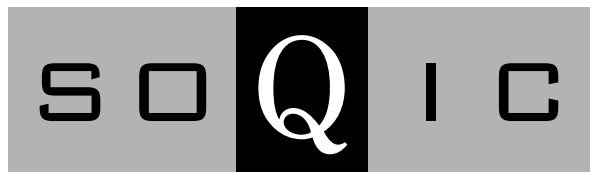


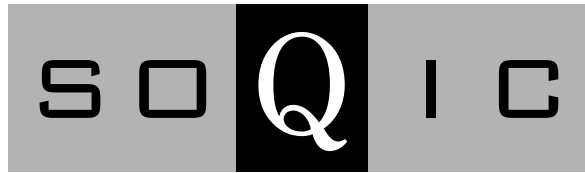
Solutions for Ohio's Quality Improvement and Compliance



Standardized Documentation

User Manual

October 2004



Standardized Documentation Initiative

Developed by the SOQIC Standardized Documentation Team
Compliance Review by the SOQIC Compliance Review Team

For more information and updates on this initiative, visit the SOQIC Website at:
<http://www.state.oh.us/initiatives.soqic/soqic.home.html>

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Section 1

Simplifying and Standardizing the Mental Health Treatment Process

Introduction

Solutions for Ohio's Quality Improvement and Compliance (SOQIC), is a statewide initiative created to address multiple compliance and service delivery system challenges that exist across Ohio's public mental health system. This collaborative undertaking brings together representatives of all components of the mental health system, including the Ohio Department of Mental Health, the Ohio Department of Alcohol and Drug Addiction Services, Boards, Provider Agencies, consumers, and advocates to identify how to improve and integrate quality, consistency, accountability and cost efficiency into all levels of Ohio's public mental health system.

The SOQIC standardized Documentation System is designed to address these many challenges with a set of standardized and integrated clinical forms and processes that accommodate the many certification, accreditation and payer requirements that providers of mental health services must meet.

Background on the SOQIC Initiative

Traditionally, individual mental health provider agencies across the state of Ohio have established very diverse types of forms and processes to collect clinical and non-clinical information. While this opportunity to establish agency-specific documentation helps to meet the individual documentation needs of each organization, it has also led to examples of inefficiency, non-compliance, and an inability to compare useful data among agencies throughout the mental health system. Additionally, an enhanced compliance environment, driven by the 1996 HIPAA Act and the False Claims Act, and the renewed emphasis on the recovery-focused Rehab Option for Medicaid services, created a need for a new level of clinical documentation.

The SOQIC initiative recruited statewide representatives of Provider Agencies, Boards, clients, families, advocates and ODMH staff to collaborate and develop the best solutions to support primary clinical and medical/somatic documentation processes. Their mission was to:

Design, develop and implement at the State, Board, and local provider levels a standardized, consumer-centered, compliant, cost effective and accessible mental health delivery system.

The SOQIC team developed several guiding principles that are critical to the mental health treatment process, and must be inherent in any solution. They identified that solutions must be:

- Recovery-based
- Client-centered
- Compliant with payer and accreditor rules and regulations
- Capable of demonstrating quality of care

Applying these principles, the SOQIC Standardized Documentation Team developed a standard and integrated medical record forms toolset to support enhanced compliance and quality for Ohio's public mental health delivery system.

Background on the SOQIC forms

The SOQIC forms are the outcome of research, collaborative teamwork, input from national consultants and consumers and feedback from Provider

Agencies who participated in two pilots to test the forms.

The SOQIC Standardized Documentation Team was composed of representatives from:

- Local Provider Agencies
- Boards
- ODMH
- ODADAS
- Advocate and Consumer organizations
- Two national consultants

A compliance review was also provided by the Compliance Review Team (CRT) that was composed of an equal number of representatives from Provider Agencies, Boards, ODMH, Consumer Organizations and Legal Counsel. A HIPAA Consultant, Corporate Compliance Consultant, National Accreditation Consultant and an ODADAS liaison were also members of this team.

All forms developed were designed to accommodate ODMH and ODADAS Documentation Standards, HIPAA rules, Medicaid/Medicare standards, and JCAHO, CARE, and COA accreditation standards. The forms encompass all of the most common clinical documentation needs, including Demographic Information, Crisis Assessment Intervention and Plan, Diagnostic Assessment, Diagnostic Assessment Updates, Individualized Service Planning, Initial Psychiatric Evaluation, Progress Notes, and the Discharge/Transfer Summary.

About the SOQIC Manual

This manual provides an overview of this initiative, the forms and instructions for use, and supporting material to enable Providers to:

- Use the SOQIC forms to document the individual client's treatment process effectively and efficiently
- Be in compliance with rules, regulations and accreditation standards

- Apply their good clinical practices to deliver quality, recovery-based mental health services

The term *client* is used throughout this manual, based on feedback from the Consumers, Families, Advocates and OLRS Steering Team (CFAST). It is recognized that different preferences exist surrounding the use of certain terms. While some prefer to use *consumer*, others prefer to use *client* or *patient*. Additionally, reference to *person-centered* is used where appropriate and *client-centered* is used when more specificity helps to provide more clarity. In cases where the client is a child or adolescent, the convention of client/family is used, recognizing that children and adolescents will participate in a treatment process in the context of their family.

