## The Right Door for Hope, Recovery, and Wellness

Chapter Title	Chapter #	Subject #		
Recipient Rights	RR	115.1		
Subject Title Comprehensive Examinations	Adopted	Last Revised	Reviewed 4/18/06; 3/17/10; 1/4/17;	
	3/1/96 07/10/2	07/10/20	07/10/20; 8/16/21; 8/31/22; 8/18/23; 8/12/24	

#### **PROCEDURE**

### **Application**

This procedure shall apply to The Right Door for Hope, Recovery, and Wellness and all services operated by or under contract with it. This procedure shall serve as a guide to assure compliance with Board policy regarding Recipient Rights.

#### 1. Evaluations

An initial comprehensive examination shall be completed and will include a diagnosis of physical and mental conditions and a prescribed program for initial care, treatment and rehabilitation of the diagnosed conditions, pending the completion of a total Individual Plan of Service. The Primary Clinician or Case Services Manager will be responsible for coordinating these evaluations.

#### 2. Reassessments

- 2.1. Re-assessment will be a part of the required periodic review. It will include a diagnosis of the physical and mental condition of the person served and an evaluation of the current written Individual Plan of Service.
- 2.2. All clinical results of assessments and re-assessments shall be kept in the same record as the written Individual Plan of Service of the person served.

## 3. Inpatient Admission to Psychiatric Hospital

3.1. Within 24 hours of admission to a psychiatric hospital or state center, each resident shall receive a comprehensive physical and mental examination. The comprehensive examinations shall be thorough and consistent with professional standards.

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- 3.2. For persons served with developmental disabilities, the mental examinations may include psychological and educational evaluations and assessment of adaptive behavior level.
- 3.3. For persons served with mental illness, the mental examination may include a history, psychological evaluation and a mental status examination. The results shall be recorded in the clinical record of the person served.

Kerry Possehn, Chief Executive Officer		Date	