



Statewide Standardised Clinical Documentation for Mental Health Services

1. Purpose

This Policy mandates the use of Statewide Standardised Clinical Documentation for all Western Australian public mental health services to document clinical care.

Statewide Standardised Clinical Documentation facilitates standardised recording, retrieval and sharing of medical record information at all points of care for the consumer, from triage through to discharge, with the primary goal of improving mental health consumer health outcomes by enhancing the clinical information available to inform care decisions. Statewide Standardised Clinical Documentation incorporates a range of tools for public mental health services to record information required under the *Mental Health Act 2014*, the Chief Psychiatrist's Standards for Clinical Care and National Standards for Mental Health Services 2010. The Policy additionally aims to address recommendations from the Review of admission or referral to and the discharge and transfer practices of public mental health facilities/services in Western Australia.

This Policy is a mandatory requirement under the *Mental Health Policy Framework* pursuant to section 26(2)(c) of the *Health Services Act 2016*.

This Policy supersedes OD: 0526/14 *Statewide Standardised Clinical Documentation (SSCD) for Mental Health Services*.

2. Applicability

This Policy is applicable to Health Service Providers providing mental health services.

To the extent that the requirements contained within this Policy are applicable to the services purchased from contracted health entities, Health Service Providers are responsible for ensuring these requirements are accurately reflected in the relevant contract and managed accordingly.

3. Policy requirements

As the pathway to consumers accessing public mental health services varies, all Health Service providers must develop their own procedures to ensure compliance with this Policy.

3.1 Use of Statewide Standardised Clinical Documentation

The below section outlines the minimum mandatory requirements for completing Statewide Standardised Clinical Documentation. All Statewide Standardised Clinical Documentation must be completed utilising the Psychiatric Services Online Information System.

Further information on completing the appropriate Statewide Standardised Clinical Documentation and storage of medical records, is located in the *Statewide Standardised Clinical Documentation for Mental Health Services Procedure*. All Health Service Providers are required to adhere to this Procedure.

3.1.1 Adult Public Mental Health Services

All adult public mental health services must use the respective designated Statewide Standardised Clinical Documentation for:

- Triage.
- Risk Assessment and Management Plan (Currently on Psychiatric Services Online Information System as Brief Risk Assessment).
- Mental Health Assessment.
- Physical Examination.
- Physical Appearance.
- Treatment, Support and Discharge Plan (Currently on Psychiatric Services Online Information System as Management Plan).
- Care Transfer Summary. (If a service has an alternative appropriate format for this document only, they may use that in place of the Care Transfer Summary).

3.1.2 Child and Adolescent Public Mental Health Services

All child and adolescent public mental health services must use the respective designated Statewide Standardised Clinical Documentation outlined in Section 3.1.1, with the exception of:

- Physical Appearance.

3.1.3 Community or Non-Acute In-Patient Mental Health Care Settings

All Community or Non-Acute In-Patient Mental Health Care Settings must use the respective designated Statewide Standardised Clinical Documentation outlined in Section 3.1.1. Completion of the Statewide Standardised Clinical Documentation for:

- Physical Examination.

may be undertaken in alternative appropriate formats as outlined in the *Statewide Standardised Clinical Documentation for Mental Health Services Procedure*.

3.2 Storage of Statewide Standardised Clinical Documentation

All Statewide Standardised Clinical Documentation completed on the Psychiatric Services Online Information System must be printed and placed in the patient's medical record or stored in the patient's Electronic Medical Record (if available).

4. Compliance monitoring

Health Service Providers are responsible for ensuring compliance with this Policy and must undertake annual reviews to ensure that requirements of the policy are being met.

The System Manager will monitor compliance with this Policy by requesting information from relevant Health Service Providers regarding:

- Audits of patient records.
- Information pertaining to policies, protocols, referral pathways, procedures, and staff training and supervision in relation to Statewide Standardised Clinical Documentation.
- Information provided to consumers and their family members and/or carers.

The System Manager will periodically evaluate the effectiveness of this policy. As part of these evaluations, the System Manager will:

- Analyse data from routine data sources including the Department of Health's Mental Health Data Collection.
- Surveys of personnel from relevant Health Service Providers and other stakeholders deemed appropriate, e.g. the Office of the Chief Psychiatrist.

5. Related documents

The following documents are mandatory pursuant to this Policy:

- [Statewide Standardised Clinical Documentation for Mental Health Services Procedure.](#)

6. Supporting information

The following information is not mandatory but informs and/or supports the implementation of this Policy:

- [Triage to Discharge – Mental Health Framework for State-wide Standardised Clinical Documentation](#)
- [Review of admission or referral to and the discharge and transfer practices of public mental health facilities/services in Western Australia](#)
- [Chief Psychiatrist's Standards for Clinical Care](#)

7. Definitions

The following definition(s) are relevant to this Policy.

Term	Definition
Community Mental Health Care Setting	Community mental health service means a service that conducts assessments or examinations for the purposes of the <i>Mental Health Act 2014</i> or provides treatment in the community but does not include the private practice of a medical practitioner or other health professional.
Electronic Medical Record	An electronic medical record is an information and communication technology solution that captures data from various clinical systems and applications. It provides

	benefit to both clinicians and consumers by bringing together a single, integrated view of a patient's record that is available to treating health professionals regardless of where they are.
Non-Acute In-Patient Mental Health Care Setting	A health service in which the primary clinical purpose or treatment goal is maintenance of and support for patient with impairment, activity limitation or participation restriction due to a health condition. Following assessment or treatment, the patient does not require further complex assessment or stabilisation.
Public Mental Health Service	A public mental health service is any health service provider providing mental health services or contracted entity under a contract or other agreement entered into with a health service provider to provide mental health services.

8. Policy contact

Enquiries relating to this Policy may be directed to:

Title: Program Manager, Mental Health Unit
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9. Document control

Version	Published date	Effective from	Review date	Amendment(s)
MP 0155/21	17 March 2021	17 March 2021	March 2024	Original version
MP 0155/21 v.1.1	9 August 2021	9 August 2021	March 2024	Minor amendment to update Supporting Information – 'Triage to Discharge Mental Health Framework for SSCD'.
MP 0155/21 v.1.2	23 August 2023	23 August 2023	March 2024	Amendment as listed below.
Policy contact updated from Clinical Excellence Division to Governance and System Support Directorate due to the Mental Health Unit transferring from the Clinical Excellence Division to the Strategy and Governance Division.				

10. Approval

Approval by	Nicole O'Keefe, Assistant Director General Strategy and Governance, Department of Health
Approval date	15 March 2021

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