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| Document Control Number: 3948 | |
| Effective Date: 12/14/2020 | Status: Published |
| Revision No.: 2 | Approved Date: 12/14/2020 |
| Division: COMPLIANCE | Next Review Date: 12/14/2021 |
| <input type="checkbox"/> Policy | <input checked="" type="checkbox"/> Procedure |

EHN Operational Plan

POLICY STATEMENT:

Emergence Health Network (EHN) operational plan aligns with the Quality Plan and CQI policy, Document No. 2490, to ensure that the operations are guided by robust process improvements. The operational plan is intended to facilitate the engagement of the agency's vision with the quality of behavioral and collaborative healthcare services being provided to patients and their families. The operational plan promotes the mission, goals, and objectives of the agency. The operational plan is based on the agency's framework and the structure of its processes that are essential to ensure that healthcare quality standards are addressed, and continuous process improvements are implemented.

The operational plan is implemented in compliance to Title 25, Part 1, Chapter 448, Subchapter E, Rule 448.502. Health Services, Facility Requirements: Operational Plan, Policies and Procedure and in direct alignment with EHN's mission, vision, and objectives/values, as outlined in *The EHN Mission, Vision, and Values Statement, Document No. 3009*:

EHN Mission

- Emergence Health Network ensures superior recovery-based services for mental health, Intellectual developmental disability, and related conditions for the people of El Paso County.

EHN Vision

- EHN will lead behavioral and developmental services in the El Paso region ensuring access to quality services, advocating for a better quality of life, and providing strength, hope and recovery for persons with mental illness and developmental disabilities.

EHN Values

- Engage our customers by communicating the benefits of services and recovery
 - Celebrate our customers strengths when participating in services
 - Foster hope in every service delivered
 - Demonstrate evidence of our customers successes toward recovery
 - Recognize our customers and staff for all achievements made

PURPOSE:

The purpose of this plan is to provide guidance for an implementation strategy to achieve the vision, conquer the mission, and sustain high quality values well-embedded within the organization.

BACKGROUND:

EHN has developed a plan which describes the Operations priorities, expectations and intentions for the next year in alignment to the Strategic Plan. This plan is inclusive of EHN's external providers who play a vital role as local providers of behavioral and collaborative healthcare services.

Over the past few years, EHN have made tremendous progress in process improvement that have shaped new and robust operations, allowing the agency to provide excellence service to the populations of the El Paso County catchment area, in Texas. *EHN will be serving adolescent male and female, ages 12 to 17 and adult male and females, ages 18 and older.* The sub-populations served by EHN are the individuals with Substance Abuse Disorders (SUDs), Mental Health/ Mental Illnesses (MH/MI), and/or Individuals with Intellectual and Developmental Disabilities (IID/IDD). Whilst recognizing positive change in the services EHN render, there is still more to be done to deliver innovative and outstanding healthcare as a provision of EHN's expanded vision.

SCOPE:

This operation plan is applicable center-wide, across all clinical operations to all EHN employees (Associates and Staff) and is implemented in partnerships with providers and other associates contracted to provide services for EHN.

ACRONYMS & DEFINITIONS:

- A. Executive Management Team**– consists of the leaders in the organization, such as Chief Executive Officer (CEO), Associate Chief Executive Officer, Chief Compliance Officer (CCO), Chief Clinical Officer (CCO), Chief Nursing Officer (CNO), Chief Medical Officer (CMO), Chief of Staff, Chief Information Officer (CIO), and Legal Counsel. The team meets weekly to review and implement operational and clinical issues/ concerns for the agency.
- B. Board Committees include:** Executive Committee, Finance Committee, Planning & Development (P&D) Committee, Human Resources Committee, Public Relations Committee, and Planning Network Advisory Committee (PNAC).
- C. Collaborative Care** – an evidence-based and systemic approach to treatment that includes primary care providers, care managers, and psychiatric consultants who work together to provide care and monitor patients' progress.

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- D. An operational plan (also known as a work plan)** is an outline of what your department will focus on for the near future—usually the upcoming year.
- E. Behavioral Health** – A key part of a person’s overall health. It is just as important as physical health. It includes your emotional, psychological, and social well-being. In this document, “behavioral health” include mental health and substance use disorders/ conditions. The goal of behavioral health is recovery and the focus is on the individual.
- F. Intellectual and developmental disabilities (IDDs)** are disorders that are usually present at birth and that negatively affect the trajectory of the individual’s physical, intellectual, and/or emotional development. Many of these conditions affect multiple body parts or systems (NIH, 2020).
- G. NAMI – National Alliance on Mental Illness** - is the nation's largest grassroots mental health organization dedicated to building better lives for the millions of Americans affected by mental illness (NAMI,2020).

