Characteristics of a Quality Evaluation Report

A Mental Health Evaluation Report should:

- **Be Comprehensive:**
  - Contain necessary information about the child and family
  - Not presume prior knowledge of the child or a review of an earlier mental health evaluation
  - Address issues of clinical relevance

- **Be Organized:**
  - Follow a protocol with designed categories of information
  - Present flowing information relevant to the subject within each category
  - Not take the form of one continuous narrative

- **Be Respectful:**
  - Identify by name child and family members – not by “mom,” “dad,” etcetera
  - Reveal concerns in a non-judgmental manner without the use of pejorative terms
  - Document strengths and goals and not just areas of concern

- **Be Individualized:**
  - Ensure each report remains unique to the child, identifying the child’s specific thoughts, ideas, and responses that offer a glimpse of the child’s actual life experiences, developmental progression, and degree of insight
  - Not rely solely on mental status parameters (ex. good, poor, fair)

- **Be Thoughtful:**
  - Present recommendations beyond the prescription of only medically-necessary services for funding
  - Ensure that recommendations offer direction to the child and family and to the direct care staff working with the child and family
  - Assist the family in linking with appropriate services and community resources