

# Monterey County Behavioral Health Quality Improvement

## PROTOCOL

RE:	Clinical Supervisory tool
POLICY REFERENCE	Pol. 129
FORM REFERENCE	Clinical Supervisory tool
EFFECTIVE	January 19, 2017

As part of our ongoing quality improvement efforts, we have taken your feedback regarding the effectiveness of the Quality Improvement Utilization Review tool (QI UR tool) in meeting your clinical supervisory needs. We have also taken into consideration the report from the most recent triennial review (2014) by the Department of Health Care Services (DHCS) to address the need for ongoing efforts to evaluate documentation of medical necessity. We have designed a *Clinical Supervisory tool* to assist in meeting both, your interest in providing measurable clinical guidance and also meet regulatory requirements to ensure medical necessity is met throughout the course of client care.

We strongly encourage you to share the *Clinical Supervisory tool* with your supervisee prior to the review and have open dialogue about staff expectation and intention for using this tool. We hope this will support ongoing and deliberate communication with your supervisee on clinical areas of strength, areas for improvement, and ongoing professional development.

The output of *Clinical Supervisory tool* can be reviewed using Avatar report number 145. The report shall be shared with the supervisee as part of your ongoing supervision and shall be used to identify and address areas of strength and areas for further development. Please note, generally speaking, the supervisee, is the care coordinator and is expected to evaluate and coordinate services on behalf of the client. This means, the coordinator is responsible for addressing issues identified through the review process.

The Quality Improvement team along with the Leadership team will review and evaluate data from the Clinical Supervisory tool to identify and address training needs across our organization.

## Procedure:

Effective January 19, 2017 all supervisors will be expected to utilize and complete the Clinical Supervisory tool using the available form in myAvatar.

Supervisors, review 1-3 charts per week from different team members (select different supervisee's charts) depending on the program's level of care.

- 1 chart shall be reviewed for high intensive teams (i.e. FSP)
- 2 charts shall be reviewed for medium intensive teams (this is the majority of adult and children's teams)
- 3 charts shall be reviewed for low intensive teams

1. Identify the supervisee you will review

2. In myAvatar:

- a. identify a client on supervisee caseload
- b. open "step 2" report (this will provide all chart documents needed for review)
  - i. select the most recent *3-month date range*
  - ii. select the most recent assessment
  - iii. select the most recent treatment plan
  - iv. select "process"
- c. open "clinical supervisory tool;" there are five (5) sections:
  - i. Section 1: General Review Info
    1. enter date of review
    2. select a review type
      - a. Admit= initial assessment for client
      - b. Annual= annual review for client
      - c. Discharge= completed at time of discharge for continuity of care
      - d. Other= an update (may be related to changes in client needs, etc.)
    3. enter name of clinician (supervisee) you are reviewing
    4. enter name of reviewer (you)
    5. select program (the program the supervisee is in)
    6. the tool uses a 4-point scale:
      - a. Could be used as a model/example (4)
      - b. Good as Is, No need for significant changes/improvements (3)
      - c. Acceptable; Some training issues (2)
      - d. Unacceptable/Incomplete: Would return for correction (1)

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- ii. Section 2: Assessment
    1. complete information based on your review
  - iii. Section 3: Treatment Plan
    1. complete information based on your review
  - iv. Section 4: Progress notes
    1. complete information based on your review
  - v. Section 5: Overall Documentation
    1. Complete information based on your review
3. myAvatar report number 145 will provide information about the supervisee's overall score and average scores based on the information you entered from your review.
  4. Supervisors are expected to discuss the results of the *Clinical Supervisory* tool with their supervisee as part of weekly supervision. You may consider using the information you included in the comments section of the *Clinical Supervisory* tool, included but not limited to:
    - a. Areas of strength
    - b. Identified areas for improvement and designated a plan to support the supervisee's growth in those areas
    - c. Ongoing review of overall progress
    - d. Ongoing discussion on medical necessity criteria and documentation expectations
  5. Access to the printable version of the Clinical Supervisory tool can be found on the QI website: [https://www.mtyhd.org/QI/wp-content/uploads/2014/09/Clinical-Supervisory-Tool\\_FINAL-2016-12-15.pdf](https://www.mtyhd.org/QI/wp-content/uploads/2014/09/Clinical-Supervisory-Tool_FINAL-2016-12-15.pdf), however, all clinical reviews must be completed within myAvatar.

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Example of form in myAvatar

**CLIENT, TESTFIRSTNAME (000800292)**  
F, 53, 07/23/1963  
Ht: 6' 1", Wt: 230 lbs, BMI: 30.3

Chart Clinical Supervisory Tool

**1** General Review Info.  
Assessment **2**  
Treatment Plan **3**  
Progress Notes **4**  
Overall Documentation **5**

Submit

Review Date: 01/12/2017 Today Yesterday

Charting:  Admit  Annual  Discharge  Other

Clinician: [Text Field]

Reviewer: [Text Field]

Program: [Dropdown Menu]

**2** 1. Identifying Information and Chief Complaint

- Gender, Work/School, Living Situation, Interests
- Chief Goal & Complaint in Client's Own Words. (For Children, can be caregiver)

2. Acceptable; Some Training Issues [Dropdown Menu]

Comments: test [Text Field]

2. Presenting Problem/Hx of Presenting Illness/Changes in Functioning

- Current/Recent Changes in MH/SUD Sx (details, examples)
- Current/Recent Changes in Fx Impairment (How sx impact fx)
- Strengths (Qualities, Interests, Resources, and Aspirations)...
- For Updates, include How Client has responded to Tx

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Example of report 145



## Monterey County Behavioral Health 145 Clinical Supervisory Tool Report

Example

<b>18. Goal Management Information Completed</b> - Status/Due Date - Date Closed	<b>Score:</b> 4. Could be used as a model/example	<b>Comments:</b>
<b>19. Client Participation</b> - Evidence Client and/or Caregiver Participated Actively in Process	<b>Score:</b> 2. Acceptable; Some Training Issues	<b>Comments:</b>
*For children, can be caregiver's words		
<b>Treatment Plan Average Score: 3.71</b>		
<b>23. Plan</b> - Safety Was Adequately Addressed in Plan - Level of Intensity Matches Response - Plan is Specific to Response (Not Same Cut & Paste for Each Note)	<b>Score:</b> 1. Unacceptable/Incomplete: Need Correction	<b>Comments:</b>
<b>24. Medical Necessity</b> - PN Content Supports Medical Necessity for Service	<b>Score:</b> 4. Could be used as a model/example	<b>Comments:</b>
<b>Progress Note Average Score: 2.40</b>		
<b>Overall Documentation</b>		
<b>25. Golden Thread</b> - Degree to which clinical data supports tx planning and Intx	<b>Score:</b> 4. Could be used as a model/example	<b>Comments:</b>
<b>26. Level of Care</b> - Degree to which Client appear placed in appropriate program/Intx	<b>Score:</b> 1. Unacceptable/Incomplete: Need Correction	<b>Comments:</b>
<b>27. Strengths</b> - Degree to which Treatment uses Client Strengths	<b>Score:</b> 1. Unacceptable/Incomplete: Need Correction	<b>Comments:</b>
<b>(Average of Questions 1-27) Clinical Documentation Average Summary Score: 2.63</b>		
<b>(Average of Questions 11 &amp; 19) Client Participation Summary Score: 2.00</b>		
<b>(Average of Questions 12 &amp; 24) Medical Necessity Summary Score: 4.00</b>		