

Peninsula RSN Residential Services Chart Review Tool

Facility Name and Type (RTF/BH)				
Client ID				
Review Date				
Date of Admission to Facility				
Outpatient Primary Clinician				
Axis 1				
Axis 2				
Axis 3				
	Actual Points	Possible Points	Percentage	Comments
Resident Care/Treatment				
Is the resident involved in activities at the facility?		0		
There is evidence of coordination between the outpatient provider and the facility.		0		
Client voice is incorporated into his or her care at the facility.		0		
There is evidence that efforts are being made to help the resident learn independent living skills in order to eventually move to a lower level of care.		0		

Treatment Planning				
The resident's treatment plan is up to date (every 180 days).		0		
The treatment plan includes a goal addressing the residential treatment needs, interventions, and outcomes.		0		
The treatment plan includes consumer voice as evidenced by consumer quotes.		0		
There is a discharge plan for the client		0		
The individual has a current crisis plan.		0		
Authorization				
Is there a current PARS for the consumer?		0		
Do the consumer's clinical presentation demonstrate a need for this residential level of care?		0		Initial and Ongoing Authorization
The individual has a history or recent episode of failing to live independently in the community due to his/her psychiatric illness.		0		Initial Authorization
The individual is currently enrolled in outpatient services or is in the process of being authorized and assigned to outpatient services.		0		Initial and Ongoing Authorization

<p>Exclusion Criteria: The consumer does not meet any of the following exclusion criteria: 1. The individual has a psychiatric condition that qualifies for a higher level of care. 2. The individual is actively suicidal and/or homicidal, per MHP staff assessment. 3. The individual has a recent history of a pattern of assault/violent behaviors toward self or others. The exclusion can be waived based on the individual's current functioning. 4. The individual has a physical condition requiring medical or nursing care available only in a hospital or other more intensive nursing environment. 5. The individual is in need of detoxification. 6. The individual has a history of being a sexual predator or of committing arson.</p>		0		Initial and Ongoing Authorization
<p>The consumer has a treatment plan that identifies need and measurable goals for residential services and is making progress toward treatment goals.</p>		0		Ongoing Authorization