



Community Mental Health – Case Review Meetings and Client Review Procedure

Effective: 15 October 2018

1. Guiding Principles

All clients of the service are to receive regular review of their care in a multidisciplinary team (MDT) format.

Clinical review meetings provide the means by which assessment and intervention for clients is planned and evaluated. All clinical reviews are chaired by the consultant psychiatrist or delegate. Alternatively, clinical review may take place with the treating psychiatrist consumer, relevant agencies, carer/significant other and case manager by arranging an appointment outside clinical review times.

The process of clinical review is to provide an MDT framework for the regular review, internal referral and closure of clients. Following assessment and at regular intervals during treatment, the clinician should review the Management Plan with the consumer, carer and/or significant others and evaluate progress.

Clinical review can provide new options for management that 'shares the care' and protects the workload and wellbeing of staff. Such reviews are also useful in avoiding 'therapeutic drift' where treatment continues for an unspecified time without clear goals.

2. Procedure

Wheatbelt Mental Health Service clinical reviews can be undertaken in three formats:

1. Client lead - In an appointment with the client, their significant other if appropriate, the treating psychiatrist, case manager and other relevant agency staff.
2. MDT clinical review meetings. Clients can be invited and included in the MDT if appropriate.
3. Complex review meeting every fourth Tuesday at 1200hrs to discuss cases that are presenting complicated issues. Case Managers are encouraged to invite consumer / carer / significant others / relevant agencies to present to WMHS Service-wide MDT review.

Clinicians are required to enter the name of the client on the client review list located on the clinical drive for the relevant stream.

Clinical reviews meetings occur four times a week for the adult and elderly streams and once per week for CAMHS.

Three monthly client reviews are documented in the review module on PSOLIS before the MDT presentation. Six week reviews are documented in a service event in PSOLIS. The text should reflect decisions made; strategies planned and who will implement them.

Routine Client Reviews

The client is to be verbally presented to the MDT using the following format:

- Name, demographics, diagnosis, reason for referral social and family factors.
- Brief history, time frame of symptoms.
- Problem List - current problems and client needs and goals.
- Management Plan including recommended treatment and number of sessions and progress so far.
- Interventions you are doing to progress outcomes of identified goals.
- National Outcome Case Collection measures (NOCC) collected prior to review
- Physical health needs.

The 'Your Experience of Service (Yes)' survey or the 'Experience of Service Questionnaire (ESQ)' is offered to the client at the first three month review.

Urgent Client Reviews

The following cases are considered urgent and must be reviewed within **one** week:

- Self-harm, attempted suicide or death of a client.
- Clinical incidents.
- Duties undertaken by Authorised Mental Health Practitioners (AHMP).

Six Week Client Reviews

All clients are to be reviewed six weeks from the date of referral into the service at the Clinical Review Meeting.

Three Monthly and Ongoing Reviews

Client care should be reviewed and discussed three monthly in one of the above formats. After considering the client summary, the MDT and the clinician, consumer / carer / significant other / relevant agencies should discuss any outstanding issues, options for further treatment, management and discharge planning.

On Closure

Before discharge, clients should be discussed at the Simple Closures / Clinical MDT Review. All discharge documentation is to be completed before presentation.

Documentation

All clinical reviews and any changes to the treatment or management of the client as a result of a review should be discussed with client and relevant others and documented in the Management Plan on PSOLIS. A new management plan is to be formulated with the client and significant others if appropriate, reflecting current issues/problems/needs.

**This document can be made available in alternative formats
on request for a person with a disability**

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