

## **CORNERSTONE BEHAVIORAL HEALTHCARE**

### **OP.9 TREATMENT AND CARE PROCESSES (INDIVIDUAL SERVICE/TREATMENT/TREATMENT PLAN)**

All clients served by Cornerstone will have an Individual Service/Treatment/Treatment Plan/ (ISP) that meets licensing and professional standards.

The initial Individual Service Plan shall be completed at admission and redeveloped within 30 days after a Treatment Meeting with all relevant parties. The initial Individual Treatment Plan is due within 30 days from the first date of service. The Individual Service/Treatment Plan will be reviewed at major decision points in each client's treatment course (when there is a change in the client's condition, when a Service/Treatment appears not to benefit the client, when the client is under-or-over utilizing Service/Treatments, and etc.), upon the client's or legally responsible parent's request and no less frequently than every 90 days. The 90 day review begins at the date the client signs the ISP/ITP. (For medication management services the ITP review is due every 12<sup>th</sup> visit, annually or at a major decision point.) An ISP/ITP is deemed late if the current treatment plan has expired and the client was seen for services after the expiration date. The initial ISP/ITP is deemed late if not completed within 30 days of the first date of service, and the client was seen for services after the due date. For a late ISP/ITP a late note will be added to the treatment plan that details the reason for not being in compliance with the initial or review periods. The client and legally designated guardian shall be fully and actively involved in the development or revision of the Service/Treatment plan, if possible. If the client consents, the client's designated representative, family members or significant others shall be included in the development and revision of the Service/Treatment plan, unless contraindicated. When these individuals do not attend, their absence shall be noted. Cornerstone shall document good faith efforts, including 3 days notice of any Service/Treatment planning meetings, to involve guardians, representatives or legally responsible parents.

The Individual Service/Treatment Plan will include the following: problem statements; short and long range goals based upon client need with a projection of when such goals will be obtained; objectives stated in terms which allow objective measurement of progress; multi-disciplinary input and specification of treatment responsibilities; client input and signature; signatures of all people participating in the development of the plan; the methods and frequency of treatment, rehabilitation, and support; a description of any physical handicap and any accommodations necessary to provide the same or equal Service/Treatments and benefits as those afforded non-disabled individuals; and criteria for discharge.

Justification for not addressing problems identified in the assessments will be documented in the client record. Such documentation shall include the rationale for not addressing the problems at this time. This documentation can include case record notes,

progress notes, Service/Treatment plan narratives, quarterly reports, etc. If at the time of the Individual Service/Treatment Plan meeting team members know on the basis of reliable information that the needed Service/Treatments are unavailable, they shall note them as “unmet Service/Treatment needs” on the Individual Service/Treatment Plan and develop an interim plan based upon available Service/Treatments meeting, as nearly as possible, the actual needs of the client. Cornerstone will also document notification to the Clinical Director, or his or her designee, and the Commissioner of DHHS regarding the unavailability of Service that is causing the unmet Service/Treatment need.

Clients, guardians, and/or their legally responsible parent shall be provided a copy of their Individualized Service/Treatment Plan within one week following its formulation, review or revision, and notification by client, guardian and/or legally responsible parent should they disagree with any aspect of the plan. Cornerstone will provide a copy of the client’s Service/Treatment plan and/or notify them of recourse should they disagree.

Donny M. Rabell, MCP, APSW  
Executive Director/Date      3-25-2020

**Revised: 12/13/10, 03/24/20**