

# CalMHSA

California Mental Health Services Authority



# Clinical Documentation User Manual

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# About this User Manual

This user manual is designed to provide a how-to guide of the features and functionality of SmartCare. It will outline how to complete each workflow in a step-by-step format with related screenshots that will make understanding how to complete each workflow easy. Through this guide, you will learn about SmartCare's comprehensive suite of tools and advanced technologies to enter client data securely and efficiently.

We hope that by following these instructions you will gain a better understanding of the capabilities of SmartCare so that you can start using the system right way with confidence.

## Audience

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This manual is intended for use by anyone who will use the SmartCare EHR to support Specialty Mental Health Services or Substance Use Disorder clinical documentation.

## Computer Literacy Assumptions for Understanding this User Manual

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- Ability to perform basic word processing such as typing and searching for documents in files
- Understands data entry techniques into electronic forms and documents
- Familiarity with running a windows operating system or other popular programs like Mac OS.
- Basic knowledge of how to use internet browsers like Microsoft Edge and Google Chrome

## IT Support Requests:

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Please call our Help Desk at:(916) 214-8348 or submit a live chat question to <https://2023.calmhsa.org/>

**Note:** Before beginning to use the same system, make sure you have a compatible internet browser like Microsoft Edge and Google Chrome. CalMHSA recommends Google Chrome for best user experience.

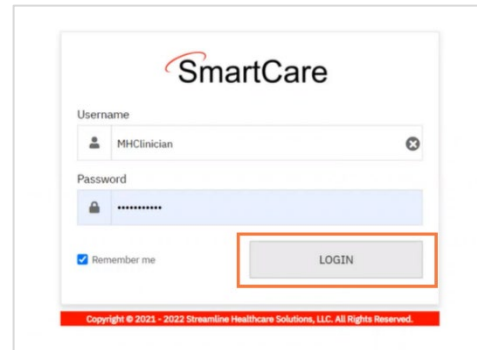
## LMS Related Support:

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Please email: [moodle@calmhsa.org](mailto:moodle@calmhsa.org)

# Logging in to SmartCare

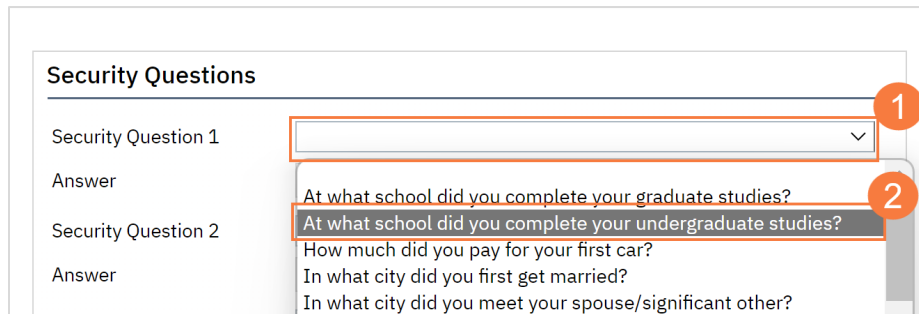
1. From the desktop, open your internet browser
2. Enter the SmartCare URL
3. Enter your username and password
4. **Click Login**

A screenshot of the SmartCare login page. It features a header with the SmartCare logo. Below the logo are two input fields: 'Username' with the text 'MHClinician' and a dropdown arrow, and 'Password' with a masked password '\*\*\*\*\*'. There is a 'Remember me' checkbox which is checked. A 'LOGIN' button is highlighted with a red box. At the bottom, there is a copyright notice: 'Copyright © 2021 - 2022 Streamline Healthcare Solutions, LLC. All Rights Reserved.'

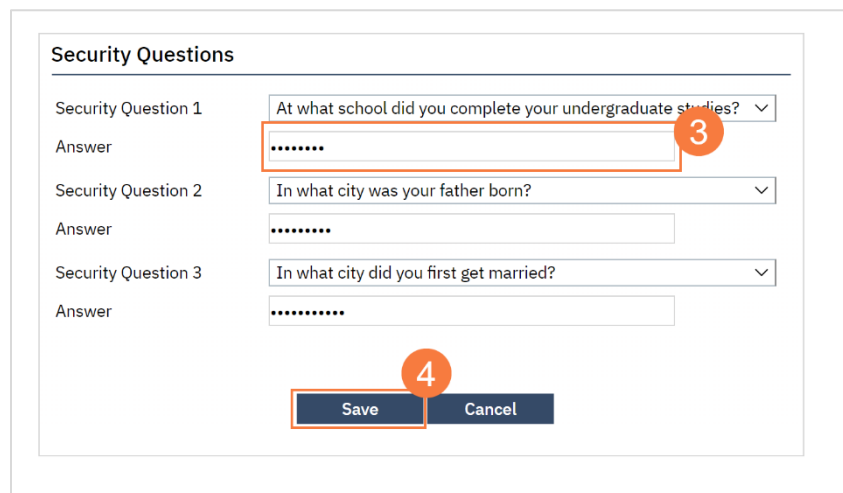
## First Time User Login Process

When you first login you will have to set up 3 security questions.

1. **Click the drop-down menu** next to each security question
2. **Click to select** the security question you want to use

A screenshot of the 'Security Questions' setup screen. It shows two rows of 'Security Question' and 'Answer' fields. The first row's dropdown menu is open, showing three options: 'At what school did you complete your graduate studies?', 'At what school did you complete your undergraduate studies?', and 'How much did you pay for your first car?'. The second option is highlighted with a red box and a '2' in a red circle. The first dropdown menu is also highlighted with a red box and a '1' in a red circle.

3. In the Answer field, **type the answer** to your chosen security question
  - a. Repeat this for the remaining two questions
4. **Click Save**

A screenshot of the 'Security Questions' setup screen showing the answers entered. The first question is 'At what school did you complete your undergraduate studies?' with a red box around the answer field containing '\*\*\*\*\*' and a '3' in a red circle. The second question is 'In what city was your father born?' and the third is 'In what city did you first get married?'. At the bottom, there are 'Save' and 'Cancel' buttons, with a red box around the 'Save' button and a '4' in a red circle.

## Subsequent Logins

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SmartCare uses multi-factor authentication, or MFA. This means that when you log in, you'll receive an email with a code that you'll need to enter. Your system administrator will set up how often this needs to happen.

### 2-Step Verification

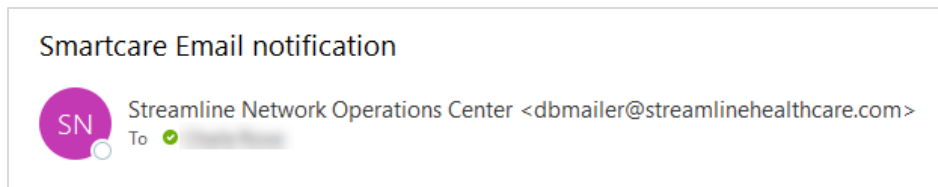
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Enter the Authentication Key sent to the Registered Device.

Authentication Key

[Validate](#) [Send Again](#) [Cancel](#)

[Do not have access to Device?](#)





# Basic Navigation and Functionality

This section will cover basic SmartCare functionality, terminology, and navigation.

## Home Screen

When you first login to SmartCare you will land on the Home Screen. You will have a home screen unique to your role to make it easier to navigate to the work that applies to you.

The Home Screen consist of 3 main components:

- A. The Work Area
- B. The Menu Bars
- C. The Search Bar

**Tracking Widget**

Flags Tracked	Due in 90-61 Days	Due in 60-31 Days	Due in 30 Days or Less	Overdue
Assessment Needed	0	0	1	11
CalOMS	0	0	0	3
CANS due for this client	0	0	0	1
Client does not speak English	0	0	0	1
CSI admission	0	0	0	8
Staff Safety Concern	0	0	0	1
Suicidal Risk	0	0	0	0
UMDAP Due	0	0	0	2

**Assigned Document(s)**

	Notes	ISP	Assessment	Other
Due Now	0	0	0	0
In Progress	55	0	1	59
Due in 14	0	0	0	0
Co-Sign	1	0	0	3
To-Sign	1	0	0	1
Assigned	0	0	0	0

**Appointments For Today**

Client Name/Description	Time	Status
Process Group	10:00 AM	Show
Lunch	12:00 PM	
Paper Work	04:00 PM	

**New Alert/Message(s)**











From	Received	Client	Subject	Message
Admin, System	10/26/2022	Thompson, Toby	Contact Note: Contact da...	<a href="#">- Left message to discuss Toby</a>
Supervisor,...	09/29/2022	Thompson, Toby	Adult Medi-Cal Screening...	<a href="#">I have issues</a>
Supervisor,...	09/23/2022	Houdini, Harry	Adult Medi-Cal Screening...	<a href="#">Hi, this needs work. Learn to write</a>
Staff, Access	08/24/2022	Young, Butters	Please Contact	<a href="#">Hello Please set outreach to client.Than...</a>
Staff, Access	08/24/2022	Anderson, Jan	Mental Health Documents	<a href="#">Hello Please open collect clients Mental...</a>
Supervisor,...	08/23/2022	Thompson, Toby	Diagnosis Document - Thom...	<a href="#">Hi let's discuss Toby's situation. I wa...</a>
Sullivan, Ke...	08/21/2022	Jones, Ryan	Please verify	<a href="#">Please ensure Ryan's consents are update...</a>

## Icons

The **Header**, pictured below, consists of several icons.



