

#1	Risk to harm self	Partial Hospital 2008
Met	Not Met	<b>Validating Elements</b>
<b>Patient Status</b>		
<input type="checkbox"/>	<input type="checkbox"/>	<i>Clinical</i> Patient presenting with suicidal thoughts or self-injurious behaviors that do not represent an imminent risk
<input type="checkbox"/>	<input type="checkbox"/>	<i>Clinical</i> Patient unable to function or regulate behavior outside of a highly structured environment
<input type="checkbox"/>	<input type="checkbox"/>	<i>Clinical</i> Patient demonstrates comprehension and the ability to make use of the clinical program
<input type="checkbox"/>	<input type="checkbox"/>	<i>Diagnosis</i> DSM-IV-TR working diagnosis, Axis I-V, including rule-outs
<b>Settings-Resources</b>		
<input type="checkbox"/>	<input type="checkbox"/>	<i>Level of Care</i> Structured multidisciplinary program required for at least 20 hours per week to address suicidal thoughts or self-injurious behaviors
<input type="checkbox"/>	<input type="checkbox"/>	<i>Alternatives</i> Less intensive level of care including intensive outpatient: <ul style="list-style-type: none"> <li><input type="radio"/> Was not successful</li> <li style="text-align: center;"><b>OR</b></li> <li><input type="radio"/> Is inadequate due to risk of self-harm</li> <li style="text-align: center;"><b>OR</b></li> <li><input type="radio"/> Is insufficient to prevent further deterioration</li> </ul>
<b>Clinical Actions</b>		
<input type="checkbox"/>	<input type="checkbox"/>	<i>Assessment</i> Clinical evaluation completed by a licensed mental health clinician at or within 3 days prior to admission
<input type="checkbox"/>	<input type="checkbox"/>	<i>Assessment</i> Medical evaluation completed within 3 days prior to admission, if indicated
<input type="checkbox"/>	<input type="checkbox"/>	<i>Coordination</i> Attempt to involve the patient's family/significant others and social support system
<input type="checkbox"/>	<input type="checkbox"/>	<i>Coordination</i> Obtain clinical information from prior and current clinicians
<input type="checkbox"/>	<input type="checkbox"/>	<i>Planning</i> Develop a preliminary treatment plan for partial hospital stay, and initiate discharge planning
<input type="checkbox"/>	<input type="checkbox"/>	<i>Treatment</i> Initiate psychosocial interventions and/or medications with short-term goals, including: <ul style="list-style-type: none"> <li>• Decreased psychiatric symptoms</li> <li>• Improved functioning</li> <li>• Decreased risk to self</li> </ul>
<b>Considerations</b>		
Assessment of self-harm includes a review of the patient's history of suicide attempts, as well as evaluation of current suicidal ideation, intent, means, risk factors, and protective factors		

## Steps to Complete a Review

1. Choose criterion (example: Psychological testing).

MCAP's exclusive service-focused methodology allows reviewers to choose a criterion based on the treatments ordered in the physician's plan of care.

2. Review criterion sections and check off all exclusions and validating elements.

For a criterion to be qualified according to clinical necessity and best practice standards, each validating element must be met.

3. Collect Quality, Delay or Reason Codes for adequate explanation of outcomes. This data can be collected, reported and analyzed to accurately identify areas for improving patient flow and reducing LOS.

Reviewers can add Quality and Delay Codes for qualified reviews or Reason Codes for non-qualified reviews. These codes are fully customizable to meet the needs of your facility or health system.