (b.) technical revisions, or (c.) sunset. The type of revision being made, and the number and date of the memo being revised and replaced is indicated in the first line of the memo (see attached format).

a. **Substantive revision** - involves substantial changes in a policy/procedure. This type of revision must be submitted to the Executive Committee for discussion. If the Executive Committee suggests changes, the policy/procedure goes back to the contact person/author for these changes. The contact person/author then sends it to the DPH Compliance Office for approval of format. DPH Compliance Office staff will forward the revised policy/procedure to the Behavioral Health Services Director for approval and signature and will arrange for distribution.

b. **Technical revision** - involves changes in names, phone numbers, or wording that clarifies but does not change procedures. This type of revision is submitted to the DPH Compliance Office by e-mail for approval of format. DPH Compliance Office will forward the revised policy/procedure to the Behavioral Health Services Director for approval and signature and will arrange for the distribution.

c. **Sunset** - the contact person/author for the policy/procedure is responsible for **sunsetting** it. A policy/procedure may be sunsetted before it expires. If the policy/procedure is to be sunsetted, the contact person/author notifies the DPH Compliance Office staff who makes arrangements for having it removed.

#### C. COMMUNICATION AND DISTRIBUTION OF NEW OR REVISED POLICIES/PROCEDURES:

1. When a new or revised policy/procedure has been signed by the Behavioral Health Services Director, the DPH Compliance Office will inform the key administrative assistants of Adult and Older Adult Services and Child, Youth, and Family Services to alert Administrative Manual Holders/programs regarding the new and revised policy/procedure via email.
2. The new or revised policy/procedure is announced and distributed at the monthly Adult and Older Adult Systems of Care Provider's meeting and Child, Youth, and Family Systems of Care Provider's meeting.

In addition, the contact person/author will educate providers of any new policy/procedure or policy/procedure that involves substantive revision at these meetings.

3. The new or revised policy/procedure is posted electronically on the BHS website.
  - BHS website is:

<https://www.sfdph.org/dph/comupg/oservices/mentalHlth/CBHS/CBHSmnuPolyProc.asp>

It is recommended that all BHS programs (Civil Service and/or Contract) and Administrative Manual Holders bookmark the BHS website in order to access a complete catalog of all current policies/procedures.

If a program chooses to maintain the BHS Policy and Procedure Manual in paper form, the Administrative Manual Holders will be responsible for maintaining the most current copy of all policies/procedures as well as regularly printing the "Table of Contents" from the BHS website for the Manual as a reference.

4. The DPH Compliance Office keeps the original signed version. Programs who want to obtain a hard copy of the policy/procedure can contact the DPH Compliance Office at (415) 255-3400.

**Contact Person:** DPH Compliance Office, 415-255-3400

**Attachment(s):**

Attachment 1: Standard Format

**Distribution:**

BHS Policies and Procedures are distributed by the Health Information Management Department under the DPH Compliance Office

Administrative Manual Holders

BHS Programs


SOC Program Managers

BOCC Program Managers

CDTA Program Managers

**Attachment 1: Standard Format**

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**(New Policy; Technical/Substantive Revision. Replaces (manual number) of (date).)**

**Purpose:**

**Scope:**

**Policy:**

Content of the Policy

**Contact Person:**

**Attachment(s):**

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