PROCEDURE:

The Emergence Health Network operational plan include goals and objectives based on strategic initiatives to provide the El Paso community with more options in meeting mental health/ mental illness, substance use disorders, and intellectual developmental disabilities needs.

EHN provide services in several areas, including collaborative care by integrating primary care, behavioral health, and addiction services in one setting. Treatment programs, such as Partial Hospitalization and Intensive Outpatient, for adults dealing with depression, anxiety, and other problems that may impact work, family or daily functioning can be used as an alternative to and/or a step-down service from inpatient residential treatment or to stabilize a deteriorating condition and avert hospitalization.

The Operations priorities, are extracted from the agency’s strategic plan and drives the operational plan:

- **Strategic Objective #2: Family -Centered, Holistic Care:** To ensure that all of Emergence Health Network's clinical programs treat the whole person’s needs - including mental health, substance use disorder, intellectual and developmental disability, primary care, and social environment conditions
- **Strategic Initiative #2A: Certified Community Behavioral Health Clinic:** To fully implement all the requirements for Certified Community Behavioral Health Clinics

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(CCBHC) under the Excellence Act to ensure that the provision of comprehensive, coordinated, evidence-based care for individuals in our community.

- **Strategic Initiative #2B: Care Coordination and Transition:** To initiate and strengthen the care coordination and care transition efforts for consumers to ensure continuity of health care and continued recovery.
- **Strategic Initiative #2C: Primary Care:** To ensure that all EHN consumers have access to primary care services
- **Strategic Initiative #4A: Addressing Service Gaps in Our Community:** To continue to expand services independently or with community partners to address regions, populations, and communities that are underserved
- **Strategic Initiative #4B: Service Expansion and Growth:** To explore opportunities for expanding the size and diversity of services and revenues at EHN through expanded services, partnership, and/or geographic expansion.

The process to address the priorities of the operational plan is outline below and reviewed annually.

1. The Executive Management Team develop the agency's strategic plan and present to the Board of Trustees, every three (3) years.
2. The Operations team determine the goals and objectives for the Operational plan based on the strategic initiatives, annually:
 - a. The goals and objectives of the operational plan are department- focused.
 - b. Every department should have a leader or team of leaders responsible for creating their operational plan, which may include several units within a department.
3. Based on the goals and objectives established, a plan of action to implement will be developed.

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Table 1: Proposed Operational Plan

| Divisions | Strategic Priorities | Goals and Objectives | Programs/ Services Provided | Description of the Services | Plan implemented to Meet Goals & Objectives |
|--------------------|--|--|---|--|---|
| Collaborative Care | Strategic Initiative #2C: Primary Care: To ensure that all EHN consumers have access to primary care services | To provide outstanding care to our patients via integrated model in collaborative care | Integrated Care | Primary Care clinicians screen all patients for depression, mood disorders and substance abuse and initiate the engagement process with a behavioral health consultant to help co-manage the patient's care that have screened positive for behavioral health needs. Behavioral Health clinicians collaborate with primary care to aid in coordinating behavioral health treatment. The multidisciplinary team uses the patient-centered care model to assist in developing treatment goals and behavior changes for conditions such as chronic medical illnesses, stress related physical symptoms and life stressors | Integrated Care within the Collaborative Care Division is essential to treating the whole person. The goal for collaborative Care is to increase the Integrated Care Program to additional outpatient clinics in the community. |
| Collaborative Care | Strategic Initiative #2B: Care Coordination and Transition: To initiate and strengthen the care coordination and care transition efforts for consumers to ensure continuity of health care and continued recovery. | To help guide our patients onto the road of recovery. | Medication Assisted Therapy (MAT). | Medication Assisted Therapy (MAT) is available for individuals seeking addiction treatment. The MAT Program combines medication, counseling and behavioral strategies to help treat substance use disorders. Population: SUD, Co-occurring | -A dashboard was created to track patient meds, treatment, progress in the program--Measure based on hospitalization, medication compliance |
| Collaborative Care | Strategic Objective #2: Family - Centered, Holistic Care: To ensure that all of Emergence Health Network's clinical programs treat the whole person's needs - including mental health, substance use disorder, intellectual and developmental disability, primary care, and social environment conditions | The Partial Hospitalization and Intensive Outpatient Program is dedicated to serving a structured and intensive services to the community of El Paso. The goal is to continue to educate the community about the alternative approach to hospitalization and to continue to provide a safe | Alternative Treatment Programs (Partial Hospitalization and Intensive Outpatient) | The Partial Hospitalization Program is structured and is intended to provide intensive psychiatric care through active treatment by applying clinically recognized practices. Treatment is at a level more intense than outpatient day treatment or psychosocial rehabilitation and closely resembles highly structured, short-term hospital inpatient program. | Educate the community – Collaborative Care works with a community liaison to meet with community providers and agencies to communicate the benefits of the program. |

