

# BAY-ARENAC BEHAVIORAL HEALTH AUTHORITY

## POLICIES AND PROCEDURES MANUAL

<b>Chapter:</b> 4	<b>Care and Treatment Services</b>		
<b>Section:</b> 7	<b>Treatment Plan of Service and Treatment Monitoring</b>		
<b>Topic:</b> 8	<b>Cancellation and No-Show Guidelines</b>		
Page: 1 of 4	Supersedes: Pol: 3-18-04 Proc: 11-7-11, 9-30-06, 7-28-98	Approval Date: Pol: 12-19-13 Proc: 11-7-13	_____ <i>Board Chairperson Signature</i>
			_____ <i>Chief Executive Officer Signature</i>
Note: Unless this document has an original signature, this copy is uncontrolled and valid on this date only: 10/22/2015. For controlled copy, view Agency Manuals - Medworxx on the BABHA Intranet site.			

DO NOT WRITE IN SHADED AREA ABOVE

### Policy

It is the policy of Bay-Arenac Behavioral Health Authority (BABHA) that procedures be established to address cancellations and no-shows that are not rescheduled by the individual or family at the time of the cancellation or no-show.

### Purpose

This policy and procedure was established to address no-show or missed appointments when the individual or family does not call to reschedule appointments.

### Education Applies to

- ☐ All BABHA Staff  
☒ Selected BABHA Staff, as follows: All Clinical Staff and Clinical Management  
☐ All Contracted Providers: ☐ Policy Only ☐ Policy and Procedure  
☒ Selected Contracted Providers, as follows: Primary Care/Outpatient  
     ☒ Policy Only ☐ Policy and Procedure  
☐ Other:

### Definitions

N/A

### Procedure

- During the Intake Process, individuals and parents/guardians are asked to provide 24-hour notice in case of a cancellation.

## BAY-ARENAC BEHAVIORAL HEALTH AUTHORITY POLICIES AND PROCEDURES MANUAL

<b>Chapter: 4</b>	<b>Care and Treatment Services</b>		
<b>Section: 7</b>	<b>Treatment Plan of Service and Treatment Monitoring</b>		
<b>Topic: 8</b>	<b>Cancellation and No-Show Guidelines</b>		
<b>Page: 2 of 4</b>	<b>Supersedes:</b> <b>Pol: 3-18-04</b> <b>Proc: 11-7-11,</b> <b>9-30-06, 7-28-98</b>	<b>Approval Date:</b> <b>Pol: 12-19-13</b> <b>Proc: 11-7-13</b>	<div style="text-align: center; border-top: 1px solid black; margin-top: 20px;"> <i>Board Chairperson Signature</i> </div> <div style="text-align: center; border-top: 1px solid black; margin-top: 20px;"> <i>Chief Executive Officer Signature</i> </div>
<b>Note: Unless this document has an original signature, this copy is uncontrolled and valid on this date only: 10/22/2015. For controlled copy, view Agency Manuals - Medworxx on the BABHA Intranet site.</b>			

**DO NOT WRITE IN SHADED AREA ABOVE**

2. If an individual does not show up for a scheduled appointment, the primary treating staff member or designee will attempt to re-schedule the appointment one time by telephone. If the individual does not have a telephone, the staff member will send a letter that welcomes and encourages the individual to re-engage in services. The letter will also include a date and time for a new appointment and instructions to call the office if he or she can not attend the rescheduled appointment.
3. If an individual does not show up for a second consecutive appointment, the individual will receive a second letter from the primary treating staff member or designee that welcomes and encourages the person to reengage in services. The letter will also ask the individual to contact the office to schedule an appointment. If there is no response to the letter within 14 calendar days of the date of the letter, the individual will be sent an Advanced Notice stating why services are being reduced or terminated. The individual will have 12 calendar days in which to respond to the Advanced Notice.
4. Individuals on voluntary status, who are non-responsive to services, who have acute mental illness, are dangerous to self or others, and/or unable to care for themselves will not be discharged from services. In such cases, staff will consult with his/her immediate supervisor to determine if a mental health petition and pickup order should be initiated. In such instances, staff will also be encouraged to go to the individual's home to check on their well being.
5. For individuals on deferment status or court order, staff will consult with the treating psychiatrist and/or immediate supervisor to determine if the deferment or court order should be pulled. In either case, the treating psychiatrist will need to be willing to provide expert witness testimony at the individual's hearing at Probate Court.
6. If the clinician is making scheduled off-site visits such as to the home, school, etc., and the individual and/or family is not available, the same protocol as outlined above will be followed.
7. All attempts to reach the individual, guardian, and/or family by telephone or in person will be documented.

