

NYSCRI 2.0 Update – September 29, 2014

Regulatory/Standard Change Citation	Form Element/Required Focus Area	Suggested NYSCRI Form/Element Location	Comments/Guidance
CARF			
CARF - 2.B.14.m(2)	Current and historical information including gender, sexual orientation, and gender expression	Core Assessments: Comprehensive; Case Management; Initial Psychiatric Evaluation; OMH Residential Intake – Sexual History section	Gender expression, as a distinct form element, was not included in in NYSCRI 2.0.
CARF - 2.B.14.n.(1) a.b.	History of trauma that is experienced, witnessed	Core Assessments – Trauma History	Witness to Violence is included in Version 2.0. However, if other types of trauma are witnessed, may use this section to document.
CARF - 2.B.14.n (2) d	Sexual Assault	Core Assessments – Trauma History	Sexual Abuse/Molestation terms are included in Version 2.0. Sexual Assault, as an additional term, should also be considered.
CARF - 2.B.14.j. (3)	Physical health issues: current pregnancy and prenatal care	OMH Residential Intake –Physical Health Condition checklist; comment in section noting Other physical related health conditions	Pregnancy and prenatal care are included in Brief Medical Screening Version 2.0. However, OMH Residential lacked these terms in the similar section found within the Residential Intake. OMH Residential providers should address these elements.
CARF - 2.B.15.b	The assessment process includes the preparation of a written interpretive summary that: Identifies any co-occurring disabilities, co-morbidities, and/or disorders.	Core Assessments – Interpretive Summary	This element was not included in NYSCRI 2.0. CARF requires specific documentation for these areas in the Interpretive Summary section.

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COA			
COA - RPM 7.02 (a)(b) Standards Interpretation section	If not all listed information is obtainable, provide an explanation	Personal Information Form – p. 4 Additional Information section	COA recognizes that in some cases not all listed information is obtainable for a person or family. In these cases, an explanation should be placed in the case record as to why this information was not obtainable. The listed information may not be routinely available due to the nature of the service, e.g. a low demand shelter or drop-in center. Particular areas judged to require explanation, if applicable, are a) demographic and contact information; (b) the reason for requesting or being referred for services.
OASAS			
OASAS Part 822-4.6(b); 819.4(m)	The discharge planning process must begin upon admission, be closely coordinated with the treatment/recovery plan, be based on the patient's self-reported confidence in maintaining abstinence and be included in the patient record.	IAP's, IAP Reviews - Below Transition/ Discharge Criteria section, comment in the Other section:	Per OASAS guidance: provide a brief summary of individual's plan for living arrangements and vocational/educational/ employment aspirations; (additional discharge planning will be identified during the course of treatment and included in the Discharge Summary / Plan - Part A)
OMH Regulations			
OMH ACT 4.10(6)©	The comprehensive service plan is reviewed and updated at least every 6 months, including: initiation of discharge planning, as appropriate.	IAP Reviews as appropriate - Below Transition/ Discharge Criteria section, comment in the Other section or other appropriate spot of provider's choosing.	A designated section for the (Anticipated) Discharge Plan does not appear in NYSCRI 2.0. Please take note of the citation, as it applies to your program.
OMH ACT 4.11(2)(s)(v)	The signature of the team leader or designated clinical	Discharge Summary/Plan Part A	This element was not included in NYSCRI 2.0. ACT providers must have a

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	supervisor and the psychiatrist.		Psychiatrist's signature on the Discharge Plan.
OMH PROS 512.5(a)	Complete a Summary of Findings, including impact of health on the individual's recovery	Brief Medical Screen – Part B. Comments	Each assessment must result in a summary of findings within the context of the specific assessment focus that addresses the individual's strengths, talents, and abilities, as well as the challenges and barriers presented by the individual's mental illness.
OMH PROS 512.5(a)	Complete a Summary of Findings	Comprehensive Assessment – Substance Use/Addictive Behavior Screen: comment in space noting If Yes, Specify.	Each assessment must result in a summary of findings, within the context of the specific assessment focus area that addresses the individual's strengths, talents, and abilities, as well as the challenges and barriers presented by the individual's mental illness.
OMH PROS 512.5(a)	Complete a Summary of Findings	Comprehensive Assessment – Interpretive Summary	Each assessment must result in a summary of findings, within the context of the specific assessment focus area that addresses the individual's strengths, talents, and abilities, as well as the challenges and barriers presented by the individual's mental illness.
OMH PROS 512.5(a)	Complete a Summary of Findings	Psychiatric Rehabilitation Readiness Assessment	Each assessment must result in a summary of findings, within the context of the specific assessment focus area that addresses the individual's strengths, talents, and abilities, as well as the challenges and barriers presented by the individual's mental illness.
OMH PROS 512.5(a)	Complete a Summary of Findings	Psychiatric Evaluation – Interpretive Summary	Each assessment must result in a summary of findings, within the context of the specific assessment focus area that addresses the individual's strengths, talents, and abilities, as well as the challenges and barriers

