

## TITLE

DIAGNOSTIC ASSESSMENT SERVICES

POLICIES/PROCEDURES 600.02

Effective Date: Supersedes:

1/3/17

3/2/11

6/29/1999

10/15/1998

POLICY:

1. Diagnostic and assessment services are services in which a client's needs for mental health services are assessed and a DSM-5 diagnosis may be determined. Clients will be informed of their rights, their fee for service and procedures for accessing emergency services as a part of diagnostic and assessment services. Clients will be informed of the Client Rights policies and the availability of a Client's Rights Officer at each location. Clients will be informed of their financial responsibility for services and medication, should it be prescribed.
2. This agency will abide by OHMAS, ADAMH and CARF standards for diagnostic assessment. Quality diagnostic assessment services will be provided.

PROCEDURES:

1. Diagnostic services may be provided by MD/DO physicians, psychologists, psychology assistants, licensed independent social workers, licensed social workers, licensed professional counselors with clinical endorsement, licensed professional counselors, counselor trainees, advance practice nurses, nurse practitioners, registered nurses, licensed registered occupational therapists, and licensed school psychologists. Ohio Mental Health and Addiction Services (OHMAS) standards for supervision require that staff who do not meet these criteria will arrange for a client to see a staff member who meets these criteria as a part of the diagnostic assessment process.
2. The Ohio Mental Health and Addiction Services requires that services must be supervised by MD/DO physicians, psychologists, licensed independent social workers, licensed professional counselors with clinical endorsement, and advanced practice nurses. This agency will meet the requirements of the state licensing boards for clinical supervision.
2. A diagnostic assessment must be done on a face-to-face basis, either physically in the same office or during an interactive video conference.
3. The agency Diagnostic Assessment (and the subsequent Diagnostic Assessment Update) forms will be completed in the Carelogic EMR, with the format based off the state of Ohio SOQIC forms.
4. Using the SOQIC format, the Diagnostic Assessment will gather and record sufficient information to develop a comprehensive person-centered plan for each client.
5. Collateral information related to the client (previous assessments from other sources, discharge paperwork, progress notes and medical histories etc.) may be taken into account to complete agency Diagnostic Assessments.

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6. A Level of Care will be completed prior to the Diagnostic Assessment (DA), and used in DA development.
  7. Diagnostic Assessments should be completed within the first 2-3 weeks of client intake.
  8. Because the DA is the foundation for creating the ISP, the DA is completed prior to the ISP.
  9. The agency encourages clinic staff to complete either a full Diagnostic Assessment, or complete a Diagnostic Assessment Update, on an annual basis.
  6. Clients who may need emergency services will be given instructions on how to use emergency services. North Community has an agreement with Netcare for emergency services.
  5. Clients who require referral to other agencies will be given information and telephone numbers for the other agency. If a clinician determines that the optimal procedure is to contact the agency on the client's behalf, the clinician will ask the client to sign a written release of information before doing so. Any information released will be based on consent given and in accordance with existing rules, laws, policies and procedures pertaining to the release of confidential information.
  6. Licensed Clinicians, QMHS and any other staff who coordinate care with outside entities will follow policies regarding releasing PHI and HIPAA
  7. Hearing impaired persons will receive diagnostic services with the assistance of a person proficient in American Sign Language or through a qualified interpreter. Persons who speak a language other than English as a primary means of communication will receive services with the assistance of a qualified interpreter.
  8. Clients will be informed of fees at the time of intake, prior to initial diagnostic assessment. At the time of fee assessment, the client will receive and acknowledge receipt of client rights information. This information, signed by the client in the electronic record, provides clients with the process for filing a grievance. It will also identify the C.R.O. (Client Rights Officer) for each office location and indicate C.R.O. availability.
  9. The assigned clinical staff (clinicians or case manager) will assist the client to complete the declaration of mental health treatment preferences section of the electronic record. Please see policy 700.02 for more information.
  10. Clients will be scheduled with the Nurse to complete and/or review the Health History

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Questionnaire. If an agency Nurse is unavailable, the clinician or case manager can complete the Health History Questionnaire to the best of their ability. After completion, pertinent information on the Health History Questionnaire will be shared with the client's medical team. The Nurse can utilize the information to educate clients on maintaining good physical health, including referrals to primary care or to specialists.

11. The agency will make appropriate efforts to locate health and medical services and to build interagency linkages that improve access to health and medical services for clients requiring their services. Clients are generally referred to their own family physician, if appropriate. If clients don't have their own family physician, they will be given names of area clinics.
12. Clinicians and case managers will assist any client in obtaining a physical examination, particularly when a client complains of or shows signs of physical abuse or neglect, if the client complains of or if the physical health assessment indicates signs or symptoms of physical illness requiring a physician's examination.
13. The agency will make efforts to assist in obtaining prenatal support for pregnant women served by the agency and, if appropriate, for their family and significant others, particularly for pregnant women receiving substance abuse services.

## References:

<http://codes.ohio.gov/oac/5122-29-04>