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|  | **CHART REVIEW TALLY SHEET (Part I) - Tally list of 20% (minimum of 10) client charts.**  \*\*\*Reminder: Only count toward these items those face-to-face client contacts made by staff who met ACT team inclusion guidelines (See OS1 and OS5; e.g., exclude staff who work less than 16 hours with the team). Review each Chart Review Log PT I to exclude non-ACT staff before tallying data here. Also, for OS2 and CP1, only consider those charts with at least one contact. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Unique Client ID** | **OS2: Team Approach** | **OS6. Priority Service Population** | | **CT4. Psychiatric Provider Contacts (and CP7)** | | **CP1: Community-Based Services** | **CP3: Intensity of Service** | **CP4: Frequency of Contact** | **CT7, CP8, EP1 - EP3 Full Responsibility for Service Items, and EP7** | | | | | | | | | | | | | | | | | | | | | |
| For each chart, code the following: | | | | | | | | | | | | | | | | | | | | | |
| **Total #** of ACT team members in contact with client during a 4-week period (\*DACTS Standard is more than 1 team member in first 2 weeks) | Does diagnosis fit w/ ACT criteria?  If not, note diagnosis. | | How often seen by ACT psychiatric care provider?1  Code:  **1** = within 6 weeks  **2** = within 3 months  **3** = 3+ months  (add \* if therapy) | | **% of total** contacts that are community-based (collapse “community” and “institution” together)  (Total # face-to-face community-based contacts/Total # of face-to-face office & community-based contacts) | **Mean/ average #** of minutes per week over 4-week period  (Total minutes/4) | ***Mean/average*** # of face-to-face contacts (office and community) per week over 4-week period | **+** = If endorsed by  team as receiving  this Service (Excel  Spreadsheet) | | | | | | **H** = Evidence of Higher Quality  best practice services  **L** = Evidence of Lower Quality  best practice services | | | | | | | | **\*** = If service systematically  provided (i.e., there is a  deliberate pattern of  service delivery). | | | | | | | |
| Integrated Tx for Co-Occurring Disorders (EP1) | | | | SEE services (EP2) | | | | Psych Rehab  Services (CP8) | | | | WMR Services (EP3) | | | | Psycho-therapy (EP7) | | | Health (CT7) | | |
| 1. |  |  | |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  | |  |  |  |  |  |  |  |
| 2. |  |  | |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  | |  |  |  |  |  |  |  |
| 3. |  |  | |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  | |  |  |  |  |  |  |  |
| 4. |  |  | |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  | |  |  |  |  |  |  |  |
| 5. |  |  | |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  | |  |  |  |  |  |  |  |
| 6. |  |  | |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  | |  |  |  |  |  |  |  |
| 7. |  |  | |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  | |  |  |  |  |  |  |  |
| 8. |  |  | |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  | |  |  |  |  |  |  |  |
| 9. |  |  | |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  | |  |  |  |  |  |  |  |
| 10. |  |  | |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  | |  |  |  |  |  |  |  |
| 11. |  |  | |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  | |  |  |  |  |  |  |  |
| 12. |  |  | |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  | |  |  |  |  |  |  |  |
| 13. |  |  | |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  | |  |  |  |  |  |  |  |
| 14. |  |  | |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  | |  |  |  |  |  |  |  |
| 15. |  |  | |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  | |  |  |  |  |  |  |  |
| 16. |  |  | |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  | |  |  |  |  |  |  |  |
| 17. |  |  | |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  | |  |  |  |  |  |  |  |
| 18. |  |  | |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  | |  |  |  |  |  |  |  |
| 19. |  |  | |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  | |  |  |  |  |  |  |  |
| 20. |  |  | |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  | |  |  |  |  |  |  |  |
| 21. |  |  | |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  | |  |  |  |  |  |  |  |
| 22. |  |  | |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  | |  |  |  |  |  |  |  |
| 23. |  |  | |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  | |  |  |  |  |  |  |  |
| 24. |  |  | |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  | |  |  |  |  |  |  |  |
| 25. |  |  | |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  | |  |  |  |  |  |  |  |
| 26.  27.  28. |  |  | |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  | |  |  |  |  |  |  |  |
| 27. |  |  | |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  | |  |  |  |  |  |  |  |
| 28. |  |  | |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  | |  |  |  |  |  |  |  |
| 29. |  |  | |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  | |  |  |  |  |  |  |  |
| 30. |  |  | |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  | |  |  |  |  |  |  |  |
| **Final Calcula-tions** | **OS2: Team Approach**  For those with at least 1 face-to-face contact, total # of clients with contacts with at least 3 team members/# of client charts reviewed.  **\_\_\_\_\_\_\_\_\_\_\_\_ %**  Ex. Of 20 charts reviewed, 2 charts did not have any contacts that month. Of the 18 charts with at least 1 face-to-face contact, 14 saw at least 3 staff in 4 weeks. 14/18 = 78%. | | **OS6: Priority Service Pop.**  Total % of charts (# of “yes” / total # charts with data inputted)  **\_\_\_\_\_\_\_\_\_\_\_\_ %**  Ex. Of 16 charts reviewed, data were entered for 15 charts (one was missing this data point). Of the 15 with diagnoses reviewed, 13 were judged to meet criteria. 13/15 = 87% | | **CT4. Psych Care Provider**  Total % of charts meeting “1” criteria (6 weeks or less):  **\_\_\_\_\_\_\_\_\_\_\_\_ %**  Total % of charts meeting “2” criteria (seen within 3 months):  **\_\_\_\_\_\_\_\_\_\_\_\_ %**  Total % of charts meeting “3” criteria (seen outside of 3 months):  **\_\_\_\_\_\_\_\_\_\_\_\_ %**  **% Therapy\_\_\_\_\_\_\_\_** | | **CP1:** **Community-Based**  Median Value = when rank-ordered, average between middle two values or middle value if odd # of charts. Be sure to only include those charts that had at least 1 face-to-face contact in 4-week period.  **Median\_\_\_\_\_\_\_\_\_\_\_\_**  Ex. Of 20 charts reviewed, 2 charts did not have any contacts that month. Of the 18 charts with at least 1 face-to-face contact, the median percent (i.e., average of Chart #9 (90%) and Chart 10 (100%) when rank-ordered was 95%. | | | **CP3: Intensity**  Median Value = when rank-ordered, average between middle two values or middle value if odd # of charts. All charts are included (i.e., those with no contacts are included).  **Median: \_\_\_\_\_\_\_\_\_\_\_\_**  Ex. Of 20 charts reviewed and rank-ordered from lowest to highest, the median Intensity (i.e., average of Chart #9 (30 mins) and Chart 10 (40 mins)) when rank-ordered was 35 mins.  TIP: Enter total minutes per chart into the tally, identify the median intensity and then divide by 4 to calculate the weekly rate used to rate CP3. | | | | | | | | | | **CP4: Frequency**  Median Value = when rank-ordered, average between middle two values or middle value if odd # of charts. All charts are included (i.e., those with no contacts are included).  **Median: \_\_\_\_\_\_\_\_\_\_\_\_**  Ex. Of 20 charts reviewed and rank-ordered from lowest to highest, the median number of contacts (i.e., average of Chart #9 (1.5/wk) and Chart 10 (2/wk)) when rank-ordered was 1.75/week.  TIP: Enter total number of contacts per chart into the tally, identify the median frequency and then divide by 4 to calculate the weekly rate used to rate CP4. | | | | | | | | | | |

