



# FACT Clinical Records

1. FACT Clinical Records Cx Asses. Update (LSF Contract) The team updated assessments at least annually and uses the updated assessments to update the recovery plan. (All necessary areas essential for planning are included in the updated assessment.)
2. FACT Clinical Records Cx Comp Assess (LSF Contract) The team is responsible for preparing a written comprehensive assessment within 60 days of the participant's admission to the program. The comprehensive assessment must meet the following requirements:
  - Each assessment area is completed by the team member with skill and knowledge in the area being assessed and is based upon all available information.
  - At minimum, the comprehensive assessment minimally includes:
    - o Psychiatric history and diagnosis;
    - o Mental status;
    - o Strengths, abilities, and preferences;
    - o Physical health;
    - o History and current use of drugs or alcohol;
    - o Education and employment history and current status;
    - o Social development and functioning;
    - o Activities of daily living;
    - o Family and social relationships and supports; and
    - o Recommendations for care.
3. FACT Clinical Records Cx Comp Rec. Plan (LSF Contract) The comprehensive recovery plan is based on assessment findings and:
  - o Identifies the participant's strengths, resources, needs and limitations;
  - o Identifies short and long-term goals with timelines;
  - o Identifies participant's preferences for services;
  - o Outlines measurable treatment objectives and the services and activities necessary to meet the objectives and needs of the participant; and
  - o Targets a range of life domains such as symptom management, education, transportation, housing, activities of daily living, employment, daily structure, and family and social relationships, should the assessment identify a need and the individual agrees to identify a goal in that area.
4. FACT Clinical Records Cx Comp Rec. Plan (LSF Contract) The comprehensive recovery plan is reviewed and revised minimally every six months during planned meetings, unless clinically indicated earlier, by the treatment team and the participant.
5. FACT Clinical Records Cx Conacts (LSF Contract ID) The team shall average 3 contacts per week with all enrolled recipients. The team shall provide at least 75 percent of its service contacts outside the office.
6. FACT Clinical Records Cx Criteria (LSF Contract ID) Meet at least three of the following six characteristics:
  - 1) Inability to consistently perform the range of practical daily living tasks include
    - Maintaining personal hygiene,
    - Meeting nutritional needs,
    - Caring for personal business affairs,
    - Obtaining medical, legal, and housing services, and
    - Recognizing and avoiding common dangers or hazards to self and possessions.
  - (2) Inability to maintain employment at a self-sustaining level or inability to consistently carry out the homemaker role (e.g., household meal preparation, washing clothes, budgeting or child-care tasks and responsibilities);



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- (3) Inability to maintain a safe living situation (repeated evictions, loss of housing, or no housing)
- (4) Co-occurring substance use disorder of significant duration (greater than six months) or co-occurring mild intellectual disability;
- (5) Destructive behavior to self or others; or
- (6) High-risk of or recent history of criminal justice involvement.

7. FACT Clinical Records Cx Ct. Eligibility (LSF Contract) The individual meets one of the following six criteria:

- o High risk for hospital admission or readmission;
- o History of prolonged inpatient stays of more than 90 days within one year;
- o History of more than three (3) episodes of criminal justice involvement within one year;
- o Referred for aftercare services by one (1) of the state's correctional institutions;
- o Referred from an inpatient detoxification unit with documented history of co-occurring disorders; or
- o Have more than 3 crisis stabilization unit or hospital admissions for mental health crisis stabilization within one year.

8. FACT Clinical Records Cx Ct. Eligibility (LSF Contract) Diagnosis within one of the following DSM 5 categories:

- 1) Schizophrenia Spectrum and Other Psychotic Disorders
- 2) Bipolar and Related Disorders;
- 3) Depressive Disorders;
- 4) Anxiety Disorders;
- 5) Obsessive-Compulsive and Related Disorders;
- 6) Dissociative Disorders;
- 7) Somatic Symptom and Related Disorders; and
- 8) Personality Disorders.

9. FACT Clinical Records Cx Ct. Eligibility (LSF Contract) The individual meets at least three of the following six characteristics:

- o Inability to consistently perform the range of practical daily living tasks required for basic adult interactional roles in the community without significant assistance from others.
- o Inability to maintain employment at a self-sustaining level or inability to consistently carry out the homemaker role (e.g., household meal preparation, washing clothes, budgeting or child-care tasks and responsibilities);
- o Inability to maintain a safe living situation (repeated evictions, loss of housing, or no housing);
- o Co-occurring substance use disorder of significant duration (greater than six months) or co-occurring mild intellectual disability;
- o Destructive behavior to self or others; or
- o High-risk of or recent history of criminal justice involvement (arrest and incarceration).

10. FACT Clinical Records Cx Demographics (LSF Contract ID) The clinical record should contain:

- 1) Referral information,
- 2) Reason(s) for admission,
- 3) Requests for past medical records,
- 4) Medications,
- 5) Service delivery,
- 6) Family information,
- 7) Clinical information.