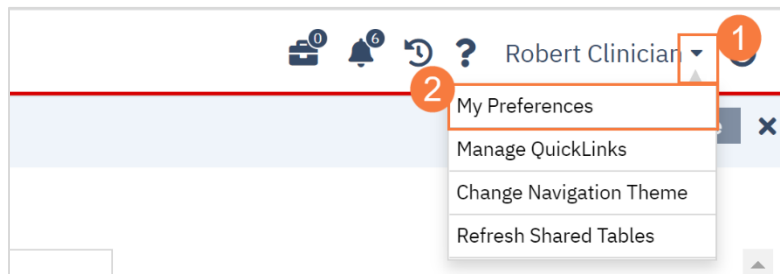
The **Icons and Functionality** table below describes each icon.

Icons and Functionality	
	The <b>Menu icon</b> will open and close the Navigation Filters bar
	Clicking on the <b>SmartCare icon</b> will bring you back to your Home Page
	The <b>Search icon</b> will allow you to quickly search for screens and list pages within SmartCare
	The <b>Favorite icon</b> will allow you to search for screens and list pages that you have save in your favorites
	The <b>Person Search icon</b> will allow you to search for a client by their name or ID number
	The <b>Unsaved Changes icon</b> will display a list of screens that you made changes to but navigated away from before saving
	The <b>Notification icon</b> will display a list of system notifications. The number that appears in the icon correlates to the number of notifications you have
	The <b>History icon</b> will open a window that displays the last 13 patients and QuickLinks you have accessed in your current session
	The <b>Help icon</b> , will take you to the SmartCare Online Help webpage
	The <b>Logout icon</b> will log you out of SmartCare

## Preferences

In order to access your user preferences, follow the steps below:

1. From the Header, **click the drop-down menu after your name** in the upper right-hand side.
2. A menu will open, **select Preferences** from the menu options



Note: Your preferences window will open, here you will be able to update your password, contact information, security questions, push notifications, etc.

# Widgets

SmartCare has widgets that are multi-functional and interactive. They allow you to see and act on information most relevant to your role and daily tasks. The widget will appear on your Home Screen when you first login.

The screenshot displays the Tracking Widget interface. At the top, there are filters for Workgroup (All Workgroups), Assigned (Clinician, Robert), Tracking Protocol (All Flags), and Tx Team Role (All Assigned Roles). Below the filters are two main data tables:

Flags Tracked	Due in 90-61 Days	Due in 60-31 Days	Due in 30 Days or Less	Overdue
<a href="#">Assessment Needed</a>	0	0	1	11
<a href="#">CaOMS</a>	0	0	0	3
<a href="#">CANS due for this client</a>	0	0	0	1
<a href="#">Client does not speak English</a>	0	0	0	1

Notes	ISP	Assessment	Other
Due Now	0	0	0
In Progress	55	0	1
Due in 14	0	0	0
Co-Sign	1	0	3
To-Sign	1	0	1
Assigned	0	0	0

Below these tables are two more sections: 'Appointments For Today' and 'New Alert/Messages'.

Client Name/Description	Time	Status
Process Group	10:00 AM	Show
Lunch	12:00 PM	
Paper Work	04:00 PM	

From	Received	Client	Subject	Message
Supervisor...	09/29/2022	Thompson, Toby	Adult Medi-Cal Screening...	<a href="#">I have issues</a>
Supervisor...	09/23/2022	Houdini, Harry	Adult Medi-Cal Screening...	<a href="#">HJ - this needs work. Learn to write</a>
Staff, Access	08/24/2022	Young, Butters	Please Contact	<a href="#">Hello. Please set outreach to client. Than...</a>
Staff, Access	08/24/2022	Anderson, Jan	Mental Health Documents	<a href="#">Hello. Please open collect clients Mental...</a>
Supervisor...	08/23/2022	Thompson, Toby	Diagnosis Document - Thom...	<a href="#">Hj - let's discuss Toby's situation. I wa...</a>
Sullivan, Ke...	08/21/2022	Jones, Ryan	Please verify	<a href="#">Please ensure Ryan's consents are update...</a>

## The Tracking Widget

The Tracking widget is a tool that shows you any documents or tasks that you need to complete. You can scroll down on the widget to view all tasks and documents that are due. Each document or task is hyperlinked to take you to the "To Do List" so you can complete it. The Tracking widget will default to you as the user, but you can switch to view your items by *Workgroup* or by *Treatment Team Role* if you are in a supervisor.

Tasks are grouped into 4 categories for easy prioritizing,

- Due in 90-61 Days
- Due in 60-31 Days
- Due in 30 Days or Less
- Overdue

If a document doesn't have a due date, but hasn't been completed, it will show

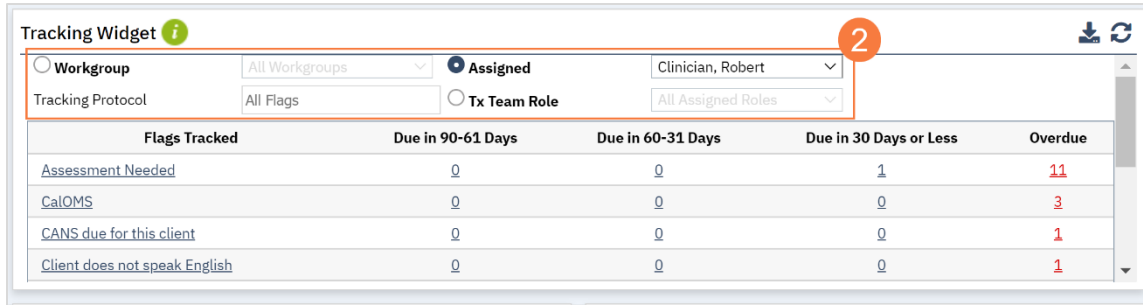
**Note:** Clicking on the hyperlinked number will take you only to the tasks or documents that are due within that time category. Clicking on the task or document hyperlinked name will take you to all tasks in that category. To use the Tracking widget, follow the steps below:

1. Click the hyperlinked name of the task or document.
  - a. You can also click the hyperlinked number.

This is a close-up view of the Tracking Widget table. Red boxes and circles highlight specific elements:

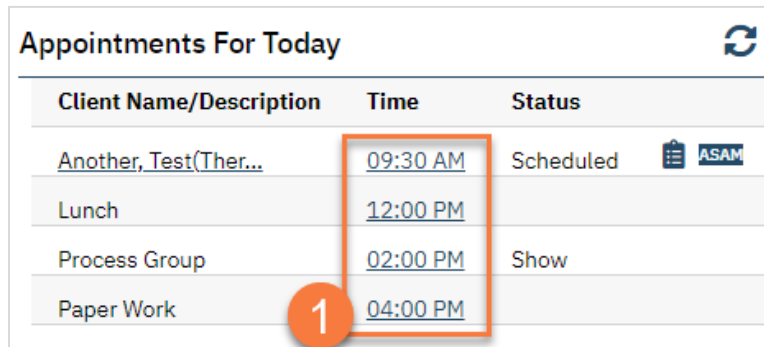
- A red box highlights the 'Assessment Needed' link in the 'Flags Tracked' column.
- A red circle with the number '1' highlights the 'Assessment Needed' link.
- A red box highlights the number '11' in the 'Overdue' column for 'Assessment Needed'.
- A red circle with the letter 'a' highlights the number '3' in the 'Overdue' column for 'CaOMS'.

- For Supervisors, you can change between Workgroup, Assigned, and Tx Team Role by clicking on the radio button to the corresponding field.

