Community Health & Research Center					
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Signature:	Date: 2-/8-/9		

I. POLICY

The policy of the ACCESS CHRC is that all services provided, and all contacts made with individuals served and, on their behalf, will be documented.

II. PURPOSE

This policy establishes procedures to document a client's progress towards goals. It is an essential part of a Client Personal File where staff and clients succinctly record details to document the client's status or achievements whilst a client of ACCESS CHRC. Progress notes are a tool for reflecting on a client's movement towards their goals as identified in their Individual Plans of Service (IPOS) and also represent a record of events on each shift or visit, a communication tool for staff. It is essential that progress notes reflect the strengths and recovery-focused elements of ACCESS' work with clients, to enable the story of their journey through the program to emerge.

III. APPLICATION

This policy applies to all ACCESS CHRC staff, its contractors, and their subcontractors.

IV. **DEFINITIONS**

Progress Note: The progress note is used to record the services provided and that also result in claims (billing).

V. PROCEDURES

The progress note is used to record the services provided and that also result in claims (billing). Please remember that when a clinician writes a billable progress note a bill to the funder is being submitted, therefore, all progress notes must be accurate and factual. Errors in documentation (e.g., using an incorrect location or procedure) directly affect ACCESS' ability to submit true and accurate claims. This is an aspect of compliance, and compliance is the personal responsibility of all clinical and administrative staff.

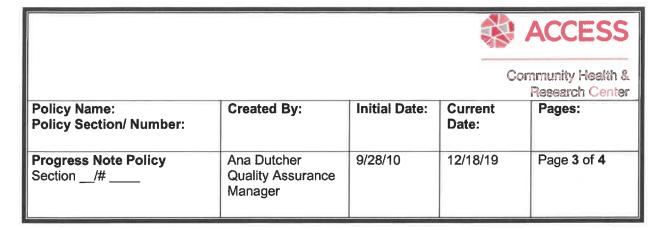
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A. All ACCESS CHRC progress notes should include a succinct summary on the following:

- a) A client's progress towards goals identified in IPOS (actions taken, progress made, barriers identified).
- b) Level of support provided by staff (i.e. increasing or decreasing, verbal prompts or physical support, staff completing tasks for client).
- c) The client's level of participation in and partnership with the ACCESS service.
- d) The clients' significant achievements and changes.
- e) Appointments attended
- f) The outcome of Service Coordination Meetings.
- g) All communication with other services involved with client (including phone calls, emails, faxes, face-to-face contact). All attempts to contact other services need to be recorded.
- h) Referrals made.
- Group activity participation (provided by the ACCESS service and externally).
- j) Any information given to clients
- k) Any follow-up required.
- All informed consent decisions (e.g. Client provided consent for therapist to discuss low mood with case manager).

B. Important Points Regarding Progress Notes

- a) Personal client file notes including progress notes are legal documents. Progress notes can also be subpoenaed at any time and staff can be cross-examined in a court regarding the contents of progress notes.
- b) Remember all client data in the personal client file including progress notes is to be kept confidential.



- c) All client personal files must be kept in a secure location and accessed only by authorized ACCESS CHRC staff.
- d) Ensure all sections of the file, are kept in a clean and tidy condition in the approved ACCESS order. Progress notes must be kept in a chronological order.
- e) An entry into the progress notes must be recorded during every depending on the program.
- f) All progress notes should be read before the new service being provided, in order to have a clear indication of the client's current situation, what support the client will require, or what follow-up activities need to occur during the scheduled appointment.
- g) All progress notes should be written with reference to the previous entry. (i.e. improvements, ongoing concerns, management of concerns).
- h) Progress notes must reflect the client's communication, behavior accurately and fairly.
- i) When writing progress notes staff must be mindful of how someone reading the notes will perceive the entries regarding the client and the ACCESS service provision.
- i) Clients have the right to request to read their own file notes.
- C. Each progress note needs to justify the service provided. Every billable service must be medically necessary. Medical Necessity is established by ensuring that interventions meet the following two criteria:
 - a) The focus of the proposed intervention is to address the condition identified in the impairment criteria related to the "included diagnosis", and
 - b) It is expected the proposed intervention will benefit the client by significantly diminishing the impairment or preventing significant deterioration in an important area of life functioning. Check how the proposed intervention helps the client improve or maintaining his/her functioning in important areas of life.
 - c) Progress notes are used to inform other clinical staff about the client's treatment, to document and claim for services, and to provide a legal record. Progress notes may be read by clients/family members. Use your judgment about what to include. Aim for clarity and brevity when writing notes. Lengthy narrative notes are discouraged.

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- d) Clear and concise documentation is crucial to client care. Progress notes are used, not only to claim for services, but to document the client/family's course and progress in treatment. Progress notes should clearly indicate the type of service provided and how the service is medically necessary to address an identified area of impairment, and the progress (or lack of progress) in treatment.
- e) In order to meet regulatory and compliance standards, Progress Notes:
 - i) Must be related to the client's progress in treatment
 - ii) Must provide timely documentation of relevant aspects of client care
 - iii) Must document:
 - (1) Client Encounters
 - (2) Interventions
 - (3) Follow up care

VI. QUALITY ASSURANCE & IMPROVEMENT

ACCESS Shall review and monitor adherence to this policy. The Quality Assessment and Performance Improvement Program (QAPIP) must include measures for monitoring and improvement in the quality of the program or process described in this policy.

VII. COMPLIANCE WITH ALL APPLICABLE LAWS

Agency staff, contractors, and subcontractors are bound by all applicable local, state, and federal laws; rules, regulations, and policies; all federal waiver requirements, state, and county contractual requirements, policies, and administrative directives as amended.

VIII. LEGAL AUTHORITY AND REFERENCES

All agency policies refer to the most recent policy at the time of writing and/or other communication devices.