

# Conditional Use Application # CU 13110001

Planning Comm. Meeting Date 12-2-13 at 6:00PM held at **WC Board of Comm. Meeting Room**  
2nd Hearing 6-5-14  
 Board of Comm Meeting Date 7-1-14 at 6:00PM held at **WC Board of Comm. Meeting Room**  
**You or a representative must be present at both meetings**

**\*\*\*Please Type or Print Legibly\*\*\***

C1400-00000-022-000 (Deed Book 287, Page 652)  
**Map/Parcel** C1400-00000-023-000 (Deed Book 1115, Page 264)

Applicant Name/Address/Phone #	Property Owner Name/Address/Phone
<u>Summit Healthcare Management, LLC</u>	<u>Paul M. Duncan and Hilda Faye Duncan</u>
<u>511 Warren Ave</u>	<u>398 GA. Hwy 11</u>
<u>Saint Louis, MO 63130</u>	<u>Monroe, GA 30655</u>
<u>c/o Bradley C. Skidmore, Esq.</u>	<u>(If more than one owner, attach Exhibit "A")</u>
Phone # <u>(770) 857-4780</u>	Phone # <u>(770) 267-4604</u>
<u>398 GA Hwy 11, Monroe, GA</u>	<u>A1 93.75 23.07</u>
Location <u>422 GA Hwy 11, Monroe, GA</u>	Present Zoning <u>A1</u> Acreage <u>5.00</u> <span style="float: right;">(28 acres)</span>

Existing Use of Property: Rural Estate

Existing Structures: House / Vacant Land & Pond

Property is serviced by:

Public Water:  Provider: Walton County Water Department Well: \_\_\_\_\_

Public Sewer: \_\_\_\_\_ Provider: \_\_\_\_\_ Septic Tank:

The purpose of this conditional use is: to establish and operate a "Residential Mental Health & Substance Abuse Facility" (NAICS Code No. 623220), which is allowed as a conditional use for the subject property (currently zoned Rural Estate District (A-1)) pursuant to Article 5, Part 1, Section 100 of the Walton County Comprehensive Land Development Ordinance.

The above statements and accompanying materials are complete and accurate. Applicant hereby grants permission for planning and zoning personnel to enter upon and inspect the property for all purposes allowed and required by the Comprehensive Land Development Ordinance.

Signature [Signature] Date 11/01/2013 Fee Paid \$ 300.00

**Public Notice sign will be placed and removed by P&D Office**  
 Signs will not be removed until after Board of Commissioners meeting

Office Use Only:

Existing Zoning A-1 Surrounding Zoning: North A-1 South A-1  
 East A-1 West A-1

Comprehensive Land Use: Highway Corridor

Commission District: 4 Watershed: HLC

I hereby withdraw the above application \_\_\_\_\_ Date: \_\_\_\_\_

WALTON RECOVERY CENTER

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WRITTEN PLAN  
FOR  
PROFESSIONAL SERVICES  
AND  
STAFF COMPOSITION

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**WALTON RECOVERY CENTER**  
**WRITTEN PLAN FOR PROFESSIONAL SERVICES AND STAFF COMPOSITION**

Walton Recovery Center is a treatment facility located at 398 Georgia Highway 11, Monroe GA 30655 for chemically dependent persons eighteen (18) years of age and older, and their family members.

It is the **mission** of Walton Recovery Center to provide the highest quality of chemical dependency care in a cost effective manner, insuring that our valued clients receive treatment that will allow them to return to a productive way of life. We are committed to rendering this treatment in an atmosphere of trust, honesty and responsibility through supportive confrontation, sharing of feelings, reality orientation and medical management.

The **vision** of Walton Recovery Center is to be the provider of choice in the Southeast for comprehensive chemical dependency services for clients, family members, referral sources, and payers. We shall strive to exceed the expectations of our customers in the provision of high quality, cost effective services.

Our slogan is "Begin Today...To A Better Future"

**Program Philosophy:**

Our philosophy gives clear recognition to the disease concept and focuses on the individual client as a person with dignity and self-worth. In this regard, we believe each person:

- possesses an inherent dignity of inalienable rights regardless of creed, gender, race, age or origin,
- is a unique and holistic creation with right to life, dignity and worth as a person and as a member of society,
- has an inherent potential for change and growth,
- need not be bound by past learning history, but can respond to both present and future expectations, and
- has the ability to continually adapt to a changing environment, an environment which on a daily basis challenges the balance between disease and health.

