

POLICY AND PROCEDURE

REACH for Tomorrow

Continuity of Care During Provider Absence Policy

Partial Hospitalization Program (PHP)

Effective Date: 08/15/2025

Approved By: Director of Medical and Clinical Services

Review Schedule: Annually or as Needed

Applies To: All Programs — Outpatient MH/SUD, IOP, PHP, and Integrated Primary Care/Behavioral Health

Purpose

To ensure uninterrupted clinical care and treatment services for individuals served when a provider is unavailable due to scheduled leave, illness, emergency, or other absence. This policy establishes procedures to maintain continuity of care and safe service delivery.

Policy

The Partial Hospitalization Program maintains procedures to ensure continuity of care during provider absences. Coverage arrangements are implemented to maintain clinical oversight, access to necessary services, and timely response to client needs.

All clinical services must continue in accordance with program standards and treatment plans when a provider is unavailable.

Scope

This policy applies to all clinical providers within the program including:

- Psychiatrists
- Psychiatric Nurse Practitioners
- Therapists and counselors
- Nurses
- Case managers
- Peer support specialists when applicable

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Planned Provider Absence

When a provider anticipates an absence (e.g., vacation, scheduled leave):

- Coverage arrangements are made in advance
- Another qualified clinician is assigned to provide clinical oversight
- Scheduled appointments and services are reassigned or rescheduled as needed
- Relevant client information is communicated to the covering provider

Unplanned Provider Absence

When a provider is unexpectedly unavailable:

- Program leadership assigns a qualified covering provider
- Clinical staff notify individuals served when appointment changes occur
- Urgent clinical needs are prioritized for timely response

Coverage Responsibilities

Covering providers may be responsible for:

- Reviewing relevant clinical records
- Responding to urgent clinical concerns
- Providing medication management coverage when appropriate
- Supporting treatment team decision-making
- Ensuring continuity of scheduled services when feasible

Communication with Individuals Served

Individuals served are informed when provider coverage changes occur that may affect scheduled appointments or services. Staff ensure that individuals understand how to access support or clinical assistance during the provider's absence.

Documentation Requirements

Coverage arrangements and any service modifications must be documented in the clinical record when applicable. Documentation may include:

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- Provider coverage assignments
- Changes to appointments or services
- Clinical decisions made during coverage

Emergency Coverage

The program maintains procedures to ensure that clinical staff are available to respond to urgent situations or crises during provider absences. Staff follow established crisis response procedures when emergency needs arise.

Quality Monitoring

Continuity of care practices are periodically reviewed through program supervision, incident review, and quality assurance activities to ensure that provider absences do not disrupt clinical services.