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| | | environment and well-being of all patients. | | | |
| Collaborative Care | Strategic Initiative #2B: Care Coordination and Transition: To initiate and strengthen the care coordination and care transition efforts for consumers to ensure continuity of health care and continued recovery. | To help guide our patients onto the road of recovery via various alternatives for treatment. | Alternative Treatment Program- Partial Hospitalization Program (PHP) | The Partial Hospitalization Program is structured and is intended to provide intensive psychiatric care through active treatment by applying clinically recognized practices. Treatment is at a level more intense than outpatient day treatment or psychosocial rehabilitation and closely resembles highly structured, short-term hospital inpatient program. | The PHP completes evidence-based assessments on each patient and incorporates this within the patients PCR. PHP collaborates with the treatment team on a weekly basis to review patient progress |
| Collaborative Care | Strategic Initiative #2B: Care Coordination and Transition: To initiate and strengthen the care coordination and care transition efforts for consumers to ensure continuity of health care and continued recovery. | To help guide our patients onto the road of recovery via various alternatives for treatment. | Alternative Treatment Program - Intensive Outpatient Program (IOP) | The Intensive Outpatient Program is structured to provide a short term, less intensive level of care for clients that do not require daily monitoring. There is an intensive focus on relapse prevention and management that allows individuals to be as autonomous as possible, while still struggling with daily life skills. | The IOP Program completes evidence-based assessments on each patient and incorporates this within the patients PCR. IOP collaborates with the treatment team on a weekly basis to review patient progress |
| Diversion Division | Strategic Objective #2: Family - Centered, Holistic Care: To ensure that all of Emergence Health Network's clinical programs treat the whole person's needs - including mental health, substance use disorder, intellectual and developmental disability, primary care, and social environment conditions | Provide Battering Intervention and Prevention services to adult male batterers/ family violence offenders. | Battering Intervention and Prevention Program (BIPP) | BIPP / Family Violence is a program that is certified as a Texas Department of Criminal Justice Battering Intervention and Prevention Provider and is one of only three programs in El Paso accredited by the Texas Department of Criminal Justice – Community Justice Assistance Division. | This program focuses on guiding an individual who is abusive to learn how to manage their anger and violent behavior, and physical abuse. In the program, they will learn how to interact without the use of violence and learn to identify and cope with situations and behaviors that trigger abuse |
| Diversion Division | Strategic Initiative #4A: Addressing Service Gaps in Our Community: To continue to expand services independently or with community partners to address regions, populations, and communities that are underserved | To help guide our patients onto the road of recovery via various alternatives for treatment. | The Parenting Education Program | The Parenting Education Program is available for parents who have children of any age. A multicomponent parenting education curriculum is used to help parents learn effective ways to relate to their children from birth through adolescence. | Conduct parenting classes satisfy court mandated parenting training |

