



Clinical Records Staff: **Rose Esquibel, Director** Phone: (213) 739-6335 Fax: (213) 739-6298
Jen Hallman Phone: (213) 738-3770 Fax: (213) 381-8386
Yvonne Mijares Phone: (213) 738-2157 Fax: (213) 381-8386

Important Reminder

Clinical focus should not be on a form but the purpose of the form and the corresponding information and documentation to address the purpose. This focus should help guide staff regarding the amount of detail needed in the documentation to satisfy the purpose of the form.

OBSOLETE FORMS & NEW

MH 678 - ADULT SHORT ASSESSMENT FORM

NEW FORM AVAILABLE ON INTERNET (http://dmh.lacounty.gov/ToolsForClinicians/clinical_forms.html - Assessment)

DMH Official Form Usage

Directly Operated Clinics: *must* use this form, when applicable, in its original format.

Contractors: DMH Required Clinical Record Form; in paper records, the form must be used in its original format, when applicable; in electronic records, all data elements on the form are required and the printable version must have the data elements in the same sequence as the DMH form.

It is becoming increasingly important to ensure that documentation supports clinical dispositions and other determinations made regarding client care. It was determined by the Department that the Single Contact Summary Note did not adequately support the decisions made and the diagnosis identified for the client. For this reason, the **MH 549 Single Contact Summary Note is now obsolete** which means this form should no longer be used.

- For children's programs currently using the Single Contact form, the Child/Adolescent Short Assessment should be used instead of the Single Contact form.
- For adult programs currently using the Single Contact form, a new Adult Short Assessment has been created and should be used instead of the Single Contact form.

The same process should occur for the opening and closing of an episode when using the short assessment forms but staff are now better prompted to ensure enough information is gathered and documented to support the diagnosis given and the disposition made.

Short Assessment forms, both the Child Adolescent and the new Adult, allow for the same day opening and closing of an episode or the opening and closing of an episode within two months. These episodes using the short assessment forms could include the provision of linkage and referral services or brief subsequent contacts for activities to ensure linkage has occurred. The short assessment forms may be used to assist in determining which Mental Health Program and/or services are most appropriate for a client. However, a full Initial Assessment would need to be completed in order to provide those services

Clinicians may choose to use the Short Assessment forms instead of an Assessment Addendum to update or verify information on an Initial Assessment that was done previously.

Purpose of the Short Assessment Forms

To provide sufficient assessment information on a client in order to diagnose the individual, open an episode, provide linkage and referral services and brief follow-up services, if indicated by the short assessment. The short assessment allows for the collection of sufficient information to determine appropriate referrals whether to outside agencies or to another DMH mental health program for a more thorough assessment and treatment. It does NOT gather sufficient information to support the initiation or provision of on-going services.



THE NEW ADULT SHORT ASSESSMENT FORM - MH 678

CAUTION: While the new adult short assessment form has all the required elements of an Assessment, it lacks the detail and justification that is critical for linking mental health symptoms/behaviors to the need for on-going treatment services (particularly around services such as COD and housing services). For this reason, Quality Assurance staff believe that the risk of audit exceptions would be very high if this form were used to support on-going services. If treatment services are to be provided, an Adult Initial Assessment must be completed in order to support the need for services.

The below form is also **obsolete** and should be replaced by the MH 678 Adult Short Assessment:

- MH 628 NCR Adult Short Assessment

Key Things to Remember:

- This form must be completed by an Authorized Mental Health Discipline (AMHD)
- Enough information to support a diagnosis must be gathered and documented on the form
- All sections must be completed; if information is unknown, document that it is unknown by the client
- MH 659-COJAC should always be used along with this form; the MH 633 Supplemental COD Assessment does not need to be completed
- This form is NOT to be used for treatment services (such as individual therapy, group rehab, Co-Occurring Disorder groups); if it is determined that the client will be seen for treatment services, an MH 532 Adult Initial Assessment and MH 633 Supplemental COD Assessment (if applicable) must be completed for adults
- If a Triage form or other supporting documentation already exists for a section, reference the form and the date it was completed instead of repeating the information on the Adult Short Assessment
- Information on the Adult Short Assessment may be used to complete the Adult Initial Assessment at a later date; information would not need to be re-written on the Adult Initial Assessment. It would suffice to reference and verify information already on this form similar to what is done with the Triage forms.

Retention, Filing and Implementing the form for Directly-Operated Programs:

This form is to be placed in the Assessment and Plans section of the Clinical Record and retained according to Clinical Record retention guidelines. Effective as of the date of this Clinical Records Bulletin, the new Adult Short Assessment form should be used when appropriate.

Implementing the form for Contract Programs:

Contract providers should implement this form, if applicable, as soon as they are able but no later than six (6) months from the date of this Bulletin.

References:

For Contract Providers with Electronic Records who want additional information regarding clinical forms in an electronic record, please see the March 30, 2011 joint memo from CIOB and QA regarding Clinical Information in Paper Clinical Records and Electronic Health Record Systems .

If you have questions regarding the information in this Clinical Records Bulletin, please contact your Service Area QA Liaison.

c: Executive Leadership Team
District Chiefs
Department QA Staff

Program Heads
Provider Record Keepers
QA Service Area Liaisons

TJ Hill - ACHSA
Nancy Butram - RMD

DID YOU KNOW??

All Clinical Record Bulletins can be found on-line at:

http://dmh.lacounty.gov/ToolsForAdministrators/Agency_Administration/clinical_records_bulletins.html