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			presented by the individual's mental illness.
OMH Part 587.16(g)(4); 587.17©(4)	A periodic review of the treatment plan shall include the following: ...or initiation of discharge planning, as appropriate.	IAP's as appropriate - Below Transition/ Discharge Criteria section, comment in the Other section or other appropriate spot of provider's choosing	A designated section for the (Anticipated) Discharge Plan does not appear in NYSCRI 2.0. Please take note of the citation, as it applies to your program.
OMH Part 593.6(f)(2)	The service plan shall be reviewed... Such review shall include the following:...(2) intervention strategies for the initiation of discharge planning	IAP Reviews as appropriate - Below Transition/ Discharge Criteria section, comment in the Other section or other appropriate spot of provider's choosing	A designated section for the (Anticipated) Discharge Plan does not appear in NYSCRI 2.0. Please take note of the citation, as it applies to your program.
OMH Part 594.10(d)(2)	The individualized service plan shall be reviewed ... Such review shall include the following: (2) intervention strategies or the initiation of the discharge process	IAP Reviews as appropriate - Below Transition/ Discharge Criteria section, comment in the Other section or other appropriate spot of provider's choosing	A designated section for the (Anticipated) Discharge Plan does not appear in NYSCRI 2.0. Please take note of the citation, as it applies to your program.
OMH Part 595.11(d)(2);	The individualized written service plan shall be reviewed... Such review shall include the following: ... (2) intervention strategies or the initiation of discharge planning	IAP Reviews as appropriate - Below Transition/ Discharge Criteria section, comment in the Other section or other appropriate spot of provider's choosing	A designated section for the (Anticipated) Discharge Plan does not appear in NYSCRI 2.0. Please take note of the citation, as it applies to your program.
OMH Part 595.11€(4)	As a part of the service planning process for each resident, the provider shall ensure that: ... a service plan shall include a plan for ongoing supports after discharge from the program...	IAP's, IAP Reviews as appropriate - Below Transition/ Discharge Criteria section, comment in the Other section or other appropriate spot of provider's choosing	A designated section for the (Anticipated) Discharge Plan does not appear in NYSCRI 2.0. Please take note of the citation, as it applies to your program.
OMH Part 599.10(j)(2)	The periodic review of the treatment plan shall include the following: (2) adjustment of goals and treatment objectives, time periods	IAP Reviews as appropriate - Below Transition/ Discharge Criteria section, comment in the Other section or other	A designated section for the (Anticipated) Discharge Plan does not appear in NYSCRI 2.0. Please take note of the citation, as it applies to your program.

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	for achievement, intervention strategies or initiation of discharge planning, as appropriate;	appropriate spot of provider's choosing	
OMH Clinic Standards of Care			
OMH Standards of Care: Adequate (A) – 1.24(2)	At a minimum, violence screen includes direct inquiry into the following: fire setting, abuse of animals. History of not taking medication as prescribed, in the context of past violence.	Core Assessments – Violence Screen	A Violence Screen is included in NYSCRI 2.0. Per Standards of Care, providers would directly inquire about these areas which were not included in NYSCRI 2.0.
OMH Standards of Care: A-1.25(2)	Health information is reviewed by a physician, NPP, RN, or PA who documents review of health information, <i>potential impact on mental health diagnosis and treatment</i> , and any need for additional health services or referrals.	Brief Medical Screen	The expectation of health information being reviewed is included in NYSCRI 2.0. Per Standards of Care, providers may wish to add information (highlighted) pertaining to impact.
OMH Standards of Care: A-1.25(4)	Abnormal Involuntary Movement Scale (AIMS) testing or equivalent is conducted on a regular basis for individuals taking psychotropic medications with a known potential side effect of tardive dyskinesia (TD) or other extra-pyramidal symptoms (EPS) and for all individuals with a diagnosis of TD regardless of current medication regimen.	Initial Psychiatric Evaluation; Psychopharmacology Notes - Changes in Medical Status section	This element was not included in NYSCRI 2.0. Per Standards of Care, providers may document the testing was completed and any results.

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<p>OMH Standards of Care: A- 1.27(1)</p>	<p>The clinic screens all recipients for tobacco use and dependence and assesses readiness to reduce or quit using tobacco at intake and every three months for active smokers.</p>	<p>Substance Use/Addictive Behaviors Assessment (Tobacco section) at Intake; IAP Reviews ongoing.</p>	<p>This element was not included in NYSCRI 2.0. Per Standards of Care, providers may wish to utilize a text box to describe readiness to reduce or quit.</p>
<p>OMH Standards of Care: A- 1.27(2)</p>	<p>For children, information is sought from the child or family concerning tobacco use in the home environment(s).</p>	<p>Core Assessments – Family History and Relationship section</p>	<p>This element was not included in NYSCRI 2.0. Per Standards of Care, providers may note relevant history.</p>
<p>OMH Standards of Care: A-3.17(3)</p>	<p>Tobacco dependence medications are accessible and offered by clinic prescribers, and recipients are monitored for interaction of tobacco use with current medications or impact of smoking cessation on other medication the recipient is taking as part of a comprehensive tobacco dependence treatment plan.</p>	<p>Psychopharmacology Notes</p>	<p>This element was not included in NYSCRI 2.0. It is presumed that the prescriber will address this as part of standard practice related to side effects.</p>