


Name of Policy: Progress Notes Policy Number: 3364-160-CR-106 Approving Officer: Chief Executive Officer – UTMCM Responsible Agent: Chair, Department of Psychiatry Administrative Director, Department of Psychiatry Scope: OP-Clinic-Psychiatry		 Effective date: 9/22/2025 Original effective date: 8/2004	
Key words: psychiatry, progress note, documentation, patient record			
<input type="checkbox"/>	New policy proposal	<input checked="" type="checkbox"/>	Minor/technical revision of existing policy
<input type="checkbox"/>	Major revision of existing policy	<input type="checkbox"/>	Reaffirmation of existing policy

(A) Policy statement

Documentation shall be completed for each instance that a service is provided for the specific service type and in a timely manner as required by the Legal Ambulatory Medical Record Policy.

(B) Purpose of policy

Progress notes shall reflect progress or lack of progress toward the achievement of specified treatment outcomes identified on the individual service plan (ISP).

(C) Procedure

- (1) When the same staff person provides more than one type of service in the same day to an individual, the staff shall complete a separate progress note for each of the different types of services provided.
- (2) At minimum, documentation shall include the following information:
 - (a) The date of the service contact and the date of documentation of the progress note, if different;
 - (b) Time of day and duration of each service contact;
 - (c) The location of each service contact;
 - (d) A description of the service(s) rendered;

- (e) Whether or not the intervention provided is specifically authorized by the service plan that was developed based on a mental health assessment. The exception shall be the following circumstances:
 - (i) Crisis intervention mental health service when not listed on the treatment plan;
 - (f) The assessment of the patient's progress or lack of progress, and a brief description of progress made, if any;
 - (g) Significant changes or events in the life of the patient, if applicable;
 - (h) Recommendation for modifications to the ISP, if applicable; and
 - (i) The signature and credentials, or initials, of the provider of the service and the date of the signature; and documented evidence of clinical supervision of staff completing the review, as applicable.
- (3) Documentation in the progress note, or elsewhere in the individual patient record, may include a notation that there is no change in the patient's risk of harm to self or others, or, if there is a change, the results of a review of the patient's ideation, intent, plan, access, and previous attempts.
- (4)

<p>Approved by:</p> <div style="display: flex; justify-content: space-between;"> <div>/s/</div> <div>9/22/2025</div> </div> <hr style="width: 100%;"/> <div style="display: flex; justify-content: space-between;"> <div>Daniel Barbee Chief Executive Officer</div> <div>Date</div> </div> <div style="display: flex; justify-content: space-between;"> <div>/s/</div> <div>9/11/2025</div> </div> <hr style="width: 100%;"/> <div style="display: flex; justify-content: space-between;"> <div>Robert Smith, MD, Ph.D. Chair - Department of Psychiatry</div> <div>Date</div> </div> <div style="display: flex; justify-content: space-between;"> <div>/s/</div> <div>9/11/2025</div> </div> <hr style="width: 100%;"/> <div style="display: flex; justify-content: space-between;"> <div>Stephanie Calmes, Ph.D., LPCC-S, LICDC-CS Administrative Director - Department of Psychiatry</div> <div>Date</div> </div> <p><i>Review/Revision Completed By: Agency Administration</i></p>	<p>Policies Superseded by this Policy</p> <ul style="list-style-type: none"> • ODMH-CR-106 <p>Initial effective date: August 2004</p> <p>Review/Revision Date:</p> <p>07/2002 06/2004 08/2005 08/2007 01/14/2013 01/06/2014 09/16/2016 9/2/2022 9/22/2025</p> <p>Next review date: 9/22/2028</p>
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