## ILLINOIS MENTAL HEALTH COLLABORATIVE FOR ACCESS AND CHOICE

## **FY16** Clinical Practice and Guidance Review Tool

The purpose of this review is to assure adherence to clinical standards and assess   Item Score		
quality items through the provider agency's clinical documentation and practices. This includes a determination of clear and consistent inter-connection among the diagnosis,		Record Review
1 1 1775		(Total of all scores for
assesse	to needs, 111 provisions, and actual services and interventions derivered.	item/number of
		records
	LUDVICAND DUCCODD DEVIANA	reviewed)
	MEDICAID RECORD REVIEW	1, 3, 5, N/A
1	The current Individual Treatment Plan (ITP) reflects the individual's assessed	
	needs and has been updated per consumer's progress and changing needs.	
2	There is evidence of changes in or re-evaluation of treatment needs and/or	
	services during periods of sudden changes in functioning or symptoms.	
3	Treatment is consumer driven as evidenced in clinical documentation.	
4	Treatment provided builds on the identified strengths of the consumer.	
5	All treatment needs as identified on the Mental Health Assessment are being	
	addressed in the ITP <u>and</u> in the actual service <u>and</u> are prioritized based on	
	•	
	importance/severity.	
6	There is congruence between the information in the Mental Health Assessment	
	and the Functional Assessment/ LOCUS/Ohio/Columbia Scales.	
7	There is evidence in the clinical record that primary health care coordination is	
	occurring with the primary physical health care provider.	
8	There is documentation that the provider is assisting the consumer with	
	utilizing natural supports in the community.	
The purpose of this review is to assess two aspects of services to non-Medicaid eligible		
individuals. DHS/DMH reimburses a limited range of services for non-Medicaid individuals.		
These items do not create the expectation that providers must provide services that are not		
reimbursed. The intention of these items is to give feedback and to recognize best practices		
	to share across providers.	The practices
	to share across providers.	
	NON-MEDICAID RECORD REVIEW	Yes / No
9	There is documentation that the provider is working to connect the consumer	
	with benefits / entitlements (such as Medicaid benefits).	
10	There is documentation that the provider is assisting the consumer with	
	utilizing natural supports in the community.	