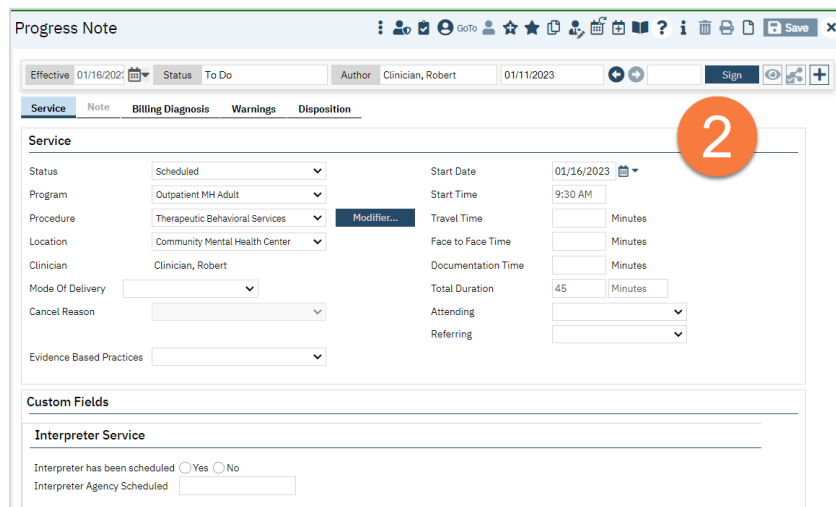


## The Appointments For Today Widget

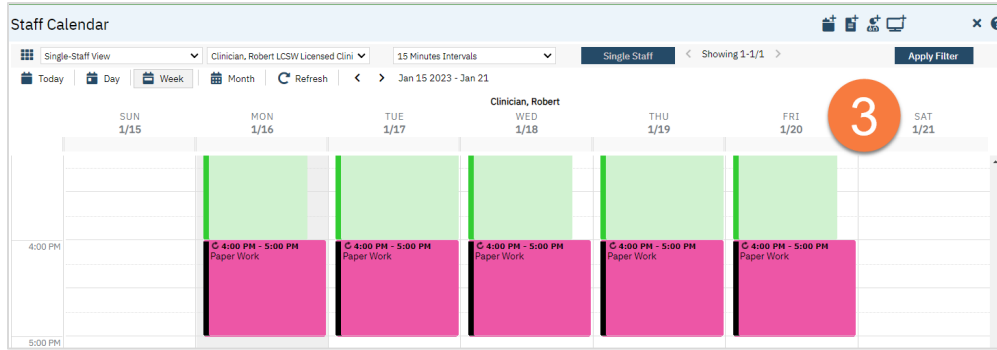
- This widget allows you to see your daily schedule at a glance. This includes non-client time, such as meetings and time off, as well as client appointments. Clicking on the link will take you to that appointment.



- For client service appointments, this link will take you to the service details, where you can quickly write a note.



- For non-client appointments, like meetings, this link will take you to the Staff Calendar.



## The Caseload Widget

1. This widget allows you to easily see your caseload. Clicking on any of the links will take you to the My Caseload list page.

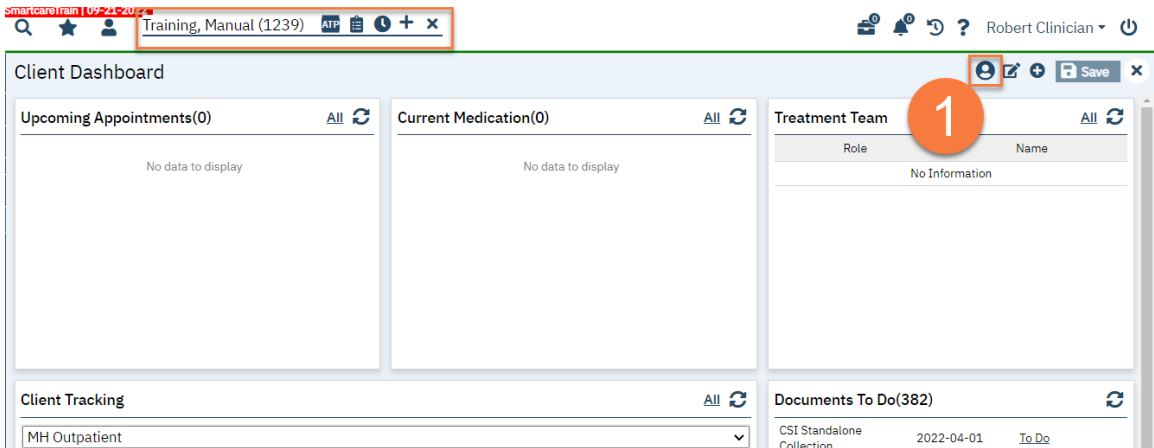
	Current	Not Seen in 3 Mos	Last Year
Primary	<a href="#">106</a>	<a href="#">91</a>	0
<b>Total</b>	<b><a href="#">108</a></b>	<b><a href="#">91</a></b>	0

2. Just like any list page, you can use the filters at the top of the page to narrow the results as needed. Depending on the link you clicked from your dashboard, some filters may already be in place.

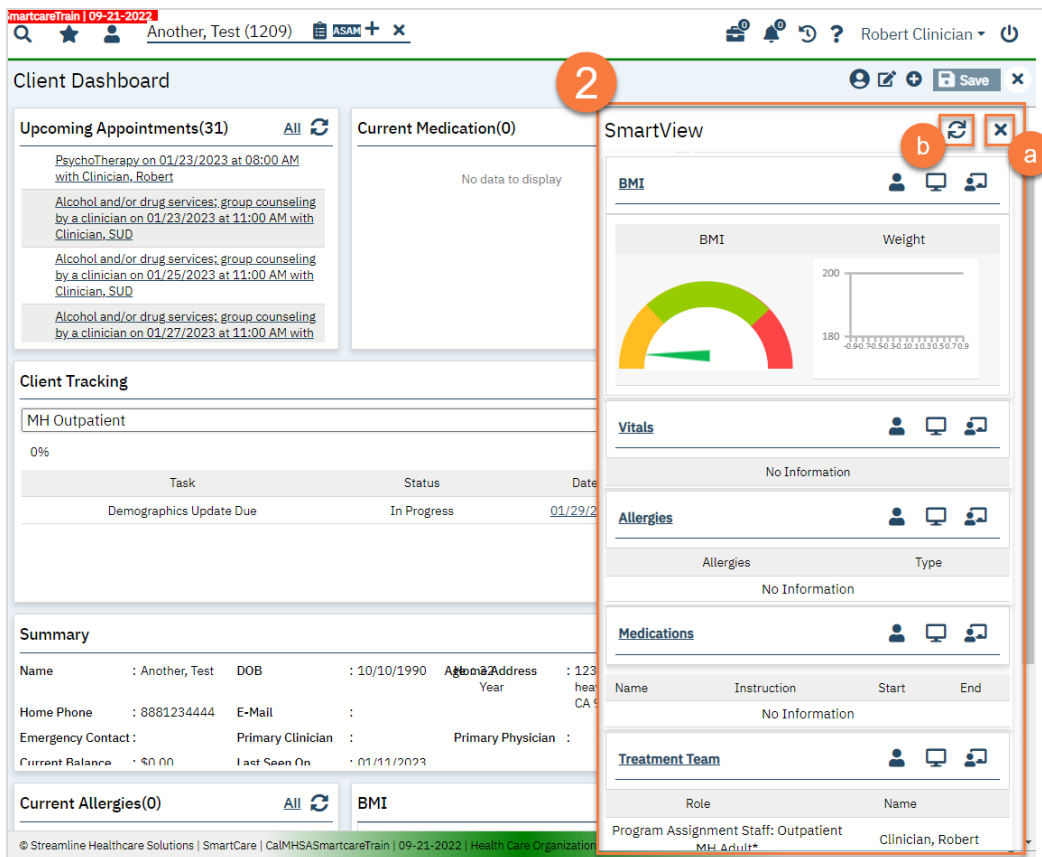
Client	Phone	Axis V	Last DOS	Last Seen by Me	Primary	Episode Status	Staff	Roles	Notes/Icons
John Doe (1234)	555-555-1234		12/30/2022	12/30/2022	Yes		Clinician, Robert	Program Assigner	ASAM
Jane Smith (5678)	555-555-5678		01/11/2023	01/04/2023	Yes		Clinician, Robert	Program Assigner	ASAM
Michael Brown (9012)	555-555-9012				Yes		Clinician, Robert		ATP
Anna White (3456)	555-555-3456		11/18/2022	11/18/2022	Yes	Registered	Clinician, Robert		ASAM
David Green (7890)	555-555-7890		01/07/2023	12/02/2022	Yes	Registered	Clinician, Robert	Primary Clinician, Pr	ASAM
Emily Black (2345)	555-555-2345		12/19/2022		Yes		Clinician, Robert	Program Assigner	
Frank Blue (6789)	555-555-6789		09/22/2022		Yes	Registered	Clinician, Robert		ASAM
Grace Yellow (0123)	555-555-0123				Yes	Registered	Clinician, Robert	Program Assigner	ASAM
Henry Purple (4567)	555-555-4567		12/20/2022		Yes	Registered	Clinician, Robert		ASAM
Ivy Pink (8901)	555-555-8901				Yes		Clinician, Robert		ATP
Jack Orange (2345)	555-555-2345		09/23/2022		Yes		Clinician, Robert		ASAM
Karen Green (6789)	555-555-6789				Yes		Clinician, Robert		
Liam Blue (0123)	555-555-0123		12/23/2022		Yes	Registered	Clinician, Robert		ASAM
Mia Yellow (4567)	555-555-4567		12/13/2022		Yes		Clinician, Robert		ATP
Noah Purple (8901)	555-555-8901		01/10/2023		Yes		Clinician, Robert		
Olivia Pink (2345)	555-555-2345		12/23/2022		Yes	Registered	Clinician, Robert		ASAM
Peter Orange (6789)	555-555-6789				Yes	Registered	Clinician, Robert		ASAM

