

Partners in Recovery

POLICY AND
STANDARDS

*Applicable Arizona Department of Health Services Behavioral Health Licensing Rule(s):
R9-20-209 Assessment and Treatment Plan*

Policy Name: Assessment and Treatment Plan

Policy Number: PRG - 1000

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Date

Cross Reference(s)

Provider Manual Form 3.9.1, Behavioral Health Assessment and Service Plan

Policy Statement

Partners in Recovery has an established standard for assessment and treatment planning for a consumer receiving care in a Direct Care Clinic (DCC).

Purpose

Describe process of conducting and documenting assessment and treatment planning.

Scope

Partners in Recovery Direct Care Clinics.

Key Terms

Should the reader need to inquire as to the definition of a term used in this policy, the Partners in Recovery Key Term Glossary can be found in the back of the Policy and Procedure Manual.

Standards

- I. Responsibilities
 - A. Reference to “consumer” in all subsequent policy standard includes all applicable situations in which a consumer’s guardian or agent, if the consumer is a child, the consumer's parent, guardian, or custodian; or an individual requested by the consumer or the consumer's guardian or agent or, if the consumer is a child, by the consumer's parent, guardian, or custodian.
 - B. A Behavioral Health Professional (BHP) or a Behavioral Health Technician (BHT) under the supervision of a Behavioral Health Professional will conduct and document the assessment and treatment planning. Assessment documentation by a BHT is to be reviewed by a BHP for accuracy. This review is noted via a signature, professional credential or job title, and date signed in the record.
- II. Assessment
 - A. An assessment is completed prior to initiation of treatment.
 - B. A previous documented assessment completed by a BHP or BHT not affiliated with Partners in Recovery may be used as the assessment of record if:
 - 1. It was completed within 12 months prior to the admission;
 - 2. Meets all standards of this policy; and
 - 3. Is updated by a Partners in Recovery BHP/BHT to include any changes to the consumer's condition since the assessment was completed.
 - C. Assessment is conducted with the participation of the consumer and any individual required by federal or state law as well as an individual requested by the consumer.

- D. A BHP/BHT conducts an assessment (Provider Manual Form 3.9.1, Behavioral Health Assessment and Service Plan) which address a consumer's:
 1. Presenting issue;
 2. Alcohol and other drug (AOD) abuse and dependence history;
 3. Co-existing/occurring disorder;
 4. Physical/medical condition and history;
 5. Applicable legal history, including custody, guardianship, pending litigation, court-ordered evaluation (COE); court-ordered treatment (COT), and criminal justice record;
 6. Family history; and
 7. Behavioral health treatment history.
- E. The consumer is referred to a medical practitioner if there is evidence that the consumer's behavioral health issue may be related to a medical condition.
- F. The assessment documentation contains:
 1. Date of the assessment
 2. Description of the consumer's presenting issue;
 3. Identification of the consumer's behavioral health symptoms and of each behavioral health issue that requires treatment;
 4. Description of the medical symptoms reported by the consumer and medical referrals needed by the consumer, if any;
 5. Recommendations for further assessment or examination of the consumer's needs;
 6. Recommendations for treatment needed by the consumer;
 7. Recommendations for ancillary services or other services needed by the consumer; and
 8. Signature, professional credential or job title, and date signed of the staff member conducting the assessment.
- G. The assessment is documented in the consumer record within seven (7) days after initiating or updating the assessment, except for a consumer receiving behavioral health services in a crisis situation. For consumers receiving behavioral health services in a crisis situation the assessment is documented in the consumer record before the individual's or consumer's admission, transfer, or referral.
- H. A consumer's assessment information is reviewed and updated when additional information that affects the consumer's assessment is identified and at least once every twelve (12) months. This review and update, as needed, is documented in the consumer record within seven (7) days after the review is completed.

III. Treatment Plan Development

- A. An initial Treatment Plan is developed by a BHP or BHT no later than thirty (30) days after the consumer's first visit with a BHP or a BHT, is based upon the initial assessment and if applicable, the consumer's physical examination with the participation of the consumer.
- B. The Treatment Plan must be completed and documented before a consumer receives counseling; is admitted to an inpatient facility or residential agency, unless a consumer's presenting issue requires immediate admission; or receives treatment of the consumer's behavioral health issue with medication.
- C. The Treatment Plan includes the following elements:
 1. Presenting issue;
 2. The behavioral health service(s) or ancillary services to be provided to the consumer until completion of the Treatment Plan;
 3. Identification of individuals or entities to provide behavioral health services or ancillary services;
 4. One or more treatment goals;
 5. One or more treatment methods and the frequency of each treatment method;
 6. The first Treatment Plan review date, refer to *policy Standard IV.A.* for required timeframe;
 7. If a discharge date has been determined, the treatment needed after discharge;
 8. The signature and date signed, or documentation of the refusal to sign, of the consumer; and
 9. The signature, professional credential or job title and date signed of the staff member developing the Treatment Plan; and co-signature of reviewing BHP, as applicable.
- D. The completed and signed Treatment Plan is entered in the consumer record within seven (7) days of completion.

IV. Treatment Plan Review and Updating

- A. First review of the Treatment Plan is completed and documented by a BHP or BHT no later than ninety (90) days after the consumer's first visit with a BHP or a BHT, is based upon the initial assessment and on-going assessment of the consumer and with the participation of the consumer.
- B. The Treatment Plan review includes the following elements:
 1. Presenting issue;
 2. One or more treatment goals;
 3. One or more treatment methods and the frequency of each treatment method;

4. The date of the next Treatment Plan review; refer to policy *Standard IV.D.* for required timeframe;
 5. If a discharge date has been determined, the treatment needed after discharge;
 6. The signature and date signed, or documentation of the refusal to sign, of the consumer; and
 7. The signature, professional credential or job title and date signed of the staff member developing the Treatment Plan; and co-signature of reviewing BHP as applicable.
- C. The completed and signed Treatment Plan is entered in the consumer record within seven (7) days of completion.
- D. Subsequent Treatment Plan review and updates are conducted on an ongoing basis at least annually or more frequent if:
1. Indicated by the review date of the current Treatment Plan;
 2. A treatment goal is accomplished or changes;
 3. Additional information that affects the consumer's assessment is identified;
 4. A consumer has a significant change in condition or experiences an event that affects treatment; and
 5. If the consumer is receiving opioid treatment according to Article 10, at least once every three months during the consumer's first year of opioid treatment and at least once every six months after the consumer's first year of opioid treatment; and
- E. Treatment Plan review includes all elements cited in policy *Standard IV.B.* and each review is completed, signed and entered in the consumer record within seven (7) days of completion of the review and update.
- V. Treatment Plan to Resolve or Address a Crisis Situation
- A. Documented before the date of the individual's or consumer's admission, transfer, or referral.
 - B. Includes the name of the BHP who reviewed the Treatment Plan and the date and time of the review.
- VI. Treatment Plan Implementation
- A. A consumer's Treatment Plan is implemented and treatment is based upon the consumer's Treatment Plan.
 - B. When a consumer's Treatment Plan is reviewed because of reasons cited in policy *Standard IV. D.*, a BHP or BHT reviews the consumer's progress in treatment and determines whether the consumer needs to continue with treatment or to be transferred or discharged.

Associated Partners in Recovery Direct Care Clinic Forms & Attachments

Individual Service Plan Part D

Assessment form Part E

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