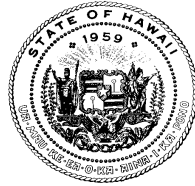


LINDA LINGLE
GOVERNOR OF HAWAII



CHIYOME L. FUKINO, M.D.
DIRECTOR OF HEALTH

STATE OF HAWAII
DEPARTMENT OF HEALTH
CHILD & ADOLESCENT MENTAL HEALTH DIVISION
3627 KILAUEA AVENUE, ROOM 101
HONOLULU, HAWAII 96816

In reply, please refer to:
A8070/CL017

April 11, 2007

TO: All Contracted Agencies

FROM: John O. Viesselman, M.D.
CAMHD Medical Director

SUBJECT: **Summary Annual Assessment**

CAMHD is issuing this clarification to the Interagency Performance Standards and Practice Guidelines (IPSPG) to reduce the confusion that exists surrounding the Summary Annual Assessment. The IPSPG on page 7 states “ All Contractors must do a Summary Annual Assessment as specified in the specific level of care standard for SEBD youth in their care at the time the annual assessment is due for SEBD youth who have received at least three (3) months of service from the Contractor. The Summary Annual Assessments address significant changes, current status and consequent recommendations.”

The following levels of care require a Summary Annual Assessment to be provided as part of service provision:

- Functional Family Therapy
- Intensive In-Home Intervention
- Intensive Outpatient Treatment for Co-Occurring Substance Abuse
- Intensive Outpatient Services for Independent Living Skills
- Therapeutic Foster Home
- Multidimensional Treatment Foster Care
- Therapeutic Group Home
- Independent Living Programs 18-21
- Independent Living Programs 16-18
- Community-Base Residential Level III
- Community-Base Residential Level II
- Community-Base Residential Level I

No separate service authorization will be generated for the Summary Annual Assessment when any of the above services have been provided to an SEBD eligible youth for at least three (3) months. The time spent on assessment activities are billable and the current service

authorization. If the three (3) month minimum is not met, then the Contractor may require an additional authorization to perform the Summary Annual Assessment.

The Mental Health Care Coordinator (MHCC) will request the Summary Annual Assessment from the Contractor when it is due. The Summary Annual Assessment is provided by the Contractor treating the SEBD eligible youth when there is no evidence of diagnostic change and the youth is making progress. If the Contractor suspects there is evidence to support a diagnostic change or if there are diagnostic questions that need to be addressed, then the Contractor should communicate these concerns to the MHCC and request a Focused or Comprehensive Mental Health Assessment.

The Summary Annual Assessment can be done by a Mental Health Professional (MHP) under the supervision of a Qualified Mental Health Professional (QMHP) or by a QMHP. The following is a suggested format for the Summary Annual Assessment content areas:

1. Date of report, and identifying information such as youth name, DOB, home school, grade, IDEA status as applicable.
2. Sources of information including length of treatment in current level of care, reference the last evaluation, interview if any, and assessment tools (including assessment tools provided by MHCC such as CAFAS, CASII, Achenbach).
3. Any changes and/or new information regarding developmental, medical, family, social, educational, legal, substance abuse, medical and psychiatric status, exposure to trauma and use of and reasons for psychotropic medications. (It is not necessary to detail information that remains unchanged from previous evaluation. A simple notation of remains unchanged from previous evaluation is sufficient.)
4. Summary of treatment and progress over the past year.
5. Description of young adult or youth and family strengths including formal and informal supports and highlighting newly developed strengths.
6. Clinical formulation and justification of diagnostic impressions: DSM IV-5 axes.
7. Summary of strengths, concerns, and description of needs that must be met for youth/young adult to function adequately in his/her home and community.
8. Recommendations will conform to the following:
 - a. Evidence-based interventions;
 - b. Describe and address the needs of the young adult or youth and family and build upon strengths;
 - c. Avoid specifying a particular services, program or eligibility status. For example, it should not be specified that young adult or youth needs "residential treatment." Instead, recommendations should focus on young adult or youth's particular needs, e.g. "the young adult or youth is in need of close supervision due to..."; or "the youth needs to build behavioral self management skills in order to achieve a higher level of functioning."

All Contracted Agencies
April 11, 2007
Page 3 of 3

- d. Include treatment interventions that are provided in the least restrictive manner that will address the needs of the young adult or youth and family and increase/maintain the functioning. These may include therapeutic interventions or behavior support strategies;
- e. Report is signed by the evaluator (and his/her supervisor when applicable) acknowledging responsibility for the assessment.

We appreciate your compliance with this clarification. Should you have any questions, please call me at 733-9230 or e-mail me at joviesse@camhmis.health.state.hi.us.

LPP:df

cc: EMT
Practice Development Supervisor