In regard to addictive disorders, we believe:

- Addiction is a disease.
- As a disease, addiction is a multi- dimensional problem affecting the body, mind and spirit with individual ramifications for each victim. The disease negatively affects the lives of those around the addicted client.
- Addiction is a primary and specific disease with its own set of progressive symptoms which may be identified and treated.

Walton Recovery Center's fundamental goal is to restore the individual to a healthier, happier, and more productive life, free from dependence on illicit addictive chemicals and destructive behaviors.

Successful recovery encompasses improvements in self esteem, interpersonal relationships, positive family interaction, vocational productivity, the establishment and attainment of realistic life goals and a healthy life style adjustment. Walton Recovery Center provides the individual with the opportunity to

learn these skills through a program structure which provides a safe environment in which clients can explore application.

Because of the stigma and shame often associated with addictive disorders, the negative attitudes toward persons with the diseases and ambivalent values of society; individuals and their families are often under great pressure to deny the existence of their problems to those in their environment and to themselves. It is essential, therefore, for our center to offer a therapeutic milieu where relief from the bonds of anxiety, shame and guilt may be established; and where new responses may be practiced.

Recovery is recognized as a lifelong process. Walton Recovery Center emphasizes the importance of continuing care, provides post-discharge support services, and attempts to involve each individual in appropriate support groups.

Integral to the treatment and recovery process are the self-help fellowships and their "12 Step" programs. Examples of these fellowships are Alcoholics Anonymous (AA), Narcotics Anonymous (NA), Emotions Anonymous (EA) and Cocaine Anonymous (CA). Clients are encouraged to develop positive attitudes toward these groups by attending meetings during the program. At the termination of residential treatment, appropriate referrals are made and they are encouraged to attend meetings and work "a program of recovery".

### **VALUES, GOALS AND OBJECTIVES**

The goals and objectives of Walton Recovery Center are:

- Availability of sufficient resources
- Accessibility to admissions, movement and discharge
- Appropriateness of services delivered
- Coordination of work performed
- Effectiveness of outcome

Each value is further refined with three subordinate values. In the design of the goals and objectives, each value generates a goal, and each subordinate value produces an objective.

The values, goals and objectives are applicable to all Walton Recovery Center programs. This design will make it possible to develop uniform evaluation methodology, which is applicable across program lines and can be used for process improvement and program evaluation purposes.

The values, goals and objectives are:

1. Value: Availability - There are sufficient resources to insure adequate program operations.  
(Goal) To have sufficient resources available to the facility and its programs to insure the delivery of an optimal level of quality services.
  - 1.1 (Objective) Staffing - To have sufficient numbers of qualified staff present in all programs and departments.
  - 1.2 (Objective) - Facilities - To have facilities which reflect a positive and safe therapeutic environment.
  - 1.3 (Objective) - Capital - To perform in a manner which generates sufficient income and maintains appropriate expenditure controls to insure

adequate levels of funding.

2. Value: Accessibility - To maintain services and programs which operate without barrier to client entry, movement and discharge.  
(Goal) To have programs and services operate without barriers to entry, movement and discharge.
- 2.1 (Objective) - Entry - To have the admissions process facilitate access to services for appropriately qualified persons.
  - 2.2 (Objective) - Movement - To assure clients access to all necessary services while in treatment.
  - 2.3 (Objective) - Exit - To assure clients move through treatment as planned.
3. Value: Appropriateness - Work is performed consistent with plans to facilitate expected outcome.  
(Goal) To have need accurately assessed to facilitate planning, service delivery and work performance.
- 3.1 (Objective) - Assessment - To have needs evaluated and documented for each client
  - 3.2 (Objective) - Planning - To have all clinical work performed according to a specific plan of action.
  - 3.3 (Objective) - Application - To have all service delivery accurately documented to reflect plan implementation.
4. Value: Coordination - Programs and services will function in a synergistic manner.  
(Goal) To have all activities in the facility function in a coordinated manner to facilitate service delivery.
- 4.1. (Objective) - Personal - To have all services delivered in an organized manner.
  - 4.2 (Objective) - Community - To coordinate service delivery with community resources to insure adequate continuing care for clients discharged.
  - 4.3 (Objective) - Organizational - To organize facility programs to function in a coordinated manner facilitating effective service delivery.
5. Value: Effectiveness - The desired outcome of all services will be realized.  
(Goal) To have all services result in positive benefit for clients.
- 5.1 (Objective) - Completion - To have each client complete the individualized treatment plan as designed.
  - 5.2 (Objective) - Acceptance - To have clients respond to treatment with positive acceptance.
  - 5.3 (Objective) - Continuation - To have each successfully discharged client respond to recovery as continuing commitment.