# The SmartView

1. When you have the client open, click on the SmartView icon in the upper right corner of the screen.



2. This opens up the SmartView side panel. This will remain open while you navigate the client's chart. The SmartView widgets include links that will take you to the related screen.
  - a. To hide this, click the X in the upper-right.
  - b. To refresh the information on the SmartView widgets, click the Refresh icon.



3. You can pin the SmartView so that it's not overlapping the other parts of the screen. The below screenshot shows the pinned version. You can select 1 of 3 options for pinning the screen:
  - a. Pin to the client – will always be pinned when opening this client.
  - b. Pin to the screen – will always be pinned when on this screen.
  - c. Pin to the screen and the client – both a & b.

The screenshot shows a clinical dashboard for a patient named "Another, Test (1209)". The dashboard is divided into several sections:

- Upcoming Appointments (31):** Lists appointments such as "Psychotherapy on 01/23/2023 at 08:00 AM with Clinician\_Robert" and "Alcohol and/or drug services: group counseling by a clinician on 01/23/2023 at 11:00 AM with Clinician\_SUD".
- Current Medication (0):** Shows "No data to display".
- Treatment Team:** Lists roles and names, including "Program Assignment Staff: Outpatient MH Adult\* Clinician, Robert" and "<Unknown Team Role> Staff, Psychiatrist".
- Documents To Do (387):** Lists tasks like "CSI Standalone Collection" (2022-04-01, To Do) and "Narrative" (2022-06-03, In Progress).
- Client Tracking:** Shows a progress bar for "MH Outpatient" at 0% and a table with columns for Task, Status, and Date. A task "Demographics Update Due" is listed as "In Progress" with a date of "01/29/2023".
- Summary:** Provides patient details: Name: Another, Test; DOB: 10/10/1990; Address: 123 Erhardt St, heavyton, CA 90001; Home Phone: 8881234444; E-Mail: ; Emergency Contact: ; Primary Clinician: ; Primary Physician: ; Current Balance: \$0.00; Last Seen On: 01/11/2023.
- Current Allergies (0):** Shows "No data to display".
- BMI:** Shows "No data to display".
- SmartView:** A sidebar on the right providing a consolidated view of Vitals, Allergies, Medications, Treatment Team, and Client Tracking. It includes a "Save" button and icons for user, device, and group.

A red circle with the number "3" highlights the SmartView header area, and smaller red circles with letters "a", "b", and "c" highlight specific icons within the SmartView header.

## Screens vs. Document

Screens are forms that, when updated, only show the most recent information. Documents, on the other hand, will save the finalized version in a pdf in order to capture data at a point-in-time.



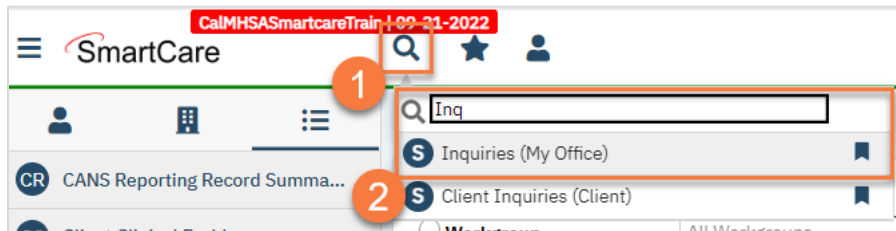
# Life Cycle of the Client: Request for Services

There are many methods used to initialize services, but all start with some sort of request for services. This section will go into how to document these types of requests and how to move a client through the initialization process. Each county has an Access Line that's available 24/7 for people to call for information about services and to request services. Each county also has a Crisis Line that's available 24/7 for people to call when they're in crisis. Some counties may have walk-in clinics where a person can simply drop-in and request an assessment. Sometimes people requesting services may call another behavioral health phone number or walk into an office that doesn't provide screening, assessment, or crisis services and they need to be redirected. We'll cover all of these scenarios in this section.

## How do I document a request for services received via the Access Line?

Access Line calls are documented on the Inquiry screen.

1. Search for the Inquiry screen using the search icon.
2. Select "Inquiries (My Office)"



3. This will bring you to the Inquiries list page. Create a new inquiry by using the new icon.

Inquiries (162)

Recorded By All Assigned To All Dispositions All Status All Inquiry Type Apply Filter

All Programs All Locations All Urgency Level All Contact Type All Priority Population

From 01/01/1900 To 12/31/9999 Last Name First Name Phone

Client (Potential)	Client Id	Inquirer	Start Date/Time	Recorded By	Assigned To	Disposition	Inquiry Status
Wills, Anna	1223	Wills, Anna	1/4/2023 10:30 AM	Clinician, Robert			In Progress
Rowe, Charla	1220	Rowe, Charla	1/3/2023 10:13 AM	Rowe, Charla			In Progress
Wills, Anna		Wills, Anna	1/1/2023 10:53 AM	Clinician, Robert			In Progress
Williams, LaQuita	1217	Williams, LaQuita	12/30/2022 2:06 PM	Williams, LaQuita			In Progress
Williams, LaQuita	1216	Williams, LaQuita	12/30/2022 8:56 AM	Williams, LaQuita			In Progress
Staff, Access	1215	Staff, Access	12/29/2022 3:21 PM	Staff, Access			In Progress
Rowe, Charla	1214	Rowe, Charla	12/29/2022 2:58 PM	Clinician, Robert			Complete
Fitzgerald, John	1213	Fitzgerald, John	12/29/2022 12:04 PM	Fitzgerald, John			In Progress
Staff, Access	1209	Staff, Access	12/29/2022 8:25 AM	Staff, Access			In Progress
Rowe, Charla	1208	Rowe, Charla	12/29/2022 8:17 AM	Rowe, Charla			In Progress
Rowe, Charla	1207	Rowe, Charla	12/28/2022 5:02 PM	Rowe, Charla	Clinician, Robert		In Progress
Baize, Jacob	1204	Baize, Jacob	12/28/2022 2:37 PM	Baize, Jacob			Complete
Clinician, Robert	1206	Clinician, Robert	12/28/2022 12:55 PM	Clinician, Robert			In Progress
Williams, LaQuita	1203	Williams, LaQuita	12/28/2022 8:44 AM	Williams, LaQuita			In Progress
Clinician, Robert	1201	Clinician, Robert	12/27/2022 4:10 PM	Clinician, Robert			In Progress
Fitzgerald, John	1200	Fitzgerald, John	12/27/2022 4:01 PM	Fitzgerald, John			In Progress
Sullivan, Kevin	1196	Sullivan, Kevin	12/27/2022 1:44 PM	Sullivan, Kevin			In Progress
Sullivan, Kevin		Sullivan, Kevin	12/27/2022 1:27 PM	Sullivan, Kevin			In Progress
Fitzgerald, John	1195	Fitzgerald, John	12/27/2022 1:18 PM	Fitzgerald, John	Sullivan, Kevin		In Progress
Staff, Access	1194	Staff, Access	12/27/2022 1:12 PM	Staff, Access			Complete
Williams, LaQuita	1192	Williams, LaQuita	12/26/2022 9:49 PM	Williams, LaQuita			In Progress
Rowe, Charla	1190	Rowe, Charla	12/23/2022 4:13 PM	Rowe, Charla			Complete

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- This will bring up the client search window. You may search to determine if the person is a current client. If person is a new client, or you cannot find them in the system, click "Inquiry (New Client)".

