

POLICY AND PROCEDURE

REACH for Tomorrow

Continuing Care and Aftercare Planning Policy

Partial Hospitalization Program (PHP)

Evaluation Period: Annual

Effective Date: 03/01/2026

Review Date: 03/01/2027

Responsible Party: Director of Medical & Clinical Services

Purpose

To ensure that individuals discharged from the Partial Hospitalization Program (PHP) receive coordinated continuing care services that support recovery, reduce relapse risk, and promote long-term stability in the community.

Policy

The program develops a continuing care and aftercare plan for each individual prior to discharge. Planning begins early in treatment and is reviewed throughout the course of services to ensure that appropriate supports and services are arranged before discharge occurs.

Continuing Care Planning Process

Continuing care planning includes collaboration between the individual served and the treatment team to identify services and supports necessary after discharge. Planning may include:

- Outpatient therapy appointments
- Psychiatric medication management
- Substance use treatment services when appropriate
- Peer recovery support services
- Case management or community support services
- Community recovery or support groups

Assessment of Continuing Care Needs

Clinicians assess ongoing needs related to:

POLICY AND PROCEDURE

REACH for Tomorrow

- Symptom stability
- Risk of relapse
- Medication management needs
- Housing stability
- Employment or education supports
- Social and recovery support systems

Client Participation

The individual served actively participates in discharge and aftercare planning. Staff encourage individuals to identify preferences, goals, and recovery supports that will assist them following program completion.

Coordination with External Providers

When appropriate and with proper authorization, staff coordinate with external providers to ensure continuity of care. This may include:

- Scheduling follow-up appointments
- Sharing discharge summaries
- Coordinating medication management
- Communicating relevant clinical information

Discharge Documentation

The discharge summary and continuing care plan should include:

- Services recommended after discharge
- Scheduled appointments when available
- Medication instructions
- Recovery and community support resources
- Crisis contact information

POLICY AND PROCEDURE

REACH for Tomorrow

Post-Discharge Follow-Up

The program may conduct follow-up contact after discharge to encourage engagement with recommended services and identify any barriers to ongoing care.

Quality Monitoring

Continuing care practices are reviewed through quality assurance processes including chart audits and follow-up outcome tracking to ensure effective transition planning.

Effective Date

March 1, 2026

Review Date

March 1, 2027

Responsible Party

Director of Medical & Clinical Services