



WRAPAROUND PROVIDER NETWORK



PROVIDER BULLETIN

NUMBER: 1-09

TITLE: Maintenance of Client
Charts for Providers/
Agencies Servicing Clients
through the Wraparound
Provider Network

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This Provider Bulletin Supersedes and
Rescinds Provider Bulletins #1-04,
dated June 21, 2004, #1-05 dated 11/5/2004
& #3-05 dated 4/27/05, #1-07 dated 1/1/07

The following **mandatory** guidelines must be followed with regard to the maintenance of Wraparound Provider Network (WPN) client files.

1. Every Wraparound/REACH affiliated client must have his/her own file, unless the agency is providing one or more other services to one or more family members of the Wraparound/REACH client in which having a family file would then be permissible. In addition, if the Wraparound/REACH client alone is receiving more than one service from an agency, only one file needs to be maintained on that client. Every FISS family must have their own file.
2. Each file must clearly indicate the client/family name. If the client is a sibling/caregiver of a Wraparound/REACH enrollee and the only person receiving services from that agency, then the identified **enrollee's** name must also be clearly visible on the file.
3. The file must be maintained in an orderly and neat fashion, i.e. – separate file into sections such as, Provider Referral Form/Intake information, Consents, Assessments, Plans of Care/Crisis Plan (not be applicable for FISS), Progress Notes/ Service Documentation, Coordinated Service Team (CST) information (FISS only), Other Correspondence, Discharge /Closing Summaries, etc. If serving more than one family member, similar documents for each individual may be maintained together in the applicable section. For example, if providing tutoring for John Smith, enrollee, and AODA counseling for the sibling, James Johnson, the provider referral forms received for each individual can both be filed under the Provide Referral Form/Intake Section.
(If agencies already have an established, organized chart format referencing similar chart sections, then they may continue to keep their files in that manner.)
4. The Progress Note/Service Documentation section should contain “subsections” if providing more than one service to a client and/or if providing more than one service to a family. Subsection tabs would reference the different services and corresponding notes

provided to the individual and/or family. For example, one subsection tab would reference the area where tutoring logs would be kept for John Smith, enrollee, and another subsection tab may indicate AODA Counseling notes kept for James Johnson, sibling.

5. Plans of Care (POC): **(WRAPAROUND/REACH ONLY)**

- The agency must have time-applicable POC(s) in the file relevant to the whole time the client was serviced. The only exception to this requirement would be if the client/family did not consent to share the POC with the Provider. If this is the case, the Provider should place a note in the POC section of the file indicating such.
 - As the POC's are done on-line, the Care Coordinators have the option to print out what is called an "Open Needs" POC or send an e-mail transmittable version. The agency may keep an "Open Needs" or an e-mail transmittable version of the POC in the file. The "open needs" POC contains all the basic demographic info., the strengths list, the family narrative and the reactive crisis plan but it only contains the Needs/Domains that are **currently active.** The e-mail transmittable version contains all the same information, but contains both active needs and attained needs.
 - **Upon client discharge,** the following "thinning" of the **POC section** is permissible: An agency may discard/shred any "Needs/Domain" Sheets that **are not** relevant to the service they provided.
6. Most recent correspondence/documentation must be on the top in each applicable section.
 7. Charts must be easily accessible.
 8. It is preferable that charts be maintained in alphabetical order by client name. If this is not feasible for some specific reason, at minimum charts must be made available in alphabetical order when the agency is being audited.
 9. Current/active files must be separated from disenrolled client files.
 10. Files must be maintained in a secure, fireproof cabinet or room.

The above expectations are applicable to all services within the Wraparound Provider Network unless otherwise stated in a "service specific" policy and procedure.

IMPORTANT

As your client files contain mental health information, the guidelines for the storage of the file upon the client's discharge from services at your agency is governed by administrative code HFS 92.12. This code states, "In the case of a minor, records shall be retained until the person becomes 19 years of age or until 7 years after treatment has been complete, whichever is longer."

FOR FURTHER INFORMATION, PLEASE CONTACT:

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