Community Integration Program

External Communication Documentation Procedure

Procedure Number: CI-EC-012

Effective Date: 03/01/2026

Review Date: 03/01/2027

Responsible Party: Director of Medical & Clinical Services

Purpose

The purpose of this procedure is to establish standardized requirements for documenting communication between REACH for Tomorrow staff and external individuals or organizations involved in the care, support, or supervision of individuals receiving Community Integration services. Proper documentation ensures continuity of care, accountability, and compliance with CARF standards.

Scope

This procedure applies to all staff who communicate with external providers, agencies, natural supports, or other stakeholders regarding individuals receiving Community Integration services.

Definition of External Communication

External communication includes any interaction with individuals or organizations outside of REACH for Tomorrow regarding a person receiving services. This may occur through phone calls, secure messages, email, written correspondence, or in-person discussions.

Examples of External Communication

- Communication with primary care providers or medical specialists
- Communication with behavioral health providers or therapists
- Coordination with probation officers or court personnel
- Communication with schools, vocational programs, or employers
- Contact with housing providers or community resource agencies
- Communication with family members or natural supports when authorized

Procedure

1. Authorization for Information Sharing

Prior to sharing protected health information with external parties, staff must verify that a valid Release of Information (ROI) is on file, unless disclosure is otherwise permitted or required by law.

2. Conducting the Communication

Staff will communicate only information relevant to the individual's care coordination, service delivery, or safety. Communication must follow confidentiality and privacy requirements.

3. Documentation of Communication

All external communication must be documented using the organization's Unscheduled Encounter template in the electronic health record.

Documentation must include the following elements:

- Date and time of the communication
- Name and role of the external individual or organization
- Method of communication (phone, email, meeting, etc.)
- Purpose of the communication
- Summary of information exchanged
- Any actions taken or follow-up required
- Name and credentials of the staff member completing the documentation

4. Follow-Up Activities

When communication results in action items such as referrals, scheduling appointments, or coordination of services, staff must document the follow-up steps taken.

5. Integration with the Service Plan

External communication should support the individual's goals and interventions identified in the individualized service plan whenever applicable.

Quality Monitoring

Compliance with external communication documentation standards will be monitored through routine chart audits, supervision, and performance improvement activities.

References

CARF International. (2025). Behavioral Health Standards Manual – Community Integration Services.