**Client Search** [?] [X]

Clear

**Name Search**  Include Client Contacts  Only Include Active Clients (Checking will not allow option to create new Client)

Broad Search | **Narrow Search** | Type of Client  Individual  Organization | All Client Search

Last Name  First Name  Program

**Other Search Strategies**

SSN Search    | Phone # Search

DOB Search   | Master Client ID Search

Primary Clinician Search  | Client ID Search

Authorization ID / #  | Insured ID Search

**Records Found**

ID	Master ID	Client Name	Chosen Name	SSN/EIN	DOB	Status	City	Primary Clinician
No data to display								

Select Cancel

4

- a. To search for a client, enter their name and click “Broad Search.” You can also search by SSN by entering their social security number and clicking “SSN Search.” You can do the same with date of birth (DOB), phone number, etc. If you find the person in the system, meaning they show in the Records Found section, click “Select” to bring their information into the Inquiry screen.

**Client Search** [?] [X]

Clear

**Name Search**  Include Client Contacts  Only Include Active Clients (Checking will not allow option to create new Client)

Broad Search | **Narrow Search** | Type of Client  Individual  Organization | All Client Search

Last Name  First Name  Program

**Other Search Strategies**

SSN Search    | Phone # Search

DOB Search   | Master Client ID Search

Primary Clinician Search  | Client ID Search

Authorization ID / #  | Insured ID Search

**Records Found**

ID	Master ID	Client Name	Chosen Name	SSN/EIN	DOB	Status	City	Primary Clinician
No data to display								

Select Cancel

Inquiry (New Client)

a

5. This brings you to the Inquiry Details screen. **Complete the information about the caller, or “Inquirer”.**
  - a. If the client is calling for themselves, select “Self” under “Relation to Client.” This way, as you enter the caller’s information, it will push this information automatically into the “Client Information” section.
  - b. Make sure to input the start date and time of the call. There are buttons for “T” (today) and “Now” to help make this quick and easy.

6. **Complete the information about the potential client.**
  - a. **Complete the First Name and Last Name fields.** Middle Name is not required but can be added as necessary.
  - b. **Complete the SSN and DOB fields.** This is for the client’s social security number (SSN) and date of birth (DOB), respectively. If the client refuses to share, or doesn’t know, you can simply check the box “SSN Unknown/Refused.” Once saved, this will fill in the SSN with “999999999”, which is SmartCare’s version of “no SSN”.
  - c. **Complete the Sex field.**
  - d. **Complete the Urgency Level, Inquiry type, and Contact type fields.** The options for each field are listed in the tables below. This includes a description of when to use each option.
  - e. **Click Save.**

**Inquiry Details** Guide Menu Remove Client Link Link/Create Client Register Client Settings AB Print Save

**Initial** Insurance Demographics

**Inquirer Information**  Crisis

Relation To Client: Self  First Name: Manual  Middle Name:  Last Name: Training

Call Back: (916) 555-7878  Ext:  Email:

Start Date: 01/06/2023  Start Time: 05:16 PM  Now

**Client Information (Potential)**

First Name: Manual  Middle Name:  Last Name: Training  Client ID:  Sex: Male

SSN:   SSN Unknown/Refused  DOB: 06/07/2002  Age (20 Years)  Medi-Cal ID:

Home Phone: (916) 555-7878  Cell:  Email:

Client is not homeless  Client is homeless  Client is chronically homeless

Address1:  Address2:

City:  Priority Population:

State:  Zip:  County of Residence: Search here

Urgency Level: Not urgent

Inquiry type: Request for services/screening

Contact type: Call

Presenting Problem:

Current Client Information (If any):

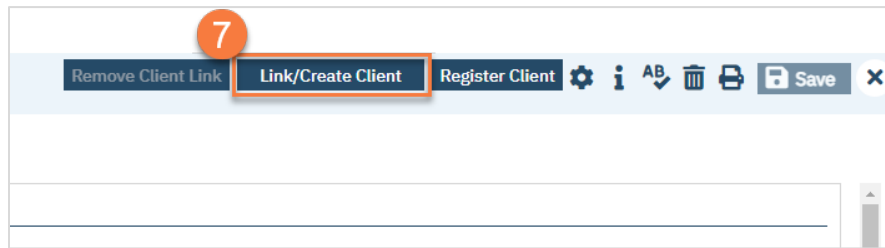
Client Can Legally Sign  Yes  No

Urgency Level	Description/Use Case	Timelines
Emergent	Use if the call is an emergency	Addressed immediately
Not Urgent	Use if the call is a routine request for services	Appointment within 10 business days
Urgent	Use if the call is an urgent request	Appointment within 72 hours

Inquiry Type	Description/Use Case
Requests for services/screening	Use when the reason for the call is a request for new services
Crisis	Use when the reason for the call is for crisis services
Information	Use when the reason for the call is for information
Discharge/Transition Coordination	Use when the reason for the call is for another provider to coordinate transition of care to/from your agency
Jail Diversion	Use when the reason for the call is related to Jail Diversion programs
Consultation	Use when the reason for the call is for an outside provider seeking a consultation
Other	Use when the reason for the call is not addressed by any of the above

Contact Type	Description/Use Case
Call	Use when the inquiry was complete via telephone
Face to Face	Use when the inquiry was completed via in-person, such as a walk-in
Form	Use when the inquiry was completed via form, such as a referral that was sent to the county
Teleconference	Use when the inquiry was complete via teleconference, such as Zoom, FaceTime, Webex, or other video-audio conferencing software

7. Select the “Link/Create Client” button. This will bring up the client search window, with a few extra buttons at the bottom.



- a. You must **search by name** by clicking on either “Broad Search” or “Narrow Search”.
- b. You must also **search by SSN and DOB** by clicking on those respective buttons.

 A screenshot of the 'Client Search' window. At the top is a 'Clear' button. Below it is the 'Name Search' section with checkboxes for 'Include Client Contacts' and 'Only Include Active Clients'. There are buttons for 'Broad Search' (circled in red with 'a'), 'Narrow Search', and 'All Client Search'. Radio buttons for 'Type of Client' are set to 'Individual'. Input fields for 'Last Name' (Training), 'First Name' (Manual), and 'Program' are visible. The 'Other Search Strategies' section includes buttons for 'SSN Search' (circled in red with 'b'), 'DOB Search', 'Primary Clinician Search', 'Authorization ID / #', 'Phone # Search', 'Master Client ID Search', 'Client ID Search', and 'Insured ID Search'. Below this is a table titled 'Records Found' with columns: ID, Master ID, Client Name, Chosen Name, SSN/EIN, DOB, Status, City, and Primary Clinician. The table is empty, showing 'No data to display'. At the bottom right are 'Select', 'Cancel', and 'Create New Client Record' buttons.

- c. If no records are found based on the search you do, an alert will show at the top of the window.

The screenshot shows the 'Client Search' window. At the top, there is a 'Clear' button and a red box with a white 'C' containing the message 'No Search Records Found'. Below this is the 'Name Search' section with checkboxes for 'Include Client Contacts' and 'Only Include Active Clients'. There are buttons for 'Broad Search', 'Narrow Search', and 'All Client Search'. The 'Type of Client' is set to 'Individual'. Search fields include 'Last Name' (Training), 'First Name' (Manual), and 'Program'. The 'Other Search Strategies' section includes fields for SSN, DOB, Primary Clinician, Authorization ID, Phone #, Master Client ID, Client ID, and Insured ID. The 'Records Found' section shows a table with columns: ID, Master ID, Client Name, Chosen Name, SSN/EIN, DOB, Status, City, and Primary Clinician. The table is empty with the text 'No data to display'. At the bottom right, there are 'Select', 'Cancel', and 'Create New Client Record' buttons.

