

<u>Conversion Note AASL Procedure for</u> <u>Speech Language Pathologists</u>

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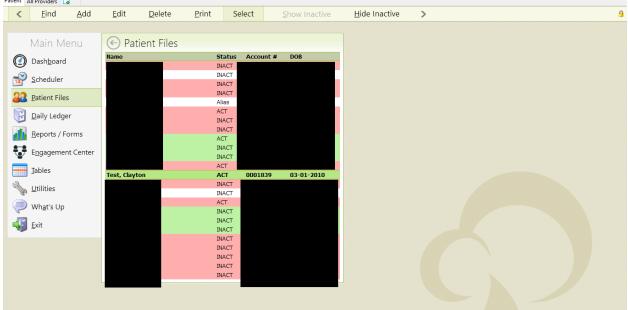
Completing a Conversion Note

- 1. This occurs when you have a client starting treatment at our office, but they have a current evaluation within 6 months from the initial evaluation to the time they want to start services at AASL
- 2. In this case, you just have to add in LTG and STG via the pick lists (see Treatment Plan portion of Evaluation Template for more info on pick list goals)
- 3. Once logged into the EMR, go to Patient Files, search via the client's last name, and then click on their name when you find it from the drop down list. Then click on the patient chart

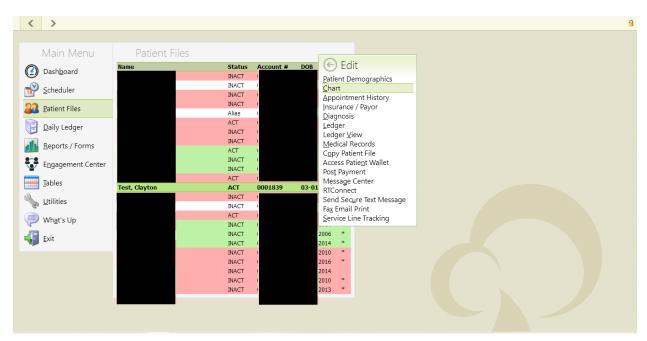
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4. Once in their patient chart hit A to add under Visit History, then select Long-Term Therapy Note. Select your respective discipline case (ST001 or OT001). When it populates, the note you will then need to change the Note Type to a conversion note on the drop down. Then under that make sure you add from the other dropdown SLT Standard. This is located on the upper right hand side of the note.

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- 5. You do not need to fill out all portions of this note template!
- 6. Under the "Treatment Plan" tab you will add goals. Please do so the same way you would for an initial or re evaluation (See Procedure for "Completing an Evaluation"). We do our best to add the goals as they parallel our pick lists, but sometimes we just add them as they were written from the previous place of service; the ultimate goal is to have the goals as closely related to one another between the previous facility and ours



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- 7. Under the Recommendations, you just have to add in the following:
 - Frequency/Duration: 2 visits per week for 52 weeks (DEPENDING ON CLIENT, may be 1x/week, may be 3x/week)
 - Treatment Duration is 30 minutes USUALLY (rarely is it longer)
 - Total number of visits will be 104 (simple math)
 - POC From and POC To Dates are in line with the initial date of the evaluation; so you input the initial date of the evaluation and then put that same date but a year later denoting when it "expires" and that will warrant us to do a re-evaluation



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| Conversion Note for Clayton Test - Visit: NV Payo Patient Information Patient Information Date @3-02-21 < Therapist ji 03-02-21 < Therapist ji 03:34p Assigned ji Histories Subjective Objective Findings Assessment Treatment Plan Initiate Therapy Continue Therapy Pt OT SLT Recoded Recheck | EGR Conversion Note ICR VALFL VALFL Type Conversion Note Conversion Valence Valence Save | |
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| Patient and/or caregiver consents to treatment plan and goals and gives verbal informed consent. Recommendations For Further Assessments Recommendations for Further Assessments Comment | The evaluation was completed at another agency. Discharge Planning Criteria for discharge | |
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8. Then you save and exit; it will not prompt you to sign off on the note

