MHS Assessment Processes

Process	Standard Tasks	Who
Pre-assessment	Appointment made Review existing notes / testing results Gather and collate information from other sources Ensure adequate time / space Identifies any cultural/interpretative needs Reminder client of appointment 1-2 days prior (if possible) Advise client to report to reception on arrival at CMH	Case Manager
Attends	NO -Phone and arrange new time Discuss non-attendance with team/referrer Letter to client (attached to 3rd appt notice) that this is the final appointment offered.*(non-attendance = no further contact)* DNA for 3 appointments then auto exit (letter to referrer/GP/client	
YES Undertake Assessment *Risk Assessment and management form* *Integrated Data – ie HoNOS*	Discuss process with client, and family if appropriate Clarify privacy/information sharing protocols/ Tikanga if appropriate Complete contact form Complete comprehensive assessment *(Includes risk assessment)* Check interpretation of information / give client and family relevant information at this time Collateral information from family/support Discuss provisional diagnosis, whether they meet entry criteria and options for treatment with client and family	
Meets Criteria?	NO – Exit Letter to GP outlining reasons / alternatives to MHS.	
YES Case Management and Treatment Planning	Clarify priorities for intervention / treatment goals with client and their significant others Outline possible Tx options and risk management plan - Interventions / aims - frequency of contact - contingency/crisis plans - support for wider family - relapse/recovery/discharge planning Discuss probable timelines associated with treatment plan/risk assessment Discuss review processes and discharge criteria Discuss MDT function and responsibilities	

→ Treatment Process