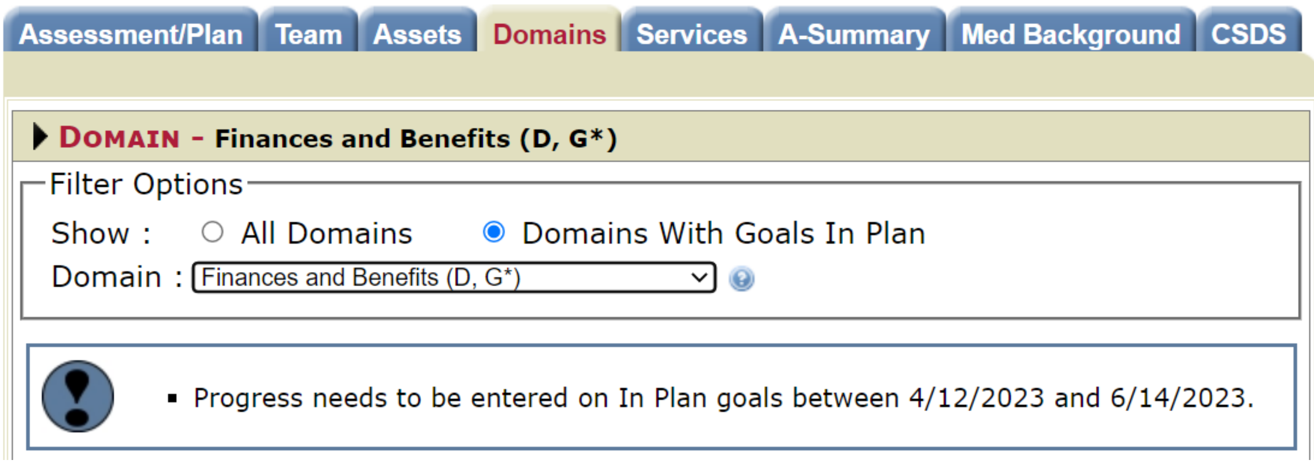
Entering 6-Month Update for an Assessment/Plan

It's time to enter a 6-month update for an assessment, below are some helpful hints to get a green check!

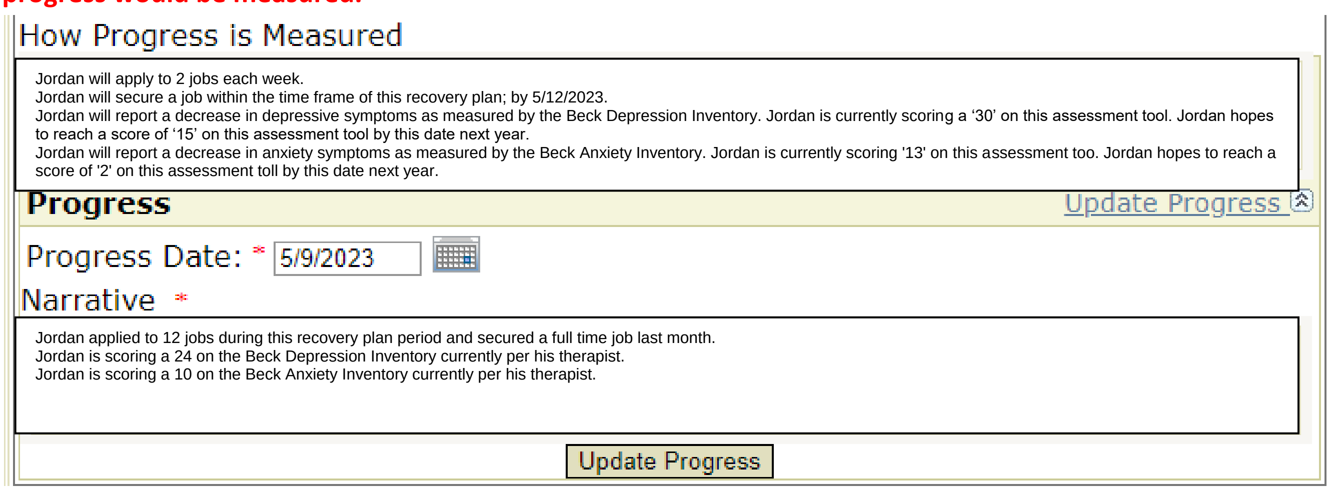
<u>Assessment</u>

What do I need to do to open a new Assessment/Plan?

