Proposed changes to the HRA/Personal Health Survey:

Workgroup members will vote on these recommendations at the February 9, 2022 meeting. These are not considered official recommendations of the Workgroup until after the vote.

1. Make the HRA optional.
   a. Most, if not all, agencies have health information they are required to gather for their accrediting and funding bodies that is different from what is on the HRA. Propose to make the HRA shorter and optional as agencies will likely be gathering other health information that is not included on the HRA.

2. Remove the Personal Health Survey. It is repetitive from what is in the HRA and CANS.

3. Changes to #18:
   a. Remove Primary Care Doctor’s Name-this is already on the CANS under Established Supports.
   b. Remove Date of Last Flu Shot-this does not appear to be needed for behavioral health, and the HRA does not ask about any other type of vaccines.

4. Changes to #19:
   a. Remove CANS Rating-Medication Compliance-The is already on the CANS in the Life Functioning section.
   b. Remove the question: “If yes, does the individual regularly receive lab work?” A prescriber will order what they need if they are providing medication services to a client. As clinical staff are generally not trained to read or interpret labs, this information is not necessary to assessing for or providing behavioral health services.
   c. In the last column under Medication Issues, change “Issues” to Efficacy/Side Effects, etc.

5. Changes to #20:
   a. Remove CANS Rating-Medical/Physical-already on the CANS
   b. Remove a-identified via support to Medical/Physical (Life Functioning) question if score 2 or higher.
   c. Remove b and c-questions are covered via the Eating Disturbance (Behavioral/Emotional Needs) question.
   d. Remove d-not necessary for behavioral health diagnostic assessment.
   e. Remove e and f-covered under Substance Use (Behavioral/Emotional Needs).
   f. Remove g and i-not relevant for behavioral health diagnostic assessment.
   g. Remove Health Concerns section-included under Medical/Physical (Life Functioning) in CANS and should be reflected in that narrative.
   h. Remove General Illness section- included under Medical/Physical (Life Functioning) in CANS and should be reflected in that narrative.
   i. Remove Breathing Issues section-included under Medical/Physical (Life Functioning) in CANS and should be reflected in that narrative. May also be reflected through medication list.
   j. Remove Cognitive Assessment section:
      i. a is covered by the Medical/Physical (Life Functioning) question.
      ii. b and b are covered by the Mental Status section of the CANS.
1. All three of these can also be addressed via the Developmental/Intellectual (Life Functioning) question and the Developmental Disabilities Module [B] if triggered.

k. Change the Blood Sugar/Diabetes section:
   i. Remove c and replace with “Is the individual compliant with any dietary restrictions?”. This is more relevant to behavioral health treatment.
   ii. Remove d-the is covered under the Medications section of the HRA.
   iii. Add a new question-Last Hemoglobin A1c.

l. Remove Sexual Risk Behaviors section-a general note: These questions appear to be assessing more for medical than behavioral health. Recommendation is to remove all questions as sexual behaviors are covered under the Sexual Development (Life Functioning) question and the Sexually Problematic Behavior (Risk Behaviors) and Sexually Problematic Behaviors Module [H].

6. Modify Developmental History section:
   i. Make the section for youth only
   ii. Remove questions a and b-not necessary for behavioral health assessment and information is not used clinically. Problems generated from a positive answer to either of these questions about be reflected in the scoring on the Life Functioning questions.
   iii. Remove questions f, g, and h-they are not necessary and would be covered under Developmental/Intellectual (Life Functioning) question.
   iv. Remove question i-covered by Family Information in the CANS (#9).

7. Modify Medical History section:
   a. Psychiatric hospitalizations section-remove chart, add text box for narrative explanation.
   b. Additional hospitalizations section-change question to “Has the individual ever been medically hospitalized?” and add text box for narrative explanation.
   c. Remove Names and Specialties of other providers section-Covered by Established Supports (General Information).

Respectfully Submitted:

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