#### **Application of Values, Goals and Objectives**

The values, goals and objective presented above form the foundation for the evaluation activities to be described in the process improvement plan. Included in the evaluation activities are performance improvement and program evaluation.

#### **Presenting Problems and Population Served:**

Walton Recovery Center is located in Monroe, Georgia, a rural community, which is forty-five minutes northeast of Atlanta, Georgia. The Center is situated on 30 acres. The campus consists of one multi-story building, one single story building. The one story building will house administration and admission offices as well as financial functions the multi-story building will house adult detoxification, residential treatment program functions and dining. The kitchen and dining hall will be located in the multi-story building, which has an attached covered patio and adjacent swimming pool.

Walton Recovery Center serves voluntary adult populations. This population includes individuals 18 years and older. Clients are admitted regardless of race or national origin that are suffering from the effects of chemical dependency who meet Walton Recovery Center's admission criteria. Because Walton is a private agency requiring payment for services, clients tend to have some economic means. However, employee assistance referrals and insurance coverage tends to broaden the economic and lifestyle spectrum of the client population.

The Center's client population comes primarily from Georgia and surrounding states. However, clients from all areas of the United States can also be served. Individuals present with varied backgrounds from blue collar to white collar, urban to rural. Referral sources vary greatly from family members and employers to attorneys and social workers.

#### **Community Need and Services Offered:**

The population described in the above paragraphs has needs in the following areas related to chemical dependency;

##### **A. Comprehensive Residential Treatment**

Comprehensive residential treatment is provided for those individuals needing a 24-hour supportive, structured atmosphere. This level of treatment also provides medical, nursing and detoxification services.

Walton Recovery Center will be licensed for two levels of care: Level I Detoxification; Level II Inpatient/Residential. Currently Walton provides only Levels I and II care. Walton Recovery Center in cooperation with insurance and managed care companies works to flex client partial and outpatient benefits to allow the longest possible residential care.

##### **B. Aftercare**

Walton Recovery Center provides aftercare counseling. Our program allows clients to continue their daily functions while actively participating in a comprehensive treatment program promoting continued recovery.

##### **C. Community Education and Outreach**

Community education services and outreach are provided to area schools, local businesses and other support programs. All appropriate aspects of substance abuse and chemical dependency will be offered.

##### **E. Family Program**

Walton Recovery Center believes that by the time a chemically dependent loved one comes into treatment the family members and significant others involved are also in need of help and counseling. A family's

involvement in treatment is crucial for successful recovery. Family involvement includes:

- Weekly multifamily educational and process groups to provide a supportive environment in which family members may share their experiences and feelings, and receive information and education.
- Individual family counseling to address individual family problems and concerns.
- Family interventions and assessments to develop a strategy for helping the client understand the need for treatment.

### **Hours and Days of Program Operations:**

Walton Recovery Center provides residential services to clients 24 hours a day, seven days a week. While the program tends to be more intensely staffed during daytime hours, the evening program is considered to be a major part of the overall treatment program.

Aftercare services are provided as scheduled on a weekly basis.

### **24-Hour Inquiry Service**

The facility recognizes persons and families with chemical dependency problems seek out help and information at the time of crisis. It is recognized that crisis does not always occur during usual business hours, and for this reason, the facility maintains a 24-hour telephone inquiry service and walk-in inquiry service to support all programs.

1. All inquiry calls are referred to the call center staff member on duty for screening. After day shift, inquiry calls will be screened by the nurse on duty and referred to the on-call call center coordinator for processing.
2. During all contact with the community, awareness of this service is emphasized. The facility phone number is on all literature and is broadcast through the media.
3. The facility's personnel are regularly involved in a review of the techniques of crisis intervention, community resources, and procedures for appropriate referral.
4. The facility's team members are available as consultants to the community to assist in evaluation of the client needs.
5. An intervention specialist is available to assist in evaluation of needs and to act as a consultant upon request.
6. An intervention team is available to the community for preparation and assisting the intervention procedure.
7. The local telephone number is 1-XXX-XXXX and the toll free number outside the local area is 1-800-XXX-XXXX.

