

CHAPTER Administrative	CHAPTER 01	SECTION 001	SUBJECT 05
SECTION Governance/Leadership		DESCRIPTION Policy Manual	
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APPLICATION:

<input checked="" type="checkbox"/> CMH Staff	<input checked="" type="checkbox"/> Board Members	<input checked="" type="checkbox"/> Provider Network	<input checked="" type="checkbox"/> Employment Services Providers
<input checked="" type="checkbox"/> Employment Services Provider Agencies	<input checked="" type="checkbox"/> Independent Contractors	<input checked="" type="checkbox"/> Students	<input checked="" type="checkbox"/> Interns
<input checked="" type="checkbox"/> Volunteers	<input checked="" type="checkbox"/> Persons Served		

POLICY:

Lapeer County Community Mental Health (LCCMH) maintains an organized policy manual easily accessible to persons served, stakeholders, board members and staff.

STANDARDS:

- A. The policy format is consistent with the format used by the Region 10 Pre-Paid Inpatient Health Plan (PIHP).
- B. LCCMH policies are in electronic format and stored in the staff *Shared Folder* under “policy manual” and posted on the LCCMH website at www.lapeercmh.org.
- C. All policies are assigned a chapter, section, and subject number. The description is the title of the policy. The issue date and all revision dates are listed in the upper right corner. The name of the original author, the name of the person revising the policy, and the name of the person who approved the policy are listed.

PROCEDURES:

- A. The Chief Executive Officer (CEO) or their designee(s) develops new policies and revises current policies as needed.

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- B. All staff are encouraged to provide input related to any aspect of their job or to the agency operations in general. Staff members have the option to provide input to their supervisor prior to submitting directly to the Quality Improvement Supervisor.
- C. New policies are submitted to the Quality Improvement Supervisor for an assigned permanent number. New policies are discussed and reviewed by appropriate Management Team members, when applicable.
- D. LCCMH policies are cross-referenced to the Region 10 PIHP policies, the PIHP Services Contract, Michigan Department of Health and Human Services (MDHHS) Certified Community Behavioral Health Clinic (CCBHC) Handbook, LCCMH's accrediting body, the Commission on Accreditation of Rehabilitation Facilities (CARF), and any other applicable requirements.
- E. The Board's Standards Committee reviews and recommends all new and revised policies on an ongoing basis.
- F. If needed, the CEO can approve a new policy or policy revision, but the policy requires a full review by the LCCMH Standards Committee at the next available meeting.
- G. The Standards Committee Meeting minutes with approved policy changes are sent to the Full Board to confirm the actions taken by the Standards Committee.
- H. At the Board's annual organizational meeting, the LCCMH Policy and Procedure Manual is approved.
- I. The Quality Improvement Supervisor emails a notice of new or revised policies to all agency staff.
- J. The Quality Improvement Department is responsible for maintaining the electronic Policy and Procedure Manual, tracking the review process, and getting approval for new or revised policies.

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This policy supersedes
#05/03025 dated 05/22/2003.
