## SUPPLEMENTAL CRTP CHART REVIEW TOOL

Last Revised 08/07/2025

For Review of Crisis Residential Treatment Provider (CRTP) Clinical Records, in Addition to Full Chart Review Tool

Date of Review: Legal Entity Name: Legal Entity Number:							
Provider/Program Name: Prov		Provider	rovider Number Name o			me of Reviewer:	
Client ID or Assigned # for Client Record: Review		Review P	Period: Start Date			End Date	
	REQUIREMENT		YES	NO	N/A	COM	IMENTS
As	ssessment/ Diagnosis						
1.	The mental health assessment was completed:						
	<ul> <li>For children under the age of 21, immediately after arrival a within 24hrs of admission.</li> </ul>	nd signed					
	b) For adults (age 21+), within 72hrs of admission.						
2.	The mental health assessment includes social support skills, currer psychological, educational, vocational, other functional limitations a building (e.g., meal planning, budgeting skills).						
3.	A suicide risk assessment was completed at admission and update clinically indicated, with evidence of constant visual observation for presenting with passive suicidal ideation?						
Care/Treatment Plans							
1.	The care plan was reviewed and signed:						
	a) For children under the age of 21, within 24hrs of admission.						
	b) For adults (age 21+), within 72hrs of admission.						
2.	The care plan contained all the following elements: statement of sp treatment needs and goals, description of specific services to addressed identified treatment needs, anticipated length of stay needed to accidentified goals, and methods to evaluate the achievement of these	ess complish					

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	REQUIREMENT	YES	NO	N/A	COMMENTS		
3.	There is documentation in the clinical record that the care plan is reviewed at least once a week by the CRTP staff and client.						
	*NA, if client was discharged prior to weekly review period.						
4.	When appropriate, the CRTP arranged for clients to attend community programs, which could not be met by the facility.						
	a) If so, these needs were identified in the treatment/rehabilitation plan.						
Pr	Progress Notes						
1.	At minimum, there is one daily progress note for each date the client was in the program, documenting the specific services provided by CRTP staff.						
	a) If yes, do the daily notes clearly support the clinical relevance of the client's participation in the CRTP?						
2.	Do the daily notes include specific services provided, observations of client's behaviors, interventions related to target behaviors, client's participation and response to each service provided?						
Me	Medication Support Services						
1.	A psychiatric medication consultation was completed by a Psychiatrist:						
	a) For children under the age of 21, within 24hrs of admission.						
	b) For adults (age 21+), within 72 hours of admission.						
	If the requirement is not met, is there documentation supporting the delay?						
Di	Discharge						
1.	There was a written discharge summary prepared by CRTP staff and the client that included an outline of services provided, goals accomplished, reason and plan for discharge, and referral follow-up plans.						

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ADDITIONAL COMMENTS/NOTES			