In order to open a new Assessment/Plan, the SF must add goal progress to the goals on the current plan. There will be a * next to the G to let the SF know which goals are needing goal progress updates. Please note, this is different from a domain update!



Scroll down and click the Goals Section. Once there, scroll to the end to get to the **Progress Section**. Click "Update Progress" to add the goal progress update! **Best Practice: Speak about progress in correlation with how you indicated progress would be measured.**



****Once this is done for all the current goals, the SF will be able to open a new Assessment/Plan.**

Do I need updates under All 16 Domains?

1. Yes! QA expects a dated domain update under ALL domains. The module will automatically "date" your domain updates with the date you enter the domain update. This date can be changed if you have a more accurate date you would like indicated for the domain update.
   a. The domain narrative box is open for edits at this point, but SFs should use the "domain update" hyperlink to add a dated update. All historical information should be kept intact.

b. If the **domain has a current goal on the recovery plan**, QA expects to see a robust update for the domain update.

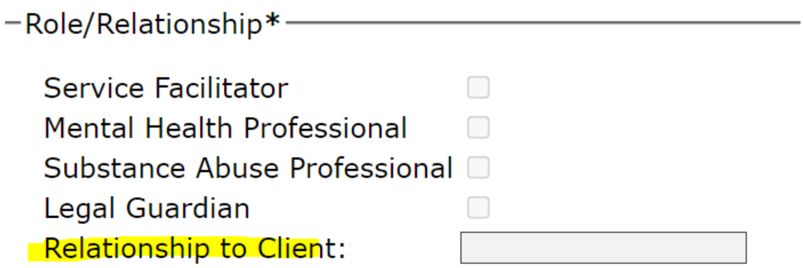
c. It is okay to say, “[client name] reported there were no updates under _______________ domain.” However, this should truly mean there are no changes to this domain. If there is any change in the status whether little or big, it should be noted in the domain update.

Does the SF need dated updates in the Strengths/Needs/Goal Sections of the Domains?

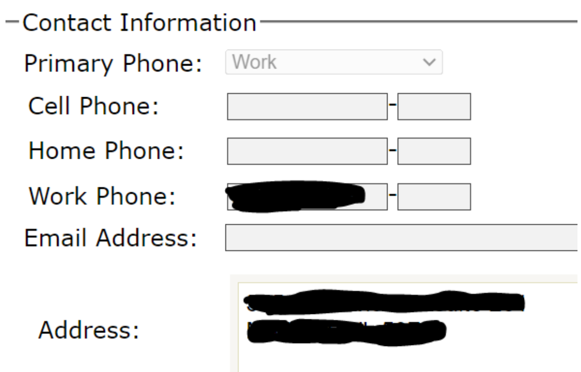
1. These boxes ARE open for editing, but QA does not comment in our tracking system if there are no updates in these sections. **HOWEVER**, SFs are expected to have current information in those sections if there have been changes since the last Assessment/Plan.
    a. Why? Because QA wants to ensure there is progress happening for the client. If QA consistently sees “No Change/Update.” then it appears CCS is not working for this client.

How do I ensure the “My Recovery Team” accurately reflects all individuals on the team?

1. Ensure the Team Tab is Updated – This is now a requirement before the Assessment/Plan can be approved. This tab should be reviewed and edited, as this is where the information is pulled for the “My Recovery Team” section on the Assessment/Plan. The SF/MHP/SAP is pulled from those who are submitting and approving the plan.
2. To ensure array providers/parents/guardians/natural supports are reflected in the “My Recovery Team” please add to the Team Tab. Please provide the **Relationship to Client** ensure it accurately reflects the person’s role on the team.