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| <p>Diversion Division</p> | <p>Strategic Initiative #4A: Addressing Service Gaps in Our Community: To continue to expand services independently or with community partners to address regions, populations, and communities that are underserved</p> | <p>To help guide our patients onto the road of recovery via various alternatives for treatment.</p> | <p>Anger Management program,</p> | <p>In the Anger Management program, all facilitators are certified in Anger Management Counseling. A certificate of completion is provided upon successful completion of the program. The Anger Management program meets the requirements of court-ordered management groups</p> | <p>Assess and link individuals to necessary programs based on a comprehensive assessment.</p> |
| <p>Diversion Division</p> | <p>Strategic Initiative #4B: Service Expansion and Growth: To explore opportunities for expanding the size and diversity of services and revenues at EHN through expanded services, partnership, and/or geographic expansion.</p> | <p>To implement case management services that address essential services for severely mentally ill people in the community and defendant under supervision</p> | <p>United States Probation Office (USPO)</p> | <p>USPO program meets the requirements of court-ordered management groups for substance use, mental illness and Co-occurring illnesses Case Management services, UA services</p> | <p>Administer monthly treatment plans that include: Short- & long-term measurable goals and objective the defendant</p> |
| <p>Diversion Division</p> | <p>Strategic Initiative #4B: Service Expansion and Growth: To explore opportunities for expanding the size and diversity of services and revenues at EHN through expanded services, partnership, and/or geographic expansion.</p> | <p>To provide guidance for mental health services for clients being release from prison, other incarcerated environments who have a severe and persistent mental illness to provide services to those individuals under parole supervision who have been placed in a halfway house (HWH). Reduce the number of individuals with mental health issues engaged with law enforcement on low level misdemeanor charges Reduce the number of individuals with mental health issues in jail on low level misdemeanor charges</p> | <p>TCOOMMI (Probation/Parole Clients), Jail Diversion, OCR (Outpatient Competency Restoration), ACT (Assertive Community Treatment), 16.22 (Assessment in Jail), Jail Clinic, Court Services (Forensic/State Hospital/State discharge/community referrals)</p> | <p>Diversion programs embedded in the criminal justice system designed to enable offenders of criminal law to avoid criminal charges and a criminal record</p> | <p>Regrouped units within the department to better serve the underrepresented population. Address those in the diversions programs who are struggling with substance abuse and/or mental illness in jails. Provide continuity of care services, including referrals and screening, intensive case management (ICM) and Transitional Case Management (TCM)</p> |

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| <p>Diversion Division</p> | <p>Strategic Initiative #4A: Addressing Service Gaps in Our Community: To continue to expand services independently or with community partners to address regions, populations, and communities that are underserved</p> | <p>1) Expand availability of behavioral health treatment and services 2) Increase access to behavioral health treatments and services 3) Enhance delivery of behavioral health treatment and services</p> | <p>Veterans - One Stop Center: mental health services, referral coordination, stigma reduction trainings, educational presentations (ie: resources, mental health, finances, etc.), peer support, emergency assistance, yoga and through Veteran focused community events</p> | <p>Veteran specific services, substance use treatment, programs for justice-involved individuals, and community education on behavioral health topics: Behavioral Health, Family Support, Peer Support program for veterans, active duty and family members of the armed forces.</p> | <p>EHN plans to expand the behavioral health services and resources currently available through the Veterans' One-Stop Center (VOSC). The VOSC will incorporate telehealth and nursing allowing the One Stop to meet the needs of clients who may benefit from medication management. Therapies will utilize evidence-based practices and will include individual therapy and family sessions. In addition to expansion of behavioral health services the VOSC will add NAMI El Paso (National Alliance on Mental Illness) and EHN's Substance Use Disorder Community Health Worker Program to the list of in-house community partners</p> |
| <p>Diversion Division</p> | <p>Strategic Initiative #4A: Addressing Service Gaps in Our Community: To continue to expand services independently or with community partners to address regions, populations, and communities that are underserved</p> | <p>1) Expand availability of behavioral health treatment and services 2) Increase access to behavioral health treatments and services 3) Enhance delivery of behavioral health treatment and services</p> | <p>Homeless (ESG, Rapid Housing, Supportive Housing, Siesta Gardens), HCBS-AMH (Home Based Community based services adult mental health), MST (Multisystemic therapy)</p> | <p>Diversion programs embedded in the criminal justice system designed to enable offenders of criminal law to avoid criminal charges and a criminal record</p> | <p>Connect clients with any available housing resources, employment services, and/or provide assistance obtaining benefits as needed to support a successful individual transition plan; Provide ongoing coordination with other services and providers as needed to support Project Participants' success of being able to sustain rental payments without SHR assistance. This includes coordination with substance use disorder treatment providers and programs serving those with criminal justice involvement; 9. Actively participate in community efforts related to housing such as joining the Local Homeless Coalition if one is present;</p> |