# BAY-ARENAC BEHAVIORAL HEALTH AUTHORITY

## POLICIES AND PROCEDURES MANUAL

<b>Chapter: 4</b>	<b>Care and Treatment Services</b>		
<b>Section: 7</b>	<b>Treatment Plan of Service and Treatment Monitoring</b>		
<b>Topic: 8</b>	<b>Cancellation and No-Show Guidelines</b>		
Page: 3 of 4	Supersedes: Pol: 3-18-04 Proc: 11-7-11, 9-30-06, 7-28-98	Approval Date: Pol: 12-19-13 Proc: 11-7-13	<div style="text-align: center; border-top: 1px solid black; margin-bottom: 10px;"> <i>Board Chairperson Signature</i> </div> <div style="text-align: center; border-top: 1px solid black;"> <i>Chief Executive Officer Signature</i> </div>
	<small>Note: Unless this document has an original signature, this copy is uncontrolled and valid on this date only: 10/22/2015. For controlled copy, view Agency Manuals - Medworxx on the BABHA Intranet site.</small>		

**DO NOT WRITE IN SHADED AREA ABOVE**

8. After two (2) consecutive cancellations without rescheduling or two (2) no-shows, the discharge process may begin.
9. The procedure for sending adequate or advanced notice will be followed prior to discharging an individual or family to services.
10. The procedure for completing the transfer/discharge form will be followed according to the agency's Transition, Transfer, and/or Termination of Treatment policy (04:07:05)

### **Attachments**

N/A

### **Related Forms**

Medicaid Advanced Notice (G:/Clinical Services/Master Clinical Files)  
 Non-Medicaid Advance Notice (G:/Clinical Services/Master Clinical Files)  
 Transfer/Discharge Form (EHR)

### **Related Materials**

Transition, Transfer, and/or Termination of Treatment Policy and Procedure (C04-S07-T05)

### **References/Legal Authority**

N/A

# BAY-ARENAC BEHAVIORAL HEALTH AUTHORITY

## POLICIES AND PROCEDURES MANUAL

<b>Chapter:</b> 4	<b>Care and Treatment Services</b>		
<b>Section:</b> 7	<b>Treatment Plan of Service and Treatment Monitoring</b>		
<b>Topic:</b> 8	<b>Cancellation and No-Show Guidelines</b>		
Page: 4 of 4	Supersedes: Pol: 3-18-04 Proc: 11-7-11, 9-30-06, 7-28-98	Approval Date: Pol: 12-19-13 Proc: 11-7-13	_____ <i>Board Chairperson Signature</i>
			_____ <i>Chief Executive Officer Signature</i>
<small>Note: Unless this document has an original signature, this copy is uncontrolled and valid on this date only: 10/22/2015. For controlled copy, view Agency Manuals - Medworxx on the BABHA Intranet site.</small>			

**DO NOT WRITE IN SHADED AREA ABOVE**

<b>Submission Form</b>		
<u>Approving Body/Committee/Supervisor:</u> Pat Baker Provider Network Leadership Team Provider Network Leadership Team	<u>Author/Reviewer:</u> Pat Baker D. Garcia/M. Swank D. Cranston	<u>Approval/Review Date:</u> 08/24/10 11/7/11 11/7/13
<u>Result:</u> Deletion <input type="checkbox"/> New <input type="checkbox"/> No Changes <input type="checkbox"/> Replacement <input type="checkbox"/> Revision <input checked="" type="checkbox"/>		
<u>List reason for deletion/replacement/revision here. If replacement, list policy to be replaced.</u> Reviewed - no changes to P/P Consolidated several polices and procedures governing cancellation and no shows in to one unified policy and procedure. Triennial review: Updated with Person First Language, and including language the supports trauma informed care and a welcoming environment		