Role/Relationship*
Service Facilitator
Mental Health Professional
Substance Abuse Professional
Legal Guardian
Relationship to Client:

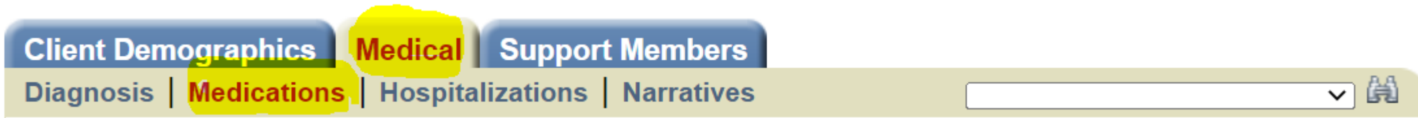
3. Additionally, please ensure the contact information for each team member is updated; this is a great way for other team members or Intake to have the correct contact information for the SF, MHP, client or parent/guardian.


Contact Information
Primary Phone: Work
Cell Phone:
Home Phone:
Work Phone: [redacted]
Email Address:
Address: [redacted]

4. If a SF needs a team member removed from the Team Tab, please connect with [Nick Nelson].

How does the Current Medication List get pulled?

1. SFs are responsible for ensuring all current medications (ALL prescribed meds – whether it is for mental health or physical health needs) are entered into the module **prior** to the Assessment/Plan being approved. **MHPs**, please ensure the medication list is updated prior to approval of the Assessment/Plan as this must be done in order for the medications to pull to the Assessment. If the Medication Domain does not align with the Current Medication List, QA will call the Assessment incomplete. (see Page 12 for more helpful hints regarding the Medications Tab & Medication List)



The Comprehensive Assessment does not need to be sent to the CCS Inbox since a client signature is no longer required. If QA calls a Comprehensive Assessment incomplete and the SF adds domain updates to the required domains, QA automatically is notified. If SFs need to add medications, please connect directly with QA staff to review.

Assessment Summary

What is expected for the Assessment Summary?

1. Summary of Information on Which Outcomes and Service Recommendations Are Based
   a. This text box should be a **robust summary** of the current Comprehensive Assessment. We are no longer requiring historical information.
   b. Analogy: The back cover of a book provides a quick summary of the book. QA expects this section to be a paragraph summary of the current assessment.
2. Desired Outcomes & Measurable Goals Desired by the Consumer – This box pulls all goals from the current Recovery Plan that have been identified as “Included in Plan”.
3. Significant Difference of Opinion – Do not put N/A nor leave blank! Remember to summarize any areas where not all team members agree. If there are none reported, please enter, "No significant differences of opinion."

SFs must send the Summary Page that outlines the assessment meeting date(s), attendees, and attendee signatures to the CCS Inbox. All attendees must sign!

Recovery Plan

What should be included in the Discharge Criteria?

1. This should be unique to the client. What does success mean to the client? What will life look like in their words when they will no longer need CCS?

What is required for action steps?

1. For all authorized services, the SF must have an action step under all corresponding goals that highlight the following:
   a. Array (i.e. ISD, MM, Psychotherapy, Psychoeducation, etc.)
   b. Agency Name (Which agency? It is okay to list the provider’s first name, but the SF must also include the agency’s name.)
   c. Role and Task of Provider (What is the provider doing to support the client in the corresponding goal? What is the unique task/responsibility of the provider?) Please ensure tasks correlate with allowable services describe in the authorized service array!

What should be captured in the “How Progress will be Measured”?

1. It is okay to have “self-report”, but it is important to list additional methods of measuring progress!
   a. Counting: Find a baseline and develop a target.
      i. Frequency, Duration, Intensity
   b. Scaling: Client can rate themselves on a scale (i.e. Feelings Thermometer).

c. Timelines: When does the client want to have met this goal? (i.e. 1 Month, 6 Months, 1 Year)

Is CCS working for a client?

1. CCS is not a lifelong program, but rather a program to support clients in achieving recovery and to increase success at functioning independently. QA is looking at a client's goal progress to see if CCS is working. Ensure updates capture what progress the client has or hasn't made with their goal. Use language that speaks to the indicators of how progress is being measured. What is hindering progress?

SFs must send the Recovery Plan Signature Page to the CCS Inbox.

QA Staff Contact Info

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