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| Addictive Services | Strategic Objective #2: Family - Centered, Holistic Care: To ensure that all of Emergence Health Network's clinical programs treat the whole person's needs - including mental health, substance use disorder, intellectual and developmental disability, primary care, and social environment conditions | Identify key community stakeholders and engage them in the development of programs focused on dealing with issues of mental health & substance abuse. | Outpatient - Substance Abuse/ Substance Use disorder, Supported Outpatient, OSAR (Outreach, screening, assessment, referral), OBOT/MAT/ OBAT (Office Based Opiate Treatment), Supportive Employment | Outreach and Engagement, Intensive Case Management, Mental Health First Aid for client, family, & other, support systems, Linkage to secure, stable housing, Linkage to primary healthcare, Linkage to outpatient psychiatric care and supportive service, Linkage with substance abuse treatment, | Standardized intake flow, The OSAR Program will maintain written agreements with treatment providers outlining how individuals that go through the screening and assessment process are admitted into treatment, Over, Explore prevention and response strategies, including overdose risk factors, Encourage them to have conversations with people who they use drugs with Link participants with naloxone and other safer use supplies dose Education and Naloxone Distribution |
| Children Mental Health | Strategic Objective #2: Family - Centered, Holistic Care: To ensure that all of Emergence Health Network's clinical programs treat the whole person's needs - including mental health, substance use disorder, intellectual and developmental disability, primary care, and social environment conditions | 1.To empower youth through their mental health recovery by incorporating collaboration with family and natural support. 2. To prevent out of home placement for youth with serious emotional disturbance (SED) | CHAMHPS (Children's Clinic), YES Waiver | Behavioral Health, Case Management Family Support, Mental Health/Child/Youth | 1. Implementation of Person-Centered Recovery Plan approach to level of care 2. Month fidelity to provide person centered services, the use of the wraparound plan of care is Evidence based |
| Adult Mental Health | Strategic Initiative #2A: Certified Community Behavioral Health Clinic: To fully implement all the requirements for Certified Community Behavioral Health Clinics (CCBHC) under the Excellence Act to ensure that the provision of comprehensive, coordinated, evidence-based care for individuals in our community. | Increase prevention and education around mental health and substance abuse disorders | Central Outpatient (COP), East Valley (EVOP), Clinical Services, NEOP (Northeast), Coordinated Specialty Care (CSC) | Behavioral Health, Crisis Stabilization – Adult, Case Management, Chemical Dependency, Community Integration, Family Support, Peer Support, Behavioral Health, Case Management, Community Integration, Peer Support, Permanent Housing, Vocational Rehabilitation | Implement Mental health education & training, implement Recovery Management training, |

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| <p>Intellectual Disabilities Services</p> | <p>Strategic Objective #2: Family - Centered, Holistic Care: To ensure that all of Emergence Health Network's clinical programs treat the whole person's needs - including mental health, substance use disorder, intellectual and developmental disability, primary care, and social environment conditions</p> | <p>Ensure that all required services identified in the Description of IDD Services are provided each quarter. Assistance in accessing medical, social, educational, and other appropriate Long-Term services and supports (LTSS) Case Management that will help an individual achieve a quality of life and community participation acceptable to the individual as described in the plan of services and supports</p> | <p>EHN Learning Center -Day Habilitation, Intermediate Care Facilities (ICFs), Home and Community-Based Services (HCS), Texas Home Living (TxHmL), and Preadmission Screening and Resident Review (PASRR)</p> | <p>Community based services and supports that allow persons to remain in their own or their family's homes, to residential services in which persons live in a structured setting with 24 hour supervision. Community supports are individualized activities that are provided in the person's home and at community locations, such as libraries and stores. Supports may include habilitation and support activities that foster improvement of, or facilitate, the person's ability to perform daily living activities; activities for the person's family that help preserve the family unit and prevent or limit out of the home placement of the person; transportation for the person between home and his or her community employment site or dayhab site. Respite care, crisis respite, employment assistance, supported employment, nursing, behavioral supports, and service coordination are among other services and supports.</p> | <p>Service Coordination is provided by the LIDDA staff, assessing, service planning and coordinating services on an ongoing basis for continuum of care. At least semi-annually, LIDDA must provide or arrange for the provision of educational or informational activities addressing community living options for individuals in nursing facilities in the LIDDA's local service area and their families. These activities may include family-to-family and peer-to-peer programs, providing information about the benefits of community living options, facilitating visits in such settings, and offering opportunities to meet with other individuals who are living, working, and receiving services in integrated settings, and with their families, and with community providers.</p> |
| <p>Crisis & Emergency Services</p> | <p>Strategic Initiative #2B: Care Coordination and Transition: To initiate and strengthen the care coordination and care transition efforts for consumers to ensure continuity of health care and continued recovery.</p> | <ul style="list-style-type: none"> • Provide prompt and comprehensive assessment of a psychiatric crisis • Provide prompt crisis stabilization • Provide crisis resolution • Provide linkage to appropriate services • Reduce inpatient and law enforcement interventions | <p>Extended Observation Unit, Crisis Emergency Services</p> | <p>EOUs provide access to emergency psychiatric care 24 hours a day, 7 days a week (24/7) and can manage individuals with high to moderate psychiatric symptoms. Individuals are provided appropriate and coordinated transfer to a higher level of care if needed. EOU services shall be provided in a safe and secure environment and staffed by medical personnel and mental health professionals.</p> | <p>Provide Continuity of Care services – Coordination of the range of services available to an individual consumer so that an optimal service mix is provided at all times without disruption; the concept can apply to the current services mix, the flow of services over time and the consistency of the consumer-provider relationship.</p> |

