

POLICY AND PROCEDURE

REACH for Tomorrow

Treatment Plan Review and Update Procedure

Partial Hospitalization Program (PHP)

Effective Date: 08/15/2025

Approved By: Director of Medical and Clinical Services

Review Schedule: Annually or as Needed

Applies To: Integrated Primary Care/Behavioral Health, Day Treatment, PHP, Community Integration

Purpose

To establish a standardized process for reviewing and updating individualized treatment plans to ensure services remain clinically appropriate, person-centered, and aligned with current needs. Regular treatment plan review ensures continued medical necessity and supports progress toward recovery goals.

Policy

Treatment plans for individuals enrolled in the Partial Hospitalization Program (PHP) will be formally reviewed at least every thirty (30) calendar days or sooner when clinically indicated. Reviews ensure that treatment goals, interventions, and services reflect the current needs, strengths, risks, and progress of the individual served.

Treatment planning and review processes follow trauma-informed, recovery-oriented, and person-centered principles consistent with CARF behavioral health standards.

Responsible Staff

Treatment plan reviews are conducted by qualified clinical staff within their scope of practice. This may include:

- Psychiatrist or Psychiatric Nurse Practitioner
- Licensed Independent Social Worker (LISW)
- Licensed Professional Clinical Counselor (LPCC)

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- Licensed Social Worker (LSW) under supervision
- Other credentialed clinical staff as defined by organizational policy

The primary clinician or assigned treatment team member is responsible for coordinating the review process.

Review Frequency

Treatment plans must be reviewed and updated:

- At least every thirty (30) calendar days
- When there is a significant change in clinical status
- Following a crisis event or hospitalization
- When treatment goals have been achieved
- When new clinical needs are identified
- Prior to step-down, discharge, or transfer to another level of care

Treatment Plan Review Procedure

1. Clinical Progress Review

The clinician reviews progress notes, group participation, symptom changes, and outcome measures to evaluate progress toward established goals.

2. Symptom and Risk Reassessment

The clinician reassesses current symptoms, safety risks, and functional status including suicide risk, relapse risk, and other clinical concerns.

3. Review of Goals and Objectives

Each treatment goal and objective is evaluated to determine:

- Progress achieved
- Barriers to progress
- Continued relevance to current needs

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4. Modification of Treatment Plan

Based on the review, the clinician may:

- Continue existing goals
- Modify goals or objectives
- Add new goals
- Discontinue goals that have been achieved

5. Adjustment of Interventions

Interventions and services may be adjusted to reflect current clinical needs, including therapy modalities, medication management, care coordination, or skills training.

6. Multidisciplinary Input

Input from treatment team members, including medical providers and other clinicians, may be incorporated into the review process.

7. Person Served Participation

The individual served participates in the review process whenever possible. Their preferences, feedback, and recovery goals are incorporated into the updated treatment plan.

Documentation Requirements

Treatment plan review documentation must include:

- Date of review
- Summary of progress toward goals
- Updated assessment of symptoms and risks
- Description of modifications to goals or interventions
- Continued medical necessity for PHP services
- Signature and credentials of the clinician completing the review

All documentation is maintained in the electronic health record.

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Quality Monitoring

Treatment plan reviews are monitored through routine chart audits and quality assurance processes to ensure:

- Compliance with the thirty-day review requirement
- Accurate documentation of progress
- Alignment between treatment goals and services delivered
- Continued medical necessity for the level of care