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| ← Conversion Note for Clayton Test - Visit: NV Pa Patient Information Patient Clayton Test MR ≠ 0001839 Date 03-02-21 < Therapist Time 01:34p Assigned | JEGR < Loc VALFL < Type Conversion Note | |
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| | | | Conversion Note | | |
| Date of Visit: | 03-02-21 | Therapist: | Jenna Graepel | | |
| Patient Name: | Test, Clayton | Referring MD: | Christopher Wilke | | |
| Patient #: | 0001839 | Referring Hor | | | |
| | | | | | |
| Date of Birth: | 03-01-2010 | | | | |
| Age: | 11 years, 1 day | Certification Period: | 07-22-20 to 07-22-21 | | |
| Diagnosis: | | | | | |
| | developmental disorders of speech | h and language | | | |
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9. Goals should then roll forward for the first treatment session.

10. Goals rolling forward trouble shooting—see CM until procedure is written Sometimes therapists do wait to write the conversion note until after the first visit once they get eyes on a new client if any goals need to get added etc; this is done on a case-by-case basis. Please communicate with your CM if this course of action is taken in starting with a client who has a previous evaluation from another facility.

Adding or Changing Goals

- 11. For a new client to AASL who comes in with an accepted, valid initial evaluation from another clinic, create a conversion note of the goals from that evaluation prior to the first session. This is the approved document that Tricare has on file for this patient prior to them coming to our office that we have agreed to accept as the dates are still within the valid timespan. Make the goals as close as possible, if not verbatim, to what was listed on the plan of care.
- 12. After the first few sessions (3-6), if you believe that many of the goals from the outside accepted report are not a good fit for the child (i.e., goals have been largely met already, where child is at upon getting to know them/their current skill levels), you may open a progress note. This will be easier for you documentation-wise and allow you to be able to better adjust the goals. By doing this, you can ensure documented progress by the next progress note/re-evaluation (whichever is sooner). This does not have to be a thorough progress note, just an update of the goals to be more appropriate for the client, better guide your plan of care and reflect it more accurately. There needs to be a statement within the



progress note explaining these modifications. It is imperative that you provide a rationale within comment sections of the goals; explain WHY you are adding/changing.

1. If you only need to change minor parameters for at most 1-2 goals, like cue levels, % accuracy, or to mark a goal as MET, then you may do so in the context of a treatment note. This should only be done for the occasional minor change or adjustment of a goal or two so that it does not flag Tricare in any way and cause disruption for the child's case. If you are changing criteria, change the goal's status to "UPDATED", and make the appropriate modifications right there in your daily note. All other changes should be done in a progress note even if it falls earlier than what would typically be required.

Example 1: If you met a goal in current plan of care done by AASL and you need to update/modify (i.e. increase % accuracy, decrease cueing level etc.) the goal prior to progress note time

Update the goal, change the status to Updated, then in the comments section write "GOAL MET and the date the goal was met." Keep this in the comments section for all future notes until Progress note time, so it is clear that the goal has been met/progress has been made within the designated 6 month window. (See below).

| Short Term Goal | Status | Comments | Start Date | End Date |
|---|-------------|---|---------------|-------------|
| Label subjective pronouns he/she in 60% of opportunities over 3 consecutive sessions given minimal verbal and visual cues. | UPDATE D | GOAL MET 8/20/21 at 60%, updated criteria to 80% *Put Date of session and keep this at the top of all future notes until Progress Note Time | | |



Example 2: If you need to change goal criteria from an evaluation not conducted at AASL:

| Short Term Goal | Status | Comments | Start Date | End Date |
|---|---------|---|---------------|-------------|
| Label subjective pronouns he/she in 60% of opportunities over 3 consecutive sessions given minimal verbal and visual cues. | Updated | Criteria Lowered due to current level of client functioning; client currently differentiates between 'boy' and 'girl' in less than 50% of opportunities. | | |

The other example, would be if we are getting a goal from an outside report that is unrealistic or set too high and you want to be able to show progress by progress note time, you would change the goal status to updated, change the criteria in the goal itself and then just comment in the comments section the following "criteria lowered due to current level of client functioning." Keep this in the comment box for all future notes as well until progress note time.



PROCEURE AGREEMENT LOG

Sign and date with your name if you are required to know this policy. By signing you are attesting that you have received, read, and understand the policy, and will apply it as required

| (Name) | (Date) |
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