- d. Any search results will show in the “Records Found” area. **Review the Records Found** to determine if the person is already in the system as a client.
- e. If the person is already a client in the system, **select the button next to the appropriate record.**
- f. **Click “Select”** to link the Inquiry to the selected client.
- g. If the person is not a client, meaning no records were found matching the client’s information, **click “Create New Client Record.”**

**Client Search** ? x

Clear

**Name Search**  Include Client Contacts  Only Include Active Clients (Checking will not allow option to create new Client)

**Broad Search** **Narrow Search** Type of Client  Individual  Organization **All Client Search**

Last Name  First Name  Program

**Other Search Strategies**

**SSN Search**    **Phone # Search**

**DOB Search**   **Master Client ID Search**

**Primary Clinician Search**  **Client ID Search**

**Authorization ID / #**  **Insured ID Search**

**Records Found**

ID	Master ID	Client Name	Chosen Name	SSN/EIN	DOB	Status	City	Primary Clinician
<input checked="" type="radio"/> 1234	1234	...		9999	08/29/19...	Active		
<input type="radio"/> 1081	1081	...		9999	09/17/19...	Active		
<input type="radio"/> 1072	1072	...		9999	03/03/19...	Active		
<input type="radio"/> 1209	1209	...		9999	10/10/19...	Active	heavyton	
<input type="radio"/> 1096	1096	...		9999	08/01/19...	Active		Clinician, Robert
<input type="radio"/> 1007	1007	...		9999	05/27/19...	Active	Test	

**Select** **Cancel**

**Create New Client Record**

h. This will take you back to the Inquiry screen but now a client ID number will be added.

**Inquiry Details** Guide Menu Remove Client Link Link/Create Client Register Client ? AB 🗑 🖨 💾 Save

**Initial** **Insurance** **Demographics**

**Inquirer Information**  Crisis

Relation To Client  First Name  Middle Name  Last Name

Call Back  Ext  Email

Start Date    Start Time

**Client Information (Potential)**

First Name  Middle Name  Last Name  **Client ID**  Sex

SSN   SSN Unknown/Refused DOB  Age (20 Years) Medi-Cal ID

Home Phone  Cell  Email

Client is not homeless  Client is homeless  Client is chronically homeless

Urgency Level

Address1  Inquiry type

Address2  Contact type

City  Priority Population

State  Zip  County of Residence

Presenting Problem

Current Client Information (If any)

Client Id: 1239  
Last Inquiry Date:  
Coverage History  
No Coverage History

Client Can Legally Sign  Yes  No

8. Click on the "Insurance" tab.

a. Select "Medi-Cal" from the "Payer" drop-down and enter the client's Medi-Cal number (CIN) in the "Insurance ID" field. Click "Verify" to verify the client's Medi-Cal insurance.



**Inquiry Details** Remove Client Link Link/Create Client Register Client Save

Initial **Insurance** Demographics

**Electronic Eligibility Verification**

Payer  Insurance Id  **Verify...**

**Coverage Information**  Show Current Plans Only

Plan	Insured ID	Group ID	Comment
Coverage Information			

Add

9. Click on the “Demographics” tab.

- a. We recommend **completing the “Gender Identity” and “Pronoun” fields** to ensure the person is not misgendered as additional staff engage with the client.

**Inquiry Details** Remove Client Link Link/Create Client Register Client Save

Initial Insurance **Demographics**

**General Information**

Primary Care Coordinator  Medical Provider  Professional Suffix   Active

Prefix  Suffix

**Identifying Information**

Marital Status  Gender Identity  Sexual Orientation

Deceased On  Cause of Death  Pronoun

**Ethnicity**

- Amerasian
- American Native
- Asian Indian
- Black
- Cambodian

**Race**

- Alaskan Native
- American Indian
- American Indian and Alaskan Native
- Asian
- Asian Indian

**Client declined to provide**

- Date of Birth
- Ethnicity
- Gender Identity
- Hispanic Origin
- Primary/Preferred Language

- b. **Complete the “Primary/Preferred Language” field.** If the client does not speak English or requires an interpreter, make sure to check the appropriate checkbox.

**Inquiry Details** Remove Client Link Link/Create Client Register Client Save

**Initial Insurance Demographics**

Employment Information

**Language**

Primary/Preferred Language   Client does not speak English Hispanic Origin

Interpreter Services Needed

**Transportation Information**

Transportation Service  
Note any special needs accommodations (e.g. wheelchair, service animal, high rise)

**Preferences**

Communication Preference  Mobile Phone Provider

Days  M  T  W  Th  F

Geographic Location

Comment

10. You may enter any additional information in any of the tabs, but none are required. Once complete, **enter the end date and time of the Inquiry and change the status to "Complete"**. Once again, there are "T" (today) and "Now" buttons to make this easier.
11. **Click Save.** You may now close the Inquiry and move on to Screening.

**Inquiry Details** Guide Menu Remove Client Link Link/Create Client Register Client Save

**Initial Insurance Demographics**

SUD  Yes  No  Not Evaluated  Client is seeking services

Injecting Drugs  Yes  No  Unknown

Pregnant  Yes  No  Unknown  Not Applicable

**Disposition**

Select Disposition

Select Service Type

Select Provider/Agency

[Add Provider](#)

[Add Service Type](#)

Assigned Staff

Assigned WorkGroup

Disposition Comments

[Add Disposition](#)

Screening Comment - Include Follow Up and Contact Information

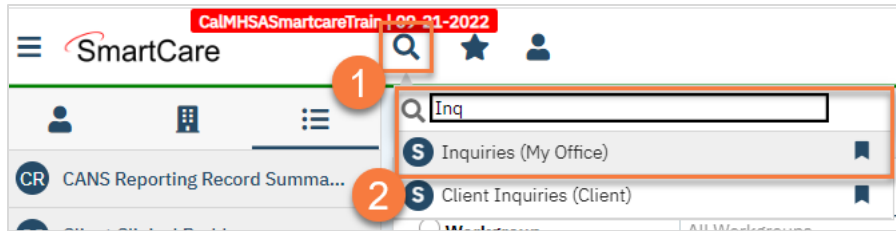
Additional Waitlist information

End Date  T Y  End Time  Now Status In Progress

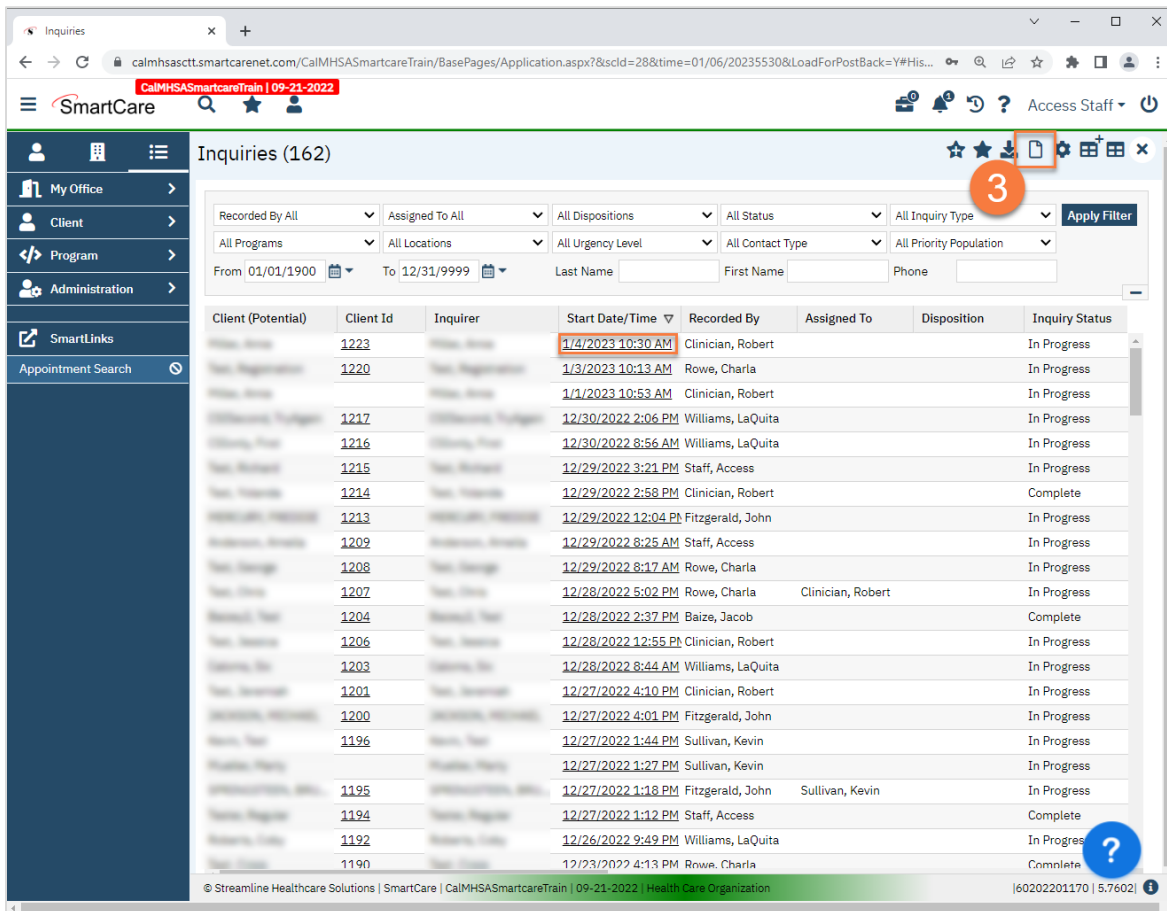
## How do I document calls to the Crisis Line?

