

QA Knowledge Assessment Survey #5

Vignette of Phone session with client and practitioner

Practitioner: Hi Eva! What have you been up to? How's it going?

Client: Hi Jane. Ok, I guess. Just put up some new curtains and got a new couch. Mother's Day is coming up. This will be the first Mother's Day without my Mom. It would be nice to be with my sister and my nephews, but they're up North and I won't be able to get up there to see them anytime soon. I don't really have anyone here. Just feeling really down and lonely right now I guess.

Practitioner: That sounds hard. Significant holidays or special occasions, like Mother's Day or a birthday can definitely make coping with loss and Depression even harder. Have you been going on your walks lately? I know you and I have talked before about how much walking makes you feel better and gets your mind off of negative things.

Client: Yes, actually. I've been dog-sitting my neighbors 2 dogs so I've had to walk them at least three times a day. I just walk them as long as it takes for them to go to the bathroom, but maybe I should go for longer since the fresh air really does make me feel better. Being around the dogs has been nice too. They're sweet, and I don't feel completely by myself.

Practitioner: Being around pets or animals can also be a helpful strategy for coping with Depression and sadness.

I know before you've talked about the urges you get to use in those moments when you're really missing your Mom. Have you been experiencing any of that lately?

Client: Here and there I have thoughts of looking for C.J.'s number, the guy I used to score from, but I don't. I've been trying to get to meetings. I haven't used any Speed since April.

Practitioner: That's awesome Eva!

Client: Thank you! It's not easy. Day to day life is hard. Just trying to take it one day at a time.

Practitioner: That make sense. And what about any thoughts or plans to hurt yourself or anyone else.

Client: No, I'm not experiencing anything like that.

Practitioner: Ok. So last time we met I was going to show you that grief-focused meditation I found. Since we still have some time, can we try it now?

Client: Ok.

Practitioner: Alright, are you sitting comfortably?

Client: Yes

Practitioner: First, slowly, breathe deeply, in and out. Relax and settle, coming into a present-moment experience. What is really happening to you here and now?

Now bring to mind a personal loss. This could be the recent death of a friend or relative or a loved one; it could be a loss you've been carrying as a burden for a long time. It's not something you've read about or something at a distance or abstract, but something personal, a person or experience or aspect of your life.

What bodily sensations do you notice? Do you feel grounded? Spacey, tight, hollow, full, edgy, dull, squirmy? What do you notice? Don't interpret, just feel. What is your body saying to you right now?

(Continues to guide client through the grief-focused meditation)

How was that experience for you, Eva?

Client: It was good. There's like this peaceful vibe I'm feeling right now. It also gave me a little bit of comfort.

Practitioner: Do you think this is something you could practice at home or outside of our meetings?

Client: Maybe, yeah.

Practitioner: Ok, great. I'll send you some links for some meditation sites that have similar kinds of guided meditations. So why don't we see how practicing at home goes and talk again next week? Can we do May 10th at 2:00?

Client: Sounds good! See you next week.

Sample Progress Note of Session (GIRP format not required by LACDMH)

Claimed – H0046SC (Individual Psychotherapy delivered by phone for 41 minutes)

G – Met with client via telephone due to COVID-19 safety protocols for the purpose of providing individual therapy to assist with increasing healthy coping skills for managing Depression/Grief.

I – Reviewed client's imminent stressors/mental health barriers. Actively listened to client share regarding how she's coping with reported current feelings of sadness, loneliness and grief in the wake of the upcoming Mother's Day holiday and provided empathic responses. Assisted client in identifying coping strategies that have been helpful. Engaged client in a CDA oriented process. Also, engaged client in a guided grief-focused meditation to assist with coping with her sadness.

R – Client reported doing some decorating in her apartment, and that she had been dog-sitting her neighbors 2 dogs. Client also expressed having a difficult time due to Mother's Day coming up and feeling sadness and grief over the loss of mother (due to cancer) less than a year ago. Client was open and receptive to CDA oriented process and guided meditation with writer. Client agreed to stay consistent with weekly sessions as scheduled. Client reported at this time that she remains abstinent from methamphetamine. Client contracted to safety, denied any HI, SI, or plan. Client was receptive to receiving resources.

P – Client re-scheduled for next appointment on May 10th at 2:00 pm to review needs, and progress in treatment.

QA KNOWLEDGE ASSESSMENT SURVEY # 5 Questions

Question 1. Which of the following is true about writing a Progress Note?

- A.** The progress note should document everything that occurred in the session
- B.** Only information that is relevant to Treatment Plan Objectives and Interventions should be documented
- C.** As long as documentation in the Progress Notes describes that a Specialty Mental Health Service was provided and the service was medically necessary it is reimbursable
- D.** As long as the Progress Note provides a succinct but clear description of what occurred in the session, it is acceptable
- E.** Documenting details, such as the client redecorating her apartment clearly helps illustrate client's level of functioning

Question 2. If you were to document the session described above, what would be most important to consider in writing your note, from a QA perspective?

- A.** Ensuring that everything that took place in the session is documented in specific detail so that the reader can understand in the best possible way what actually happened in session
- B.** Describing the interventions provided and responses of the client in a way that demonstrates the clinician's fidelity to the evidenced based model being utilized, and the strong therapeutic relationship between the client and clinician
- C.** Providing information that summarized concisely the interventions provided, conveying relevant aspects of client care, including documentation that supports medical necessity for the service, the response the client had to the interventions, and also any information that would result in additional treatment plan objectives
- D.** Utilizing a format that structures the note

Question 3. Which of the following is TRUE regarding the sample Progress Note above:

- A.** Technical terms such as "imminent stressors/mental health barriers" and "CDA oriented processes" are professional and specific terms that would be clearly understood by any mental health professional or practitioner viewing the clinical record
- B.** Technical terms such as "Imminent stressors/mental health barriers" and "CDA oriented processes" need to be explained or substituted with plain language in order to clearly describe what's going on with the client and the interventions being provided in a way that can be easily be understood by all that may be viewing the clinical record
- C.** Technical jargon, such as abbreviations (e.g. SI, HI), usually is a good practice because it conveys clear and concise information that is well understood by other professionals

Question 4. Which of the following is TRUE about the sample Progress Note above:

- A.** Based on what was said in the vignette, the Progress Note could have better documented the relevance of the client's dog-sitting to her mental health condition
- B.** The Progress Note did not specify a reimbursable intervention that was provided therefore is not reimbursable
- C.** Some portions of the note could have contained more concrete descriptions rather than vague phrases (for example, "Client was receptive to receiving resources") so that the clinical relevance could be better understood
- D.** The Progress Note was too short and did not contain enough clinically relevant information
- E.** A and C