## Steps to Completing ACBHCS Clinical/Quality Review Form

The purpose of the **Clinical Review** is to ensure that medical necessity is being met in an ongoing fashion. If there is no medical necessity, the client's episode is closed. The essential documents that must be in place are the Informing Materials Signature Page, an assessment, and a treatment plan. The purpose of the **Quality Review** is to assess a chart's compliance with Documentation Standards. This is accomplished via the Regulatory Compliance Tool. Use the tool to identify the items in the chart indicating whether the information is present (Yes), not present (No), or not applicable (NA). Compliance for adult charts is 90% and for children and youth charts 95%.

## **Clinical Review Items:**

- 1) Fill in today's date
- 2) Fill in client's full name
- 3) Fill in client's PSP #
- 4) Fill in the Provider Name in which the client's episode is opened
- 5) Fill in the clinician completing the Clinical/Quality Review Form
- 6) Fill in the Admission Date. The admission date is identical to the date the client's episode was opened in INSYST
- 7) Fill in the Review Period (Consult with CQRT Manual)
- 8) Check the Mental Health Services that are being authorize
- 9) Check the Treatment Services that are being authorized
- 10) Check the Service Necessity
- 11) Write a sentence indicating anticipated discharge date and aftercare plan
- 12) List the 5-Axis Diagnosis from current DSM. Primary diagnosis must be an "included" diagnosis
- 13) Describe the outcomes as a result of treatment in measurable terms
- 14) Describe the proposed interventions that will be provided, the frequency , and length of treatment
- 15) The clinician is the person responsible for the client's treatment.
- 16) The clinical supervisor is the person responsible for the clinical oversight of the clinician.
- 17) The CQRT Reviewer is the LPHA completing the form<sup>1</sup>

 Must be program supervisors/or their designees, trained in the CQRT process, authorized to represent/provide feedback to their program.

- Must be prepared to stay until ALL charts have been reviewed.
- Must provide 1 qualified representative for every 10 charts brought (i.e., 11-20 charts = 2 reps.; 21-30 charts = 3 reps.). Any exception to this ratio requires advance approval from the CQRT Chairperson.

<sup>1</sup> Criteria for CQRT Agency Representatives:

Must be licensed, waivered, or registered LPHA's (Licensed Practitioner of the Healing Arts) staff (see the Glossary of Terms in this Manual).

Must know their County staff identification number.