**Note:** Refer to the Worksheets for Methods I and 2 in TMACT Part II; Data entered here in corresponding (B) and (C) can be transferred into those worksheets.

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| **Item/Service Type** | **Method 1 (consider all charts reviewed)** | | | **Method 2 (consider subsample of charts endorsed by team as receiving service)** | | |
| **(B) % of all charts coded with an**  **H (high quality) OR**  **L (low quality)**  **(H + L) / all charts** | **(C) % of charts judged to have service delivered by team at all (H or L) coded with an**  **H (high quality) only**  **(H) / (H +L)** | **(C) % of charts judged to have service delivered by team at all (H or L) coded with (\*) as systematic**  **(\*Systematic) / (H + L)** | **(B) % of charts endorsed by team as receiving service from team (+) (i.e., “subsample”) coded with an H (high quality) OR L (low quality)**  **(H + L) / (subsample)** | **(C) % of subsample (+) observed to have some service (H or L) that was coded with an H (high quality) only**  **(H) / (H + L subsample)** | **(C) % of charts indicated as receiving service from team (+) (i.e., “subsample”) coded with (\*) as systematic**  **(\*Systematic) / (subsample)** |
| **EP1.**Integrated Treatment for Co-Occurring Disorders |  |  |  |  |  |  |
| **EP2.** Employment and Educational Services: |  |  |  |  |  |  |
| **CP8.** Psychiatric Rehab Services |  |  |  |  |  |  |
| **EP3.** WMR Services |  |  |  |  |  |  |
| **EP7**. Psychotherapy\*\* |  |  |  |  |  |  |
| **CT7.** Health |  |  |  |  |  |  |

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| **Ex.** | **Evaluation Date** | **Most Recent Psych Provider F-to-F Note Date** | **2nd Most Recent Psych Provider Note Date** | **Coding** |
| **A** | **Sept 1,2017** | **July 28th, 2017** | **June 7th, 2017** | **1** |
| **B** | **Sept 1,2017** | **August 21st, 2017** | **May 30th, 2017** | **2** |
| **C** | **Sept 1,2017** | **July 2nd, 2017** | **May 19th, 2017** | **1** |
| **D** | **Sept 1,2017** | **July 2nd, 2017** | **April 24th, 2017** | **2** |
| **E** | **Sept 1,2017** | **August 21st, 2017** | **March 1, 2017** | **3** |
| **F** | **Sept 1,2017** | **May 28th, 2017** | **March 25th, 2017** | **3** |
| **G** | **Sept 1, 2017** | **May 28th, 2017** | **May 1st, 2017** | **3** |

1For CT4, examine the timespan between the last two provider face-to-face contacts and consider the appropriate rating: If the timespan is more than 3 months, code it as a “3” (3+ months); if between 7 weeks up to 3 months, code as a “2,” and if 6 weeks or less, code as a “1.”

Also consider the timespan between the date of the TMACT review and the most recent face-to face contact. If there is significant lapse of time without a documented contact (more than 3 months), adjust the code to a “3” (see examples F and G in the following Table, where the timespans were within 2 months and within 6 weeks, respectively, but the most recent date as more than 3 months ago).