



SANTA BARBARA COUNTY
DEPARTMENT OF
Behavioral Wellness
A System of Care and Recovery

M E M O R A N D U M

Date: July 8th, 2019
To: DMC-ODS Alcohol and Drug Providers
From: Santa Barbara County Behavioral Wellness *JLT*
Subject: Staff Credentialing and Licensing- Addendum
CC: ADP, QCM

Per the Department's Policy # 4.015- *Staff Credentialing and Licensing*, all contracted community-based organizations (CBOs) must utilize the *Service Provider Update Form* (<http://countyofsb.org/behavioral-wellness/asset.c/5178>) to report staffing changes and/or updates. The *Service Provider Update Form* must be completed and submitted, along with supporting documentation, by the supervisor or manager for the following reasons:

- Current employee changes position
- Current unlicensed employee change in category
- Current employee needs access to a new facility(s) and programs(s)
- Current employee no longer needs access to facility(s) and program(s)
- Employee takes a leave of absence
- Employee is terminated
- Current employee changes license or registration status
- Current employee changes name

As a reminder, employee terminations must be reported within 24 hours of the employee leaving. Please confirm that all pending services have been finalized in ADP Clinician's Gateway by the employee so that your agency can get paid for services rendered.

All *Service Provider Update Forms* shall be directed to BWELLQCMADP@SBCBWELL.org for processing. Please allow up to 5 business days for the request to be processed. Thank you for your collaboration.