	January-21			
Optum - Beha	avioral Network Services			
Skills Buildin	g Treatment Record Tool - Youth			
Facility Name:				
Reviewer Name:				
Member Gender:				
Member Age: Date of Review:				
	Rating Scale: NA = Not Applicable Y = Yes N = No	Y	Ν	NA
	The member has significant difficulty gaining and utilizing skills necessary to function adaptively in home and			
	community settings, and attain or retain capability for independence such as skills related to the following areas:			
1	vocational/educational, social relationships/support, family, basic living skills, or community/legal.			
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	When a member is accessing services, a comprehensive diagnostic assessment is completed within 10 calendar		—	<u> </u>
2	days.			
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	For members under the age of 19, there was evidence that the CANS was completed and or updated and was		<u> </u>	
	utilized to identify the Member specific functional need(s) to be addressed in the Skills building/CBRS treatment plan.			
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	The diagnostic assessment defines the level of the member's motivation in establishing the readiness to engage		<u> </u>	
	in skills building activities.			
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	The discusses is accompany defines the memberie evently differently with the (ODDC) and			r
-	The diagnostic assessment defines the member's overall skills building/CBRS goal.		ļ	ĺ
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6	The diagnostic assessment defines the member's present level of skills or knowledge relative to the skills building/CBRS goal.			
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7	The diagnostic assessment defines the skills and knowledge the member needs to achieve the skills building/CBRS goal.			
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8	The diagnostic assessment defines the resources the member needs to achieve the skills building/CBRS goal.			
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9	The evaluation of resources includes whether the member has had a history and physical examination within the past 12 months.			
10	If the member has not received a history a physical examination within the last 12 months, the provider refers the member to a primary care physician and assists the member with receiving an annual examination thereafter.			
	There is evidence in the record that the treatment plan was in the record within 10 days of the first Skills Building/CBRS treatment appointment.			
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12	The rehabilitation plan contains observable and measurable objectives aimed at assisting the member achieve his/her skills building/CBRS goal.			
13	For members under the age of 19, there is evidence that the CANS results were used in the identification of functional needs and strengths for developing the skills building/CBRS plan.			
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	The skills building/CBRS plan contains specific interventions for each objectives.			1
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	For a child less than four (4) years of age, the child's parent or legal guardian should be actively involved by being present on the premises and available for consultation with staff during the delivery of services. They do not have to participate in treatment sessions or be present in the room in which the service is being conducted.		
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16	For a child four to twelve (4-12) years of age, the child's parent or legal guardian should be actively involved. They should be available for consultation with the staff providing the service. They do not have to participate in the treatment sessions.		
	For a child over twelve (12) years of age, the child's parent or legal guardian should be involved as appropriate. If the interdisciplinary team recommends that the child's parent or legal guardian not be involved in any aspect of treatment, then then reasons for excluding them must be documented in the rehabilitation plan.		
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18	For a child whose parent or legal guardian does not participate in the services, the provider must document all efforts made to involve the parent or legal guardian and must make appropriate adjustments to the rehabilitation plan to address the lack of involvement.		
19	The skills building/CBRS plan identifies who is responsible for providing the intervention.		
20	The skills building/CBRS plan identifies the amount, frequency, and expected duration of services.		
21	The skills building/CBRS plan contains the member/member representatives signature as an attestation that the member/member representative agrees with and participated in the development of the rehabilitation plan.		
	The provider and the member/member's parent or legal guardian shall conduct an intermittent skills building/CBRS plan review to incorporate progress, different goals, or change in service focus.		
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If the member has not been engaged in services, the provider shall assist the member/member's representative with re- evaluating the member's readiness for skills building/CBRS as well as the steps the member/member's representative wants to take to engage in services.		T
with re- evaluating the member's readiness for skills building/CBRS as well as the steps the member/member's representative wants to take to engage in services.		
with re- evaluating the member's readiness for skills building/CBRS as well as the steps the member/member's representative wants to take to engage in services.		
representative wants to take to engage in services. If the member has not benefitted from services, the provider shall assist the member/member's representative		
f the member has not benefitted from services, the provider shall assist the member/member's representative		
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with determining whether the skills building/CBRS plan should be modified or whether the member could benefit		
rom other services.		
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The review must include a reassessment of the member's continued need for services.		
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The review must include an evaluation of change's in the member's functional needs and strengths.		
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memoer and family to develop the skills building/CRPS treatment plan		
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	ere is evidence in the record of teaming between the responsible licensed clinician, the paraprofessional, the ember, and family to develop the skills building/CBRS treatment plan.	