Crisis Line calls are documented on the Inquiry screen. This is simply how to document a call. Follow your county's procedures for handling crisis situations. Also consider the context of your crisis call when asking for information. Address the client's most pressing needs before attempting to gather information such as demographics or date of birth.

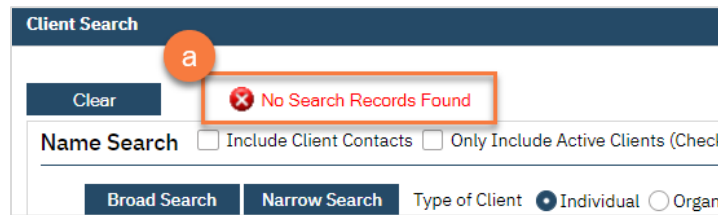
1. Search for the Inquiry screen using the search icon.
2. Select "Inquiries (My Office)"



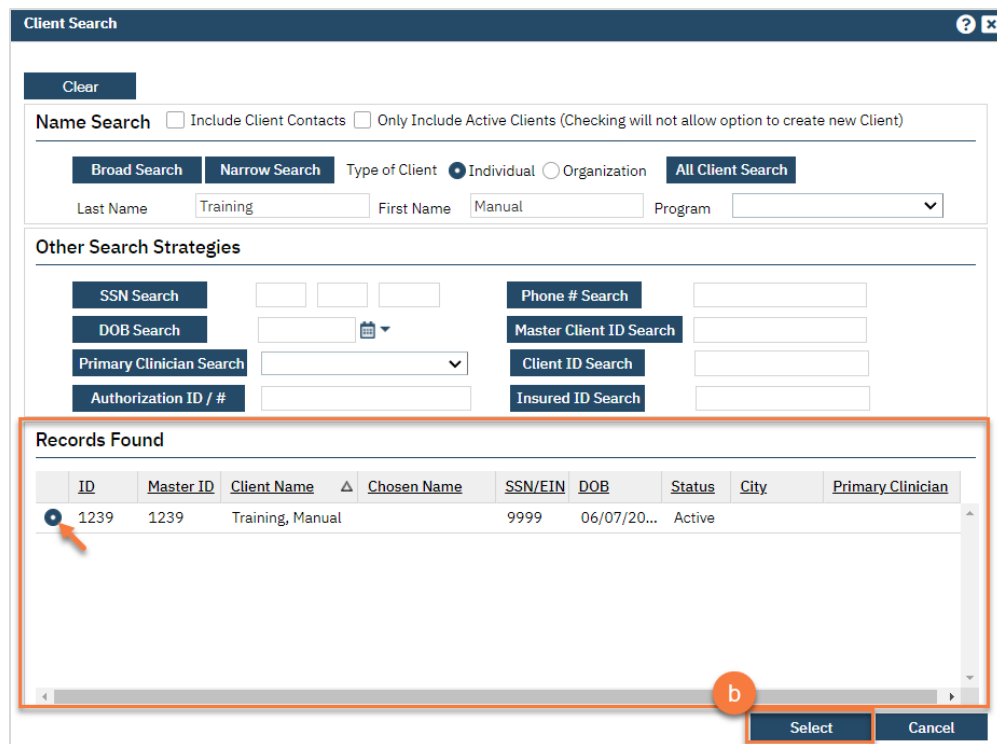
3. This will bring you to the Inquiries list page. If this call was transferred to you, search the list page to determine if an inquiry has already been started for this client. If so, **click the link in the Start Date/Time column**. If an inquiry has not been started, or if the call was direct to the crisis line, **create a new inquiry** by using the new icon.



4. This will bring up the client search window. **Search to determine if the person is a client in the system.** The search includes both current and past clients. You can also **skip this step by selecting “Inquiry (New Client)”** if you know for certain this person is not a client in the system (e.g. they don’t have a SmartCare client ID).
  - a. If there are no matching records, an alert will show at the top of the Client Search window. You may want to try searching by DOB or SSN. **If there are no results, select “Cancel.”** This will take you to the Inquiry screen.



- b. Any search results will show in the “Records Found” area. **Review the Records Found** to determine if the person is already in the system as a client. If the person is already a client in the system, **select the button next to the appropriate record.** Click “Select” to link the Inquiry to the selected client. This will take you to the Inquiry screen and pre-populate the Client Information section.



5. **Complete the information about the caller, or “Inquirer”.**
  - a. Complete the **“Relation to Client”** field. If the client is calling for themselves, select “Self”. If you’ve already selected a client, this section will auto-populate with the client’s information. If the person is not already a client, as you enter the caller’s information, it will push this information automatically into the “Client Information” section.
  - b. **Enter the start date and time of the call.** There are buttons for “T” (today) and “Now” to help make this quick and easy.
  - c. You may also **consider getting a call back number**, in case the client is disconnected or hangs up.

The screenshot shows the 'Inquiry Details' form with the following data:

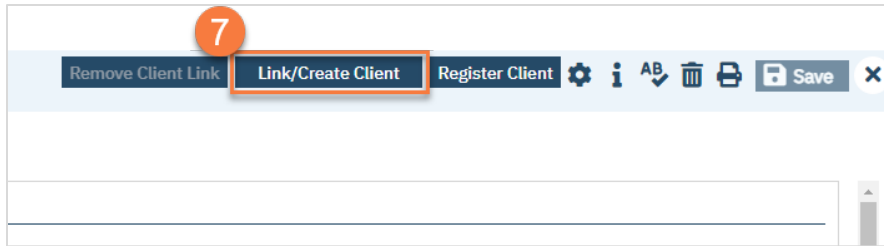
- Inquirer Information:**
  - Relation To Client: Self
  - First Name: Manual
  - Middle Name: (empty)
  - Last Name: Training
  - Call Back: (916) 555-7878
  - Start Date: 01/06/2023
  - Start Time: 05:16 PM
- Client Information (Potential):**
  - First Name: Manual
  - Middle Name: (empty)
  - Last Name: Training
  - Client ID: (empty)
  - Sex: Male
  - SSN: (empty)
  - SSN Unknown/Refused:
  - DOB: 06/07/2002
  - Age: (20 Years)
  - Medi-Cal ID: (empty)
  - Home Phone: (916) 555-7878
  - Cell: (empty)
  - Email: (empty)
  - Urgency Level: (empty)
  - Address1: (empty)
  - Inquiry type: (empty)
  - Address2: (empty)
  - Contact type: (empty)
  - City: (empty)
  - Priority Population: (empty)
  - State: (empty)
  - Zip: (empty)
  - County of Residence: Search here

6. If the person is not a current client, add them as a client. To do this, **complete/confirm the client's First Name and Last Name fields.**
  - a. **Complete the SSN, DOB, and Sex fields.** If the client refuses to share their SSN, doesn't know their SSN, or is not in a situation to answer, you can simply check the box "SSN Unknown/Refused." Once saved, this will fill in the SSN with "999999999", which is SmartCare's version of "no SSN". If the client is unable to provide their date of birth, enter your county's standard response to indicate "unknown DOB". All of these fields can be updated at a later date.
  - b. **Click Save.**

The screenshot shows the 'Inquiry Details' form with the following data:

- Inquirer Information:**
  - Relation To Client: Self
  - First Name: Manual
  - Middle Name: (empty)
  - Last Name: Training
  - Call Back: (916) 555-7878
  - Start Date: 01/06/2023
  - Start Time: 7:16 PM
- Client Information (Potential):**
  - First Name: Manual
  - Middle Name: (empty)
  - Last Name: Training
  - Client ID: (empty)
  - Sex: Male
  - SSN: 999-99-9999
  - SSN Unknown/Refused:
  - DOB: 01/01/1900
  - Age: (123 Years)
  - Medi-Cal ID: (empty)
  - Home Phone: (916) 555-7878
  - Cell: (empty)
  - Email: (empty)
  - Urgency Level: Emergent
  - Address1: (empty)
  - Inquiry type: Crisis
  - Address2: (empty)
  - Contact type: Call
  - City: (empty)
  - Priority Population: (empty)
  - State: (empty)
  - Zip: (empty)
  - County of Residence: Search here

7. **Select the "Link/Create Client" button.** This will bring up the client search window, with a few extra buttons at the bottom.