### **Services and Service Activities**

In an effort to further enhance uniformity across program lines, Walton Recovery Center utilizes a common set of defined service functions and activities. Our services have been developed and defined according to the purpose of the work to be performed. As a result, service activities are clustered in six major performance areas. These areas are:

- Client Identification
- Crisis Stabilization
- Case Management
- Verbal Therapies

- Client Education
- Medical Management

Each service performance area contains either one or more service activities. Each service activity is a specific task and can be given clear definition. The service functions and activities of the program are defined as follows.

1. **CLIENT IDENTIFICATION** - A service which identifies potential clients through contact with referral sources including but is not limited to professionals, families, self help organizations, employers and others. This service function includes the following activities.
  - 1.1 **Referral Source Education** - The presentation of education programs for community groups, organizations, businesses and other organizations. Such presentations are intended to inform the audience and enhance awareness of the services available to treat this disease.
  - 1.2 **Screening / Admissions** - Determines the appropriateness of the facility to meet the client's need and establishes that the client has a problem related to chemical dependency and determine the client's intent to cooperate with the service process. Following the completion of the screening service function, the client/provider relationship is established.
2. **CRISIS STABILIZATION SERVICES** - The crisis stabilization service activities are designed to facilitate intervention into crisis situations. The service activities included in this functional area are:
  - 2.1 **Sub-acute Detoxification** - A service activity that uses medical interventions, including the administration of physician prescribed medications and medical monitoring, to safely withdraw clients from addictive substances. Intravenous therapy is not offered.
  - 2.3 **Dual Diagnosis Intervention** - A service activity utilizing medications combined with verbal skills to stabilize persons who are experiencing psychiatric abnormality combined with a primary chemical dependency diagnosis making them potentially dangerous to selves and others but not requiring seclusion, restraint or commitment to a secure treatment facility.
  - 2.4 **Crisis Intervention** - Utilization of verbal therapy to assist persons who are in states of crisis, understand their situation and make decisions to alleviate problems.
3. **CASE MANAGEMENT SERVICES** - The case management service function organizes the services of the program on behalf of the client, maintains the on-going service relationship and insures services are relevant to client need. The case management service activities are:
  - 3.1 **Assessment** - A case management service which determines individual client need through the application of nursing and psychosocial assessment, physical examination and other assessments as indicated by the presenting symptoms including psychiatric assessment if indicated. Assessment is also used to determine client motivation, prognosis for treatment and those techniques of intervention, which will be utilized in treatment. The initial assessment begins at the time the decision to admit is made.
  - 3.2 **Treatment Planning** - A case management service which utilizes current assessment information to create an integrated summary and design initial and revised individualized plans of care which have optimal potential for bringing clients into recovery. Treatment plans are reviewed weekly to ensure that case management is occurring as required and that changes in care are made as necessary. The process encompasses discharge planning to provide post discharge as supportive an environment as possible to promote recovery.

This ensures that transitions between levels of care are individualized to client needs and occurs per admission, concurrent review and discharge criteria.

