	Referral Resources			
	Chapter:	Board Service and Program Administration	Policy #	2-6-4
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- I. **PURPOSE:** Establishing policy and procedures for governing the maintenance of comprehensive referral information, collaborative relationships with referral resources and methods of assisting in the referral of persons served to other service providers.
- II. **APPLICATION:** All programs and services operated by the West Michigan Community Mental Health Governing Body.
- III. **REQUIRED BY:** Michigan Department of Health and Human Services Standards for Community Mental Health Services, Accrediting Bodies.

IV. **DEFINITIONS:**


Case Holder: A professional staff member of West Michigan Community Mental Health who has the primary responsibility, together with the consumer, for access to needed health and dental services, financial assistance, housing, employment, education, social services, mental health services, habilitation, employment, preferences and other services and natural supports developed through the person-centered planning process. Care is provided in a responsive, coordinated, effective and efficient manner focusing on process and outcomes. Care Management is provided to consumers who have multiple service needs, have a high level of vulnerability, and/or are unable to independently access and sustain involvement with needed services. The care manager is responsible for ensuring the implementation of the individual plan of service. The care manager is responsible for what is in the consumer's clinical record for those consumers assigned.

Consultation: An exchange of information with another identified entity on behalf of the individual, which may include sharing of clinical history, assessment information, diagnostic impressions, and recommendations. Consultation requires an informed written consent, signed by the person served, guardian, or custodial parent.

Referral: The process of referring an individual to an appropriate service provider as determined by an emergency screening and triage, Behavioral health assessment/evaluation, psychiatric evaluation, or interdisciplinary team assessment with the consent of the individual, guardian, or custodial parent.

Resource File: A catalogue(s) or list which contains current information on the availability of behavioral health and related services provided by other community and state organizations.


- V. **POLICY:** It is the policy of West Michigan Community Mental Health to establish and to implement the following:
 1. Acquisition and maintenance of a resource file;
 2. Methods which promote consultation and facilitation of referrals for individuals, organizations and professionals;

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3. Methods in which individuals may request a referral; and
4. Methods in which individuals are assisted when seeking services that West Michigan Community Mental Health does not provide.

VI. **PROCEDURES:**

1. The Access Coordinator has the primary responsibility for ensuring the acquisition and maintenance of community referral information. The actual task of acquiring and maintaining this information may be delegated to staff assigned to the Access Department or other designee as determined by the Access Coordinator. The Support Services Representative (SSR) assigned to Access/CSS or designee will:
 - 1.1 Be responsible for acquiring community referral information and cataloguing the information in a resource file maintained as part of the WMCMH intranet system accessible to all CMH and contractual employees.
 - 1.2 Community service information shall be added when received by CMH and the entire resource file shall be reviewed and updated annually.
2. WMCMH utilizes several methods of referral to link individuals to services appropriate to their needs; in turn, these established protocols promote consultation between service providers.
 - 2.1 Clinicians and responsible case holders have the primary responsibility to seek out services that can meet the assessed needs of the individual. Persons eligible for behavioral health services receive an initial assessment prior to their Individual Plan of Service and annually thereafter. The assessment process identifies each person's unmet needs and assists in the determination of a referral to CMH programs and/or community service providers. All referrals are made with the mutual consent of the individual, guardian, or custodial parent. Established procedures for internal and external referrals are to be executed by the responsible Clinician and/or case holder.
 - 2.2 The Access Clinicians/Case Holders have the primary responsibility of maintaining effective consultation/referral networks with other community service providers. The Access and CSS Coordinator or designee will regularly contact all local referral resources/sources to review referral procedures, such as:
 - Circuit Court
 - District Court
 - Department of Human Services
 - Contracted inpatient facilities
 - Juvenile Court
 - Law Enforcement


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- Community Hospitals
- Probate Court
- Probation and Parole agents
- Prosecuting Attorney

2.3 The Chief Healthcare Integration Officer, or his/her designee, has the responsibility of maintaining established written agreements with other service providers to promote referrals and access to services beyond the scope of care provided by WMCMH, such as:

- Kalamazoo Regional Psychiatric Hospital
- Spectrum Health – Ludington Hospital
- Oakview Medical Care Facility
- Various contracted healthcare consultants
- Various residential service providers
- Local substance abuse providers.

3. Individuals may request referrals from their assigned case holder at any time. Individuals shall be assisted to the extent that the requested referral has been identified as an assessed need, is within the guidelines of WMCMH policy on Code of Ethics, and with the individual's understanding that WMCMH shall determine its financial liability for each referral, as appropriate.
4. Clinicians or Case Holders have the responsibility of assisting individuals, with their consent, in accessing other services not provided directly by WMCMH. Such services might include medical or neurological evaluations, legal services, psychiatric hospitalization, shelter, financial aid, etc., upon written authorization from the consumer, guardian, or custodial parent. The Clinician or Case Holder will ensure proper coordination of care and documentation of these referrals in the clinical record.
5. Under atypical circumstances, the Clinician or Case Holder may need to act on behalf of the individual deemed incompetent by the probate court as a result of a mental illness or intellectual/developmental disability preventing the consumer from understanding his/her need for medical, psychiatric or protective services. Such action shall be governed by the Michigan Mental Health Code, Public Act 258, or 1974, as amended.
6. A request for a behavioral health service not provided by WMCMH shall be referred to the appropriate Clinical Director/Coordinator to initiate the process of administrative review. The Chief Executive Officer shall decide on all requests that require WMCMH to assume financial liability for the service(s) requested.
7. WMCMH will not accept financial responsibility for requests for behavioral health services outside of WMCMH and/or its contracted providers unless that same or similar service is not available through WMCMH network providers.

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VII. **SUPPORTING DOCUMENTS:** n/a

VIII. **POLICY/PROCEDURES REVIEW:**

REV#	APPROVED BY	Policy/Procedure	DATE
			5/2011
			5/2014
			2/2017
			8/2018
			10/2019
2	COC	Title changes	5/2021
2	COC	Annual Review	4/2022
2	COC	Annual Review	3/2023
3	COC	Annual Review	3/2024
4	COC	Title Changes	2/2025
<i>Board Approval Date: 02/20/1996</i>			

IX. **CHIEF EXECUTIVE OFFICER ENDORSEMENT:**

I have reviewed and approve of policy # 2-6-4 Revision # 4.

CEO: Julia Rupp **Approval Signature:** _____