How the SOQIC Manual is Organized

The SOQIC manual is organized in five sections:

Section 1: Simplifying and Standardizing the Mental Health Treatment Process.

Contains background information about the SOQIC effort, the Standardized Documentation Teams (SDT/CRT), the forms development process, and the benefits SOQIC forms provide.

Section 2: Satisfying Reimbursement and Compliance Requirements.

Provides specific information regarding Medical Necessity and the Rehab Option, payer, signature and compliance requirements.

Section 3: Demonstrating Quality of Care.

Includes a discussion of a client-centered Recovery/Resiliency approach to treatment, the use of the Ohio Consumer Outcomes System to support the process, and guidance regarding the development of the Individualized Service Plan.

Section 4: Using the SOQIC Forms.

Provides a sample of each form, guidelines for the use of each form, and instructions for completion of the forms, including definitions for each data field.

Section 5: Case Study Examples.

Includes a "client" case study that illustrates how

many forms can be used to document appropriate clinical information.

Appendix:

Contains supporting reference information.

The Benefits of Standardized and Integrated Documentation

The development and use of standardized clinical documentation serves to benefit members of the Mental Health and AoD Service Delivery System at a variety of levels and in a variety of ways, including:

- **Enhanced clinical care with a client/family centered recovery/resiliency approach**

The forms support and demonstrate client/family centered approaches, input and involvement of the client/family in the treatment process, and services that build on client/family strengths. They incorporate the core elements of recovery/resiliency, and client and provider accountability for participation in the treatment plan. They also demonstrate collaboration between multiple providers of services and clients/families.

- **Efficient completion of documentation by providers**

The SOQIC documentation facilitates information gathering, assessment and treatment planning. It consolidates rules/requirements and lessens duplicative language and paperwork, thereby affording Providers more time to focus on the client and identify the services needed to enhance treatment and recovery. By reducing redundant processes, clients provide information only once unless clinically necessary, thus simplifying their experience. Additionally, by decreasing the time spent on paperwork, clinicians have more time to spend with clients, enhancing access to services.

- **Reduced compliance risk for Provider Agencies**

All forms were developed and designed to accommodate ODMH and ODADAS Documentation Standards, HIPPA rules, Medicaid/Medicare standards, and JCAHO, CARE, and COA accreditation standards to ensure financial and clinical compliance, to support objective consistent reviews/audits and to decrease the risks of federal interventions connected to fraud and abuse.

- **Improved cost-effectiveness**

The SOQIC documentation system ensures that services are sufficiently documented to meet reimbursement standards and reduces the opportunity for rejection from auditors and payers, mitigating the risk of federal fines. It also reduces the amount of time spent by local Provider Agencies developing and revising forms, and developing and delivering training. By decreasing the time spent on paperwork, clinicians have more time to spend with clients, enhancing productivity. Additionally, the SOQIC forms will be available as simple electronic forms which will simplify documentation processes.

The SOQIC Integrated Forms Set

The SOQIC forms were designed to support the most common and important clinical documentation requirements. The SOQIC forms include:

- Demographic Information (*Sample*)
- Health History (*Sample*)
- Mental Status Exam (*Sample*)
- Lethality Assessment (*Sample*)
- Crisis Intervention Assessment and Plan
- Diagnostic Assessment (Adult)
- Diagnostic Assessment Update (Adult)
- Diagnostic Assessment (Child/Adolescent)
- Diagnostic Assessment Update (Child/Adolescent)
- Individualized Service Plan
- Individualized Service Plan Revision /Review

-
- Psychiatric/Pharmacological Management Plan
 - Initial Psychiatric Evaluation
 - Medical Somatic Psychiatric Progress Note
 - Medical Somatic Nursing Progress Note (Short Version)
 - Medical Somatic Nursing Progress Note (Long Version)
 - Individual Progress Note
 - Community Psychiatric Supportive Treatment Progress Note (Short Version)
 - Community Psychiatric Supportive Treatment Progress Note (Long Version)
 - Group Progress Note
 - Partial Hospitalization Progress Note
 - Transfer/Discharge Summary
 - AoD Specific Forms:
 - Intensive Outpatient Program [IOP] (*Sample*)
 - Level of Care Adult (*Samples*)
 - Level of Care Children/Adolescent (*Samples*)
 - Client Attendance Verification (*Sample*)

Implementation

Using a Leadership Approach, the first year of implementation will focus on training, learning, communicating, using the forms, developing an electronic set of forms, establishing a user group, sharing agency operational models, and on-going monitoring and updating of the forms. Technical assistance can be addressed through the SOQIC website.

Maintenance and Updates of the SOQIC Forms

A process has been established to update the forms to support changes in regulations, rules and accreditation standards. There is also a process for evaluating the effectiveness of the forms as they are used by Providers across the state. Provider feedback on what's working, what's unworkable and what's missing is welcomed.

For additional information visit the SOQIC Website at: <http://www.mh.state.oh.us/initiatives.soqic/soqic/home.html>