

CHART DOCUMENTATION CHECKLIST—ANNUAL

✓	Date Compl	Process – Timeline (standard)	Item	Dis-Allow?	Comment -- Indicate if F/U needed	F/U done
ASSESSMENT						
		B4 Reassessment	<u>Brief Screening Tool</u> = Mod – Severe	Yes		
		Assess-B4 1 st of EOD Mos (No sooner than prior mos)	<u>Informing Materials</u> w sig	No		
		Assess-Same as above	All Needed <u>Informed Releases</u> Re-written & Signed	No		
		Assess-Same as above	<u>Included Dx w Signs/Sx's</u> Criteria Documented	Yes		
		Assess-Same as above	For C/M indicated needed areas to be addressed: homelessness, medical needs, vocational, educational, etc.	Yes		
		Assess-Same as above	<u>Dx determined by LPHA</u> (Licensed or Waivered /Registered with Licensed co-sig)	Yes		
		Assess-Same as above	Doc: 1) <u>Signif. Impairments</u> or, 2) risk of, or3) EPSDT developmental risk.	Yes		
		Assess < 30 days	For C/M Doc that Ct's Sx prevent Ct from accessing needed comm support services or for child lack of ... (housing, medical, etc.) exacerbates Ct's Sx's.	Yes		
		Assess < 30 days	Tx will: 1) Decrease Signif Impairments; 2) prevent risk of deterioration; OR 3) allow child to develop appropriately	Yes		
		Assess-Same as above	<u>Cultural</u> (includes SOGI)/Lang/Phys Limit Collected & Addressed	No		
		Assess-Same as above	<u>CANS/ANSA</u> , after Assess and before Plan	No		
		Assess-Same as above	Risk past 90 days = <u>Safety Plan</u>	No		
		Assess-Same as above	Finalized w/ <u>LPHA signature</u> or Trainee with a Licensed LPHA co-sig	Yes		
		Assess-Same as above	No Planned Svcs b4 Assess	Yes		
		Assess-Same as above	<u>Informed Releases</u> Signed	No		
		Assess-Same as above	<u>Med Consents</u> Signed—New Forms	No		
PLAN						
		Plan- B4 1 st of EOD Mos (No sooner than prior mos)	All <u>Service Modalities</u> Listed with Frequency & Duration	Yes		
		Plan-Same as above	Each Svc Modal has <u>Detailed Interventions</u> w Freq & Duration	No		
		Plan < 60 days	For C/M Detailed Intervention indicates: Linkage and Monitoring of Ct's successful engagement in community support svcs for ... (housing, ed, voc, medical, etc.) will decrease Ct'sl MH Sx's of ...	Yes		
		Plan-Same as above	All <u>Objectives</u> are MH in nature, SMART w/ duration	Yes		
		Plan-Same as above	Finalized w <u>Staff Sig</u>	Yes		
		Plan-Same as above	Finalized w <u>MD Sig</u>	Pend		
		Plan-Same as above	Ct <u>offered copy, participated in & agreed</u> —Put in PN or narrative	No		
		Plan-Same as above	Finalized w <u>Ct Sign</u> or Doc why not	Yes		

CHART DOCUMENTATION CHECKLIST—ANNUAL CONT.

		Plan < 60 days	No Planned Svcs b4 Plan (Never Collateral-always disallowed)	Pend		
		Plan Updates when signif events—i.e. hospitalization, school suspension, placement at risk, s/l, h/l, other risk, etc.	Plan must be reconsidered for Update and acted upon as needed—doc in PN	Yes		
PROGRESS NOTES						
		PN < 5 days	<u>E-F time</u> in person only, for phone—indicate in <u>body of note</u>	Yes-time based codes		
		PN < 5 days	Presenting/Problem w update which MUST be directly <u>related to</u> an existing MH Obj	Yes		
		PN < 5 days	Staff Intervention Today detailed	Yes		
		PN < 5 days	Today's Client Response Detailed (including for Group)	Yes		
		PN < 5 days	Plan for span between next visit (homework, collaterals, referrals, etc.)	No		
		PN < 5 days	For Case Mgt best to indicate (especially if not in MH Assessment and Ct. Plan as recommended above in red): 1.) Need: i.e. homeless, unaddressed medical, jobless, etc. 2.) Reason: a.) Adult: MH Sx's prevent client from accessing and benefiting from community support for areas of housing, medical, etc (detail each) OR b.) Child: Homelessness, unaddressed medical, school problems, etc (each must be detailed) exacerbate Ct's MH Sx's of x, y, z (must be detailed) 3.) Purpose: c.) Successful C/M for housing, ed, voc, etc (must be detailed) will result in improvements in Ct's MH Sx's of x, y, z (must be detailed).	Yes (if not in Assess and/or Plan.)		
		PN < 5 days	No claiming for VM messages; faxing; non-tx report writing such as SSI disability; email or texting; scheduling; no shows; lock-outs when ct is in jail, juv hall, IMD, etc.; transporting Ct.; completing Brief Screening Tool; Non-SMHS svcs such as vocational, housing, payee, etc.	Yes		