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## 11. FACT Clinical Records Cx Dx (LSF Contract ID) Dx. Criteria

- The ct. moves outside of the area of the FACT team's responsibility;
- The ct. demonstrates an ability to perform successfully in major role areas over time without requiring assistance from the program and no longer requires this level of care;
- The ct. requests dx or chooses not to participate in services, despite the team's repeated efforts to develop a recovery plan acceptable to the ct.;
- The ct. has been admitted to a SMHTF and has remained in such facility for a period exceeding six months, and there is no anticipated date of discharge;
- The ct. has been adjudicated guilty of a felony crime and subsequently sent to a state or federal prison for a sentence that exceeds one year.
- The ct. was admitted to a nursing facility for long term care due to a medical condition, and there is no anticipated date of discharge.
- The ct. dies.
- The FACT team staff are unable to locate a participant for a period of 45 days. (Exceptions to this nursing home discharge criteria shall be staffed with the LSFHS ASOCM for approval. All efforts to locate the ct. shall be documented during the 45-day timeframe.)

## 12. FACT Clinical Records Cx Dx Plan (LSF Contract) The team documented the discharge process in the participant's medical record, including:

- The reason(s) for discharge;
- The participant's status and condition at discharge;
- A final evaluation summary of the participant's progress toward the outcomes and goals set forth in the recovery plan;
- A plan developed in conjunction with the FACT participant for treatment upon discharge and for follow-up that includes the signature of the primary case manager, Team Leader, Psychiatrist, and the participant or legal guardian;
- Documentation of referral information made to other agencies upon discharge; and
- Documentation that the participant was advised he or she may return to the FACT team if they desire and space is available. (Discharges are tracked and fall into these categories:
  - The participant moves outside of the geographic areas of the FACT team's responsibility;
  - The participant demonstrates an ability to perform successfully in major role areas (i.e., work social, and self-care) over time without requiring assistance from the program and no longer requires this level of care (i.e. successful completion);
  - The participant requests discharge or chooses not to participate in services, despite the team's repeated efforts to develop a recovery plan acceptable to the participant;
  - The participant has been admitted to a state mental health treatment facility and has remained in such facility for a period exceeding six months, and there is no anticipated date of discharge;
  - The participant has been adjudicated guilty of a felony crime and subsequently sent to a state or federal prison for a sentence that exceeds one year.
  - The participant was admitted to a nursing facility for long term care due to a medical condition, and there is no anticipated date of discharge.
  - The participant dies)

## 13. FACT Clinical Records Cx Forensic (LSF Contract ID) Forensic consumers must meet the eligibility criteria described above and additionally, meet the following requirements:

- 1) A valid conditional release order.
- 2) Must have a court approved condition of release plan detailing supervision and mental health services for the defendant.
- 3) A conditional release plan shall include special provisions for residential care or adequate supervision of the defendant; provisions for FACT team mental health services; and if appropriate, recommendations for auxiliary service such as vocational training, educational services or special medical care.



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4) The Fact team must send periodic reports to the court and LSF Health Systems regarding progress in treatment; and copies of the report must be sent to the State Attorney and the individual's attorney.

14. FACT Clinical Records Cx History Time. (LSF Contract) The team completed a psychiatric/social functioning history time line is completed no later than 120 days after the first day of admission.

15. FACT Clinical Records Cx Initial Assess (LSF Contract) The Team Leader in coordination with the Psychiatrist or Psychiatric ARNP performs an initial assessment and develops an initial plan of care on the day of the participant's admission to the program.

The required components of an initial assessment, at a minimum, include:

- A brief mental status examination;
- Assessment of symptoms;
- An initial psychosocial history;
- An initial health/medical assessment;
- A review of previous clinical information obtained at the time of admission;
- A preliminary identification of the participant's housing, financial and employment status; and
- A preliminary review of the participant's strengths, challenges, and preferences.

16. FACT Clinical Records Cx Recovery Plan (LSF Contract) The team completed a comprehensive recovery plan as an expansion of the initial plan within 90 days of admission, following completion of all assessments.

17. FACT Clinical Records Cx Release of Info (65D-30.004(13)(c) 42 Code of Federal Regulations, Part 2.) Consent for Release of Information (1) Includes the specific name/program permitted to make the disclosure, (2) Name of the individual/organization to which the disclosure is to be made, (3) Purpose of the disclosure, (4) How much and what kind of information to be disclosed, (5) Signature of the client/legal guardian, date on which consent is signed, (6) Statement that the consent is subject to revocation at any time, (7) Date which consent will expire if not revoked before.

18. FACT Clinical Records Cx Transfer (LSF Contract ID) Upon arrival, the receiving team shall review the participant's clinical records, conduct an initial assessment and admission process, assess the person's current medication regime, consult with the program psychiatrist and make a clinical determination as to the need to conduct a new comprehensive assess or develop a new recovery plan. Documentation of FACT team's attempt to contact the receiving FACT team to determine if they have capacity to accept the transfer and a date of transfer. Originating team must, with consent, send the receiving FACT team a comprehensive referral packet. Upon arrival, the receiving team shall review the participant's clinical records, conduct an initial assessment and admission process, assess the person's current medication regime, consult with the program psychiatrist and make a clinical determination as to the need to conduct a new comprehensive assessm or develop a new recovery plan.