
CSP Points to Remember

Documentation and Supervision

Assessment

- Standard Comprehensive Psychiatric Assessment
 - With all 5 Axis
 - Medication Information
 - Functional Assessment
 - Clearly identifying a functional impairment
 - The Functional impairment ties back to the Psychiatric Assessment: how do the negative aspects of the illness impact on the person's ability to recover or achieve what they want.
 - Integrated Summary: both Clinical and Functional
 - Integrated Recovery/Rehab Plan
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Readiness to Change

- Consider where the client is at:
 - Pre-engagement or pre-contemplation
 - Contemplation and Preparation
 - Action: Active Rehabilitation
 - Relapse Prevention: WRAP Plans
 - Document on where you think the client is at, and how best to work with the person: (SNAP, strengths, needs, abilities and preferences)
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Decision Rules

- If a change in a condition and/or behavior is needed for the life and safety of the client and others, **INCLUDE IN PLAN/PROVIDE SERVICE.**
 - 2. If client does not have the skills to function as needed to reach the goal, **OFFER SKILL TRAINING**
 - 3. If the environment doesn't allow or doesn't support the skills, **OFFER TO WORK WITH THE CLIENT TO MODIFY THE ENVIRONMENT**
 - 4. If the client wants to use or learn to use the skills, **OFFER TRAINING OR PRACTICE.**
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Supervision

- Review the clients for each staff member so you understand the client's needs
 - Review the Plans developed by the client and staff: make sure that objectives are measurable, and that there are not too many.
 - That there are links between assessments and plans
 - Interventions include specific modalities
 - Focused on restoring function
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Encounter Notes

- What goal (from Recovery Plan) were you working on?
 - • What was the intervention?
 - • How did the consumer respond?
 - • What are the next steps?

 - Teach staff to use concurrent documentation whenever possible
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Supervision:

- Administrative: done with the staff person's weekly schedule and client medical records
 - 55% FTF time in the community: review client schedule, distance to each home, & how to manage the time
 - Compare their schedules to other team members to determine whether the team can manage the productivity
 - Monitor the no-shows per team member
 - Review their documentation
 - As often as possible at the beginning then monthly
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Clinical or Rehab Supervision

- Group supervision
 - Creative Problem Solving
 - Use Peers for life stories: how did they manage the issue?
 - Develop a cohesive team< no wrong answers (if safety isn't the issue)
 - Use your informal leaders to work with the others & pair them up when needed
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