- 3.3 Linking / Referral - A case management service which assists clients in identifying the most appropriate providers of the services documented as needed in the individualized service plan and connects the client with these providers. Such providers may either be within or outside of Walton Recovery Center service system. Contact may occur while the client is participating in the program or post discharge.
  - 3.4 Service Monitoring - A case management service that continually evaluates the progress of the client in treatment, and utilizes this information to determine further directions in treatment.
4. VERBAL THERAPIES - Those treatment interventions in which verbal techniques are utilized to assist clients in the exploration of their disease, guide them toward developing new and re-establishing old coping skills and making application of these skills. The service activities utilized in the verbal therapies include the following.
    - 4.1 Individual Counseling - Verbal therapy provided in a one-to-one setting involving a client and counselor.
    - 4.2 Group Therapy - Verbal therapy provided in a setting involving a number of clients and facilitated by a counselor.
    - 4.3 Family Therapy - Verbal therapy provided to one or more members of a family and facilitated by a counselor.
    - 4.4 Continuing Care - Verbal group therapy provided for clients who have successfully completed a master treatment plan.
5. RECOVERY SERVICES - Those service activities which assist clients to develop an understanding of the recovery process by increasing awareness of the disease, aspects of addiction free life-styles and skills application.
    - 5.1 Lectures - The verbal presentation of educational material and the related implications.
    - 5.2 Leisure Resource - Recreational activity intended to assist clients in developing leisure skills free of addictive and/or destructive behaviors.
    - 5.3 Social Training - A service designed to assist clients in developing social skills.
    - 5.4 Program Orientation- The orientation process is designed to provide the client with a smooth transition into the therapeutic community.
    - 5.5 Substance Specific Services- These services are aimed at addressing substance specific issues as an integral part of the core process of the treatment program. These issues may be cocaine specific, opioid specific, etc.
    - 5.6 DUI/DWI Issues- This service is provided to those individuals whose treatment was prompted by court services as a result of their DUI/DWI offense. It is intensive and specific to the issues surrounding these individuals.
    - 5.7 Relapse Prevention- Focuses the client on specific warning signs that have lead to or could lead to relapse and can be expected to interfere with the client's sobriety.
    - 5.8 Treatment of Substance Abusing Pregnant Women- Pregnant women are admitted to the program if no acute medical issues exist. Focus is placed on appropriate prenatal care and aftercare follow-up.
    - 5.9 Gender Specific Services- Services focused on gender specific issues which need to be addressed in individual or group settings directly impacting the individual's recovery process.
6. MEDICAL MANAGEMENT - These services either provided directly by or under the direction

of the medical staff and intended to improve the medical and emotional well being of clients.

6.1 Primary Health Care - Basic medical care provided to address the general health needs of clients while in treatment. The service includes assessment, the prescribing of medication and ordering other medical services as indicated based on client need.

6.2 Emotional Care - The service may include assessment, testing, individual therapy, the prescribing of medications and ordering of other services as indicated by client need in relation to psychiatric issues. This service is provided only to those clients that meet admission and concurrent review criteria and do not need acute psychiatric stabilization.

### **Professional Services and Staffing:**

The achievement of the mission of the program and the service activities described above will occur through the utilization of a multi-disciplinary staff which includes professionals from medicine, nursing, psychiatry, social work, substance abuse, psychology and other disciplines. The following is a description of this staffing structure.

#### **A. MEDICAL SERVICES**

Medical services are provided by physicians in family practice and psychiatry. The medical staff operates under a closed model. Each physician has privileges granted according to Independent Practitioner guidelines. As specified by the rules and regulations each client will be admitted to treatment by a practitioner with privilege to admit, and the overall responsibility for the treatment provided will rest with the admitting physician. Any nurse practitioners or physician assistants are privileged to work under medical supervision.

The Medical Director will serve as the medical staff representative on the Leadership Management Committee and have overall leadership responsibility for the medical services provided by the facility.

The Medical Director or his physician designee or nurse practitioner/physician assistant shall be responsible for admission, diagnosis, and treatment of all individuals referred to the program. It is also the responsibility of the physician to assist in the development of treatment plans including ordering consultations for medically related ancillary services. Psychiatric assessment, testing or individual therapy are available through the privileged psychiatrist. In all matters pertaining to the delivery of such services in the facility, the Medical Director has the final decision regarding the appropriate course of treatment.

#### **B. NURSING SERVICES**

The facility provides 24-hour nursing services. The facility is staffed with Registered Nurses and Licensed Nurses around-the-clock under the supervision of the Director of Nursing. Their responsibilities include nursing assessment, medication administration, client education and direct client care. The on-duty nurse has the authority to direct other staff as needed to insure effective operations when administrative staff are not on premises. The nursing staff are assisted by Chemical Dependency Technicians/Medical Assistants.

#### Director of Nursing

The Director of Nursing represents the nursing department as a member of the Leadership Management Committee. It is preferred that the Director of Nursing have prior experience in chemical dependency

and/or psychiatric nursing as well as in nursing supervision.

This position is responsible for direct supervision of the planning, delivery, and monitoring of nursing care in the facility. Responsibilities include participation in appropriate committees, budget preparation, in-service development, staffing and coordination of appropriate services with the Medical Director. The Director of Nursing receives administrative direction from the Program Director when needed, and medical supervision from the Medical Director.

The Director of Nursing serves as a member of the facility management team, the performance improvement committee and is a member of the multi-disciplinary treatment team.

#### Charge Nurse

The Charge Nurse provides assistance to the Director of Nursing by assuming support of the Nursing staff in his/her absence and by ordering supplies as approved by the Director. The Charge Nurse also supervises the Chemical Dependency Technicians/Medical Assistants.

