

**COMMUNITY MENTAL HEALTH SERVICES OF MUSKEGON COUNTY  
PROCEDURE**

No. 06-012

Prepared by:

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Senior Nurse

SUBJECT: Health Screen and  
Physical Examinations

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John North, Executive Director

I. PURPOSE:

To assure identification of an individual's health needs and implementation of the appropriate level of coordination of behavioral and physical health care.

II. APPLICATION:

All employees and contracted providers of Community Mental Health Services of Muskegon County.

III. PROCEDURE:

A. Collection of Information

1. At the time of the first face-to-face service, the individual receiving services/parent/guardian will be requested by the assigned clinician/clerical support staff to complete the Health Screen form, (CO73).

B. Responsibilities of Intake/Primary Worker

1. The intake/primary worker will review and assure the completion of the Health Screen form. The worker will obtain any necessary clarification of treatment status.
2. If the individual has immediate health concerns, the intake/primary worker will assure that the Individual will see an RN or an RN will be notified during the visit.
3. The intake/primary worker will date and sign the Health Screen and forward it to the CMH Senior Nurse by the next business day if any of the symptoms have been checked. The Senior Nurse will assign the Health Screen form to a CMH Nurse for further review.
4. The intake/primary worker will obtain the Releases of Information to and from the primary care medical provider, necessary specialists and from the individual receiving services.

5. The intake/primary worker will document on the Health Screen if they have requested information from the primary care physician/specialist and the date requested.
6. If the individual receiving services has no primary care physician, the intake/primary worker will refer the individual to a primary care physician. The Individual may be referred to a Federally Qualified Health Center for this service.

C. Responsibilities of Registered Nurse

1. The nurse will review the health screen and determine the next course of action within 7 days, which may include one or more of the following:
  - a. No further action needed with appropriate explanation that the individual's health care needs are being met.
  - b. Instruct the individual to schedule an appointment with their primary care physician.
  - c. Communicate with the individual, family, guardian to acquire more information;
  - d. Consult with primary care provider/specialist of the individual for clarification;
  - e. Complete a CMH Nursing Health Assessment to identify unmet healthcare needs or the need to coordinate treatment for comorbid conditions.
  - f. Refer to the primary care provider for diagnosis/care. Consult with the CMH psychiatrist/P.A./N.P. as needed.
2. The RN will confirm all community medications and assure entry into the individual's medication data profile via Info Scribe.
3. The RN will assure a physical exam is performed on all individuals admitted to the agency's Residential programs within the first 7 days of admission or that a durable, legible copy of a physical exam completed within 30 days prior to admission is promptly obtained and reviewed.
4. The RN will document on, sign, date, and submit for filing the Health Screen form in the Individual's record.

- D. Health Screens need to be completed on an annual basis by the primary worker if the clinical record does not contain an Annual CMH Nursing Assessment addressing health issues.

- E. All individuals receiving services in need of Pathology and/or Clinical Laboratory Services are to be referred to laboratories that have offered evidence of compliance with the Federal Standards.
- F. Training and monitoring of this procedure is the responsibility of the Senior Nurse/CSM Supervisor.

REFERENCES:

Joint Commission on Accreditation of Healthcare Organizations  
Bates Barbara, et al *Physical Examination and History Taking*, 1989

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