- a. You must **search by name** by clicking on either “Broad Search” or “Narrow Search”.
- b. You must also **search by SSN and DOB** by clicking on those respective buttons.

 A screenshot of the 'Client Search' window. At the top left is a 'Clear' button. Below it are checkboxes for 'Include Client Contacts' and 'Only Include Active Clients (Checking will not allow option to create new Client)'. The 'Name Search' section has two buttons, 'Broad Search' and 'Narrow Search', both highlighted with red boxes and a red circle 'a'. Below these are input fields for 'Last Name', 'Training', 'First Name', 'Manual', and a 'Program' dropdown. The 'Other Search Strategies' section has several search buttons: 'SSN Search' and 'DOB Search' are highlighted with red boxes and a red circle 'b'. Other buttons include 'Phone # Search', 'Master Client ID Search', 'Client ID Search', and 'Insured ID Search'. At the bottom, there is a 'Records Found' section with a table header containing columns: ID, Master ID, Client Name, Chosen Name, SSN/EIN, DOB, Status, City, and Primary Clinician. The table area is empty with the text 'No data to display'. At the bottom right are 'Select', 'Cancel', and 'Create New Client Record' buttons.

- c. If no records are found based on the search you do, an alert will show at the top of the window.

The screenshot shows the 'Client Search' window. At the top, there is a 'Clear' button and a red error message: 'No Search Records Found'. Below this, the 'Name Search' section has checkboxes for 'Include Client Contacts' and 'Only Include Active Clients'. There are buttons for 'Broad Search', 'Narrow Search', and 'All Client Search'. The 'Type of Client' is set to 'Individual'. Search fields include 'Last Name' (Training), 'First Name' (Manual), and 'Program'. The 'Other Search Strategies' section includes fields for SSN, DOB, Primary Clinician, Authorization ID, Phone #, Master Client ID, Client ID, and Insured ID. The 'Records Found' section shows a table with columns: ID, Master ID, Client Name, Chosen Name, SSN/EIN, DOB, Status, City, and Primary Clinician. The table is empty with the text 'No data to display'. At the bottom right, there are 'Select', 'Cancel', and 'Create New Client Record' buttons.

- d. Any search results will show in the “Records Found” area. **Review the Records Found** to determine if the person is already in the system as a client.
- e. If the person is already a client in the system, **select the button next to the appropriate record.**
- f. **Click “Select”** to link the Inquiry to the selected client.
- g. If the person is not a client, meaning no records were found matching the client’s information, **click “Create New Client Record.”**

**Client Search**

Clear

**Name Search**  Include Client Contacts  Only Include Active Clients (Checking will not allow option to create new Client)

**Broad Search** **Narrow Search** Type of Client  Individual  Organization **All Client Search**

Last Name Training First Name Manual Program

**Other Search Strategies**

**SSN Search** 999 99 9999 **Phone # Search**

**DOB Search** 06/07/2002 **Master Client ID Search**

**Primary Clinician Search** **Client ID Search**

**Authorization ID / #** **Insured ID Search**

**Records Found**

ID	Master ID	Client Name	Chosen Name	SSN/EIN	DOB	Status	City	Primary Clinician
<input checked="" type="radio"/> 1234	1234			9999	08/29/19...	Active		
<input type="radio"/> 1081	1081			9999	09/17/19...	Active		
<input type="radio"/> 1072	1072			9999	03/03/19...	Active		
<input type="radio"/> 1209	1209			9999	10/10/19...	Active	heavyton	
<input type="radio"/> 1096	1096			9999	08/01/19...	Active		Clinician, Robert
<input type="radio"/> 1007	1007			9999	05/27/19...	Active	Test	

Select Cancel

Create New Client Record

h. This will take you back to the Inquiry screen but now a client ID number will be added.

**Client Information (Potential)**

First Name Manual Middle Name Last Name Training Client ID 1239 Sex Male

SSN 999999999  SSN Unknown/Refused DOB 06/07/2002 Age (20 Years) Medi-Cal ID

Home Phone (916) 555-7878 Cell Email

8. Assess the urgency of the call, as sometimes people call the Crisis Line by mistake. **Complete the Urgency Level, Inquiry type, and Contact type fields.** The options for each field are listed in the tables below. This includes a description of when to use each option.

**Client Information (Potential)**

First Name Manual Middle Name Last Name Training Client ID 1239 Sex Male

SSN 999-99-9999  SSN Unknown/Refused DOB 06/07/2002 Age (20 Years) Medi-Cal ID

Home Phone (916) 555-7878 Cell Email

Client is not homeless  Client is homeless  Client is chronically homeless

Address1 Address2 City State Zip County of Residence Search here

Presenting Problem

Urgency Level Emergent

Inquiry type Crisis

Contact type Call

Priority Population

Client Can Legally Sign  Yes  No

Current Client Information (If any)

Client Id: 1239  
Last Inquiry Date: 01/06/23  
Coverage History  
No Coverage History

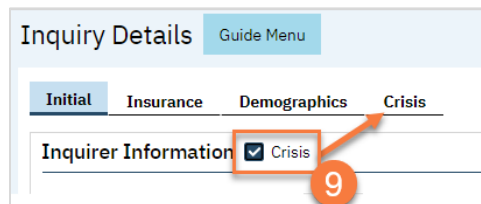


Urgency Level	Description/Use Case	Timelines
Emergent	Use if the call is an emergency	Addressed immediately
Not Urgent	Use if the call is a routine request for services	Appointment within 10 business days
Urgent	Use if the call is an urgent request	Appointment within 72 hours

Inquiry Type	Description/Use Case
Requests for services/screening	Use when the reason for the call is a request for new services
Crisis	Use when the reason for the call is for crisis services
Information	Use when the reason for the call is for information
Discharge/Transition Coordination	Use when the reason for the call is for another provider to coordinate transition of care to/from your agency
Jail Diversion	Use when the reason for the call is related to Jail Diversion programs
Consultation	Use when the reason for the call is for an outside provider seeking a consultation
Other	Use when the reason for the call is not addressed by any of the above

Contact Type	Description/Use Case
Call	Use when the inquiry was complete via telephone
Face to Face	Use when the inquiry was completed via in-person, such as a walk-in
Form	Use when the inquiry was completed via form, such as a referral that was sent to the county
Teleconference	Use when the inquiry was complete via teleconference, such as Zoom, FaceTime, Webex, or other video-audio conferencing software

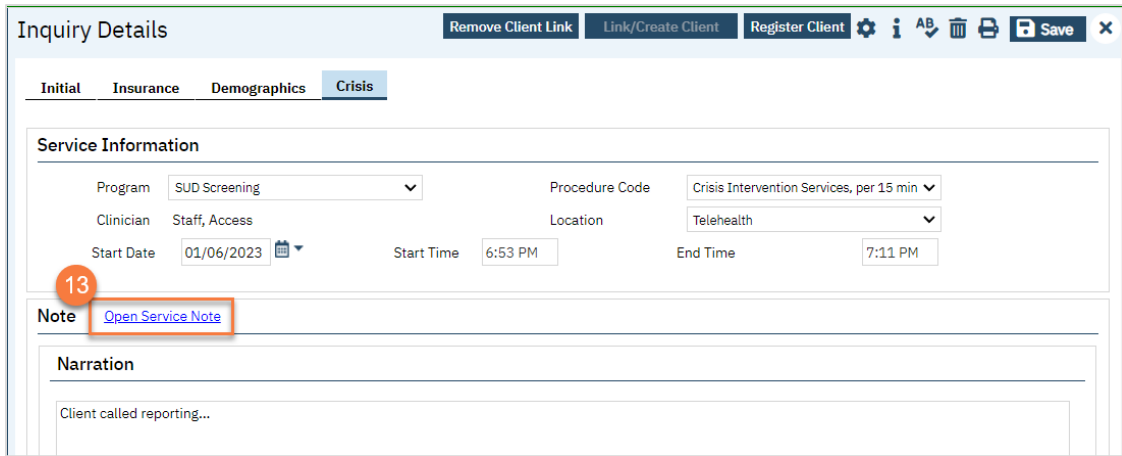
9. If the person is actually in crisis, **select the checkbox labeled “Crisis”** at the top of the screen. This opens a new tab where you’ll document your call with the client. If the client is not actually in crisis, document the call as appropriate. If the client is requesting services, we recommend following the steps in How do I document a request for services received via the Access Line?