#### Staff Nurses

Nursing staff are under the direct supervision of the Director of Nursing and as appropriate, the Medical Director. The nursing staff serve as members of the treatment team. Nursing functions are:

1. Providing 24 hours nursing care
2. Implementing prescribed medical treatments as ordered by a physician/physician extender
3. Teaching client health care measures
4. Providing initial admission screening and treatment plan development;
5. Participating in periodic evaluation of the delivery of nursing services.

#### Chemical Dependency Technicians/Medical Assistants

Chemical Dependency Technicians/Medical Assistants are utilized to assist the licensed nursing staff in monitoring of the client population under the direction of the nurse on duty and direct supervision of the Charge Nurse.

### **C. CLINICAL STAFF**

The clinical staff has overall case management responsibility and provides the client education, individual, group and family treatment services offered by the facility.

#### Program Director

The Program Director is a member of the Leadership Committee and coordinates Process Improvement for the facility. Responsibilities also include participation in appropriate committees, budget preparation, and counseling staffing and correlation of services. This person also assists with coordinating and providing ongoing in-service training for the clinical staff.

#### Assistant Program Director

The Assistant Program Director provides assistance to the Program Director by assuming support of the Clinical staff in his/her absence. The Assistant Program Director provides direct supervision to the Counselor Assistants.

#### Counselors

The Counselors function under the supervision of the Program Director. The person in the position serves

as a member of the Multi-disciplinary Treatment Team. Counselor functions are:

- \* Completing alcohol and drug histories, and/or initial screening assessments and documenting these in the clinical chart.
- \* Completing and documenting the psychosocial assessment and diagnostic summary;
- \* Assuming primary therapist responsibilities;
- \* Coordinating and monitoring the treatment plan;
- \* Conducting individual, group and family counseling sessions and providing didactic lectures;
- \* Discharge Planning;
- \* Conducting crisis intervention and AMA prevention measures;
- \* Maintaining timely, accurate and legible client records;
- \* Providing timely feedback to referral sources.
- \* Facilitating the client's transition from residential program treatment to aftercare

#### Family Program Coordinator

This individual works under the supervision of the Program Director and serves as a member of the multi disciplinary treatment team. Family counseling functions are:

- \* Completes family histories when indicated and documents these in the clinical record;
- \* Contributes to the development and implementation of the treatment plan;
- \* Conducts family counseling sessions, multi-family group education;
- \* Maintains timely, accurate and legible client records.
- \* Supervises and schedules clinic staff who assist with and provide family programming.
- \* Acts to coordinate weekend clinical programming.
- \* Conducting weekly aftercare groups with an identified client group
- \* Monitoring aftercare progress of each participant
- \* Charting aftercare attendance

#### Evening Coordinator

The Evening Coordinator is responsible for coordinating and conducting clinical care during evening hours, client crisis management and documentation in client records. The Evening Coordinator is supervised by the Program Director.

#### Counselor Assistants

Counselor Assistants are assigned according to client need. The Counselor Assistants work under the direction and supervision of the Assistant Program Director. Functions are:

- \* Orienting and interacting with clients and providing them with supportive assistance in utilizing the services of the program;
- \* Acting as participant observers, as assigned, in clinically directed program activities;
- \* Assisting clients in self-care and in assuming their responsibilities;
- \* Escorting clients to other clinical support activities, outside meetings and other assigned transportation responsibilities;
- \* Co-facilitating groups and presenting didactic lectures on approved topics;
- \* Milieu management;
- \* Charting observations in an objective timely manner, legibly and accurately.

### **D. OUTREACH SERVICES**

#### Intake Coordinator

The Intake Coordinator is under the supervision of the Administrator. Functions are:

- \* Coordinating all inquiry calls for all levels of care, including follow-up disposition;
- \* Screening and evaluating applicants and providing written evaluations as requested;
- \* Collecting and recording all data regarding inquiry calls, admissions, discharges, referral sources, contact persons, sales staff responsible for admissions, and reporting such data as requested;
- \* Acting as a public relations representative;
- \* Supervise crisis response, reception and transportation staff.

#### **E. LEISURE ACTIVITIES**

Leisure needs are assessed via the psychosocial assessment and are coordinated and planned by the Counseling Department. Counselor Assistants assist the Counseling Department in planning and implementing activities for the client population. Psychosocial assessment, integrated summary and master treatment plan documentation will reflect assessed client needs and client response will be documented in progress notes.

