

POLICY AND PROCEDURE

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Treatment Planning Policy

Program: Behavioral Health Day Treatment / Partial Hospitalization Program

Effective Date: March 15, 2026

Review Date: March 15, 2027

Responsible Party: Clinical Director / Director of Medical & Clinical Services

Policy

The organization develops individualized, person-centered treatment plans for each individual served in the Day Treatment Program. Treatment planning is based on the comprehensive assessment, medical necessity, and the strengths, needs, abilities, and preferences of the individual served.

Treatment plans guide the delivery of services and interventions designed to reduce symptoms, improve functioning, and support recovery.

Purpose

The purpose of this policy is to:

- Ensure treatment is individualized and clinically appropriate
- Promote person-centered and recovery-oriented care
- Establish clear goals and measurable objectives
- Support coordinated service delivery
- Meet CARF and regulatory documentation standards

Initial Treatment Planning

An individualized treatment plan must be developed following completion of the comprehensive assessment and admission to the program.

The treatment plan must be completed within the timeframe required by applicable regulations and payer requirements.

The plan is developed in collaboration with the individual served and may include participation from family members or other supports when appropriate.

Required Elements of the Treatment Plan

Each treatment plan must include:

- Behavioral health diagnoses

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- Identified problems or needs
- Strengths and protective factors
- Individualized treatment goals
- Measurable objectives
- Planned interventions and services
- Responsible staff members
- Frequency and duration of services
- Target dates for goal review

Person-Centered Planning

Treatment planning is conducted in a person-centered manner. The individual served actively participates in the development of goals and interventions.

Clinicians encourage individuals to identify their priorities, personal goals, and preferred treatment approaches.

Multidisciplinary Participation

When appropriate, treatment planning may involve a multidisciplinary team including:

- Clinicians
- Medical providers
- Case managers
- Peer support specialists
- Other professionals involved in the individual's care

Team collaboration ensures coordinated and comprehensive care.

Treatment Plan Reviews

Treatment plans must be reviewed periodically to evaluate progress toward goals and continued medical necessity.

Reviews may occur:

- At regular intervals defined by program requirements
- When significant clinical changes occur
- When treatment goals are achieved or modified

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Treatment plan updates must be documented in the clinical record.

Documentation

Treatment planning documentation must include:

- Evidence of client participation
- Clearly defined goals and measurable objectives
- Progress toward goals
- Modifications to treatment interventions
- Signatures of the clinician and individual served when applicable

Integration with Measurement-Informed Care

Outcome measurement tools and clinical observations may be used to inform treatment planning decisions.

Assessment results and progress indicators should be considered when modifying treatment goals and interventions.

Discharge Planning Integration

Discharge planning begins early in the treatment process and is incorporated into treatment planning. The treatment plan should support preparation for transition to a lower level of care and continued recovery supports.

Quality Monitoring

Treatment plans may be reviewed through chart audits, supervision, and quality improvement activities to ensure compliance with clinical standards and regulatory requirements.