REFERENCES:

A. Texas Administrative Code (TAC) (2004). Title 25, Part 1, Chapter 448, Subchapter E, Rule 448.502. Health Services, Facility Requirements: Operational Plan, Policies and Procedure. Retrieved from [https://texreg.sos.state.tx.us/public/readtac\\$ext.TacPage?](https://texreg.sos.state.tx.us/public/readtac$ext.TacPage?)

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- B. Texas Administrative Code (TAC) (2004). Title 25, Part 1, Chapter 448, Subchapter E, Rule 448.403. Health Services, Facility Licensure Information: New Licensure Application. Retrieved from [https://texreg.sos.state.tx.us/public/readtac\\$ext.TacPage?](https://texreg.sos.state.tx.us/public/readtac$ext.TacPage?)
- C. CCBHC Criteria 2.a.8. CCBHCs have in place a continuity of operations/disaster plan.
- D. National Alliance on Mental Illness (NAMI) (2020). About Mental Illness. Retrieved from <https://www.nami.org/Home#:~:text=NAMI%2C%20the%20National%20Alliance%20on,Americans%20affected%20by%20mental%20illness.>
- E. National Institutes of Health (NIH)(2020). Intellectual and Developmental Disabilities (IDDs): Condition Information. Retrieved from <https://www.nichd.nih.gov/health/topics/idds/conditioninfo/default>
- F. NCQA CM LTSS Accreditation Criteria LTSS 1 thru LTSS 7

RELATED DOCUMENTS:

- A. EHN Associate Handbook, Document No. 3218
- B. Accommodations for Communication Needs, Doc. No. #3056

AUTHORITY/RESPONSIBILITY:

- A. Chief Executive Officer,
- B. Associate Chief Executive Officer
- C. Chief of Staff
- D. Chief Compliance Officer,
- E. Chief Clinical Officer
- F. Chief Nursing Officer
- G. Chief Information Officer
- H. Chief of IDD Services
- I. Chief of Behavioral health
- J. Chief of Diversion
- K. Chief of Collaborative Care
- L. Chief of Crisis Emergency Services
- M. Quality Management
- N. Operations Management

REVISION HISTORY:

| Revision | Description of Changes | Release Date | Training Required (Y/N) |
|----------|------------------------|--------------|-------------------------|
| 0 | Original Release | 9-30-20 | Y |

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| 1 | Revised verbiage suggested by: “We will be serving adolescent male and female, ages 12 to 17 and adult male and females, ages 18 and older” | 11-03-20 | Y |
| 2 | Added the verbiage to Table 1: Intellectual Developmental Disabilities section: (1) Long-Term services and supports (LTSS) case management, (2) Intermediate Care Facilities (ICFs), Home and Community-Based Services (HCS), Texas Home Living (TxHmL), and Preadmission Screening and Resident Review (PASRR). There were no content changes that would impact other divisions. 1-5-21 Updated verbiage to IDD section program description | 12-14-20 | Y |

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