#### **F. EDUCATIONAL SERVICES**

Adult client education functioning is evaluated as a part of the psychosocial assessment and when indicated, the person is referred to the community education services for remedial and other indicated services or to Vocational Rehabilitation Services for vocational needs. The services will be planned for discharge. When referral is made the following will occur:

- \* The staff assessment of educational\ vocational needs per the psychosocial assessment will be provided;
- \* A request for specific services will be stated for the client;
- \* Assistance by staff in the development of Individual Educational Programs will be offered;
- \* Documenting of referral to the adult education service will be made in a timely manner, legibly and accurately, in the client chart as appropriate.

#### **G. ADMINISTRATIVE AND OTHER SUPPORT STAFF**

The facility will be managed by a sufficient number of other administrative support staff to insure that services are delivered in a efficient and productive manner, the program is presented to the community in a positive manner and the internal business affairs are performed accurately and according to plan. The following staff will be available for the performance of this work.

##### Administrator

The Administrator has overall responsibility for the operation of the facility. The Administrator reports to the Regional Director of the Central Region and serves as a non-voting member of the Governing Body.

The Administrator must have knowledge of clinical services, administrative and marketing activities and have a minimum of five years of supervisory experience in the addictions/psychiatric treatment field.

##### Marketing Director

The Marketing Director is responsible for on-going contact with the community, directs the sales and other marketing activities and works to ensure a positive public image for the program. The position supervises the marketing staff. The individual reports to the Administrator.

##### Controller

The Controller is responsible for fiscal management of all facility programs and supervises business office personnel. The controller reports to the Administrator.

#### Business Office Staff

Business office staff assist the Controller in all functions of fiscal management of the facility.

#### Human Resource Coordinator/Administrative Assistant

The Human Resource Coordinator is responsible for oversight of Human Resource issues. This person acts as a consultant to all department directors and managers in relation to all issues concerning staff human resource management. This individual is responsible for oversight and storage of all personnel records. Advice and guidance is provided by the CRC Director of Human Resources.

#### Dietary Manager

The Dietary Manager works under the supervision of the Human Resource Manager and receives technical direction from the consulting Dietician. The person in this position has the following responsibilities:

- \* Supervision and appraisal of all dietary staff;
- \* Menu planning, to include special diets;
- \* Assisting with nutritional education of the clients;
- \* Monitoring special diets for clients.

#### Cooks

Under the direct supervision of the Dietary Manager, the cooks are responsible for:

- \* Preparing and serving meals according to the menu plan;
- \* Maintaining a clean and orderly environment in the kitchen and dining room, according to dietary policies;

#### Medical Records Manager

The Medical Records Manager works under the Supervision of the Administrator. Technical supervision is provided by the Medical Records Consultant. Responsibilities, with the assistance of a medical records clerks, are:

- \* Arranging for transcribing of client record data;
- \* Oversight of client record security;
- \* Obtaining appropriate releases of information;
- \* Providing information as requested to third party payers, insurance companies, referring therapists,
- \* Compiling reports on medical record services

#### Plant Operations Manager

The Plant Operations Manager works under the supervision of the Human Resource Manager. This individual supervises maintenance and housekeeping staff. Responsibilities are:

- \* Maintaining the heating, air conditioning, plumbing, electrical systems and the building structure;
- \* Maintaining the facility and grounds in a safe condition;
- \* Maintaining the cleanliness of the facility;
- \* Providing safety training for staff.

### **H. Consultants and Contract Services**

The following consultants and contract services are utilized to ensure the facility has adequate supervision and professional support for technical services.

### Registered Dietician

The registered dietician is responsible for:

- \* Acting as resource person for the Dietary Manager;
- \* Reviewing nutritional screening for accuracy and content;
- \* Designing, reviewing, approving and monitoring special diets for clients and their timely implementation;
- \* Reviewing and approving in writing all facility menus and the facility diet manual;
- \* Providing timely written reports and evaluations of the Dietetic Services to the Dietary Manager and Administrative Assistant
- \* Conducting randomly scheduled observations and assessments of meal serving;
- \* Providing in-service training for Dietary Staff;
- \* Reviewing food satisfaction surveys and demonstrating appropriate responses.

### Pharmacist

Pharmacy services are provided by agreement with contract pharmacy. The pharmacist is responsible for:

- \* Dispensing all medications for client use;
- \* Advising physicians regarding the choice of available drugs;
- \* Providing in-service training as needed;
- \* Participating in Drug Use Evaluation activities as requested;
- \* Providing input into the pharmacy policies and procedures annually and maintaining pharmacy procedures in accordance with state and federal agencies;
- \* Conducting inspections of medication areas;
- \* Insuring that medication orders are from authorized prescribers and that all telephone orders are from authorized prescribers.
- \* Developing a periodic review of the drug formulary;
- \* Supervising the review of the emergency box, replacing used emergency drugs immediately;
- \* Replacing discontinued drugs from the facility and notifying the facility of recalled medications;

### Dental Services

The need for dental services is identified by medical staff, and when indicated referral is made to the dentist of the client's choice. When referral for dental services occurs, the following is requested;

- \* Providing dental assessments;
- \* Completing dental work for clients, as indicated;
- \* Providing a follow-up report of dental services provided;
- \* Providing the client with post-dental instructions; as indicated.

### Laboratory and Pathology Services

Under the supervision of the Director of Nursing Laboratory services are provided by contract to include the following:

- \* Performing laboratory tests as ordered by the physician;
- \* Providing a written report of the above for the client record.

### Emergency Services

Under the supervision of the Director of Nursing and the Medical Director emergency services are provided through agreement with \_\_\_\_\_. Emergency services include:

- \* Providing medical, surgical and emergency evaluation/care as necessary;
- \* Providing a written report of the above for the client record.

### Radiology Services

Under the supervision of the Director of Nursing, Radiology Services are provided by \_\_\_\_\_ to include:

- \* Performing radiological examinations as ordered by the physician;
- \* Providing a written report of the above for the client record.

### Vocational Services

Vocational services are assessed and addressed by the counseling staff with ancillary services provided by the State of Texas Department of Vocational Rehabilitation. Referral will be made to this and other similar agencies when need indicates.

### Educational Services

Adolescent education is provided as discussed earlier in this document.

Referral for academic educational services will be made to the adult client's home community adult education service for completion of education when indicated.

### No available beds

Every attempt shall be made by the staff to contact other treatment resources that may have space available, a waiting list schedule will be maintained to ensure placement is made available.

### Medically or Psychiatrically Inappropriate

This category shall include all those who, following the triage work-up, are found to be medically or psychiatrically inappropriate. For those found to be a medical emergency, the facility shall notify the medical director or designee for assessment and/or referral.

For those resident clients whose psychiatric condition is sufficiently unstable the Consulting Psychiatrist will be notified and consulted concerning appropriate treatment. If the clients are considered an immediate danger to themselves and others, phone the police and notify on-call administration who shall provide oversight of arrangements for transfer as determined by the screening mental health agency.

### Financial Constraints

If the client is unable to meet the financial requirements for admission, all resources for obtaining financial assistance will be explored.

If after evaluation, no financial resources are available the client will be referred to a program which will accept the referral. Documentation of clinical and community resources is maintained by the Call Center Director.

**AUTHORIZATION  
BY PROPERTY OWNER**

I swear that I am the property owner of the property which is the subject matter of the attached Petition for Rezoning/Conditional Use Application, as is shown in the records of Walton County, Georgia.

I authorize the named below to act as Applicant in the pursuit of a Petition for Rezoning/Conditional Use Application.

Name of Applicant: Paul M. & Hilda Faye Duncan

Address: 398 GA Hwy 11, Monroe, GA 30655

Telephone: (770) 267-4604

Location of Property: 398 GA Hwy 11, Monroe, GA 30655 &  
422 GA Hwy 11, Monroe, GA 30655

Map/Parcel Number: C1400-00000-022-000 & C1400-00000-023-000

Current Zoning: A-1 Requested Zoning: \_\_\_\_\_

APD  
Property Owner Signature

Hilda Duncan  
Property Owner Signature

Print Name: PAUL DUNCAN

Print Name: Hilda Duncan

Address: 398 Hwy 11 Monroe Ga 30655

Address: 398 Hwy 11 Monroe, Ga.

Phone #: 770 267 4604

Phone #: 770 267 4604

Personally appeared before me and who swears that the information contained in this authorization is true and correct to the best of his/her knowledge.

CPR 11-12-13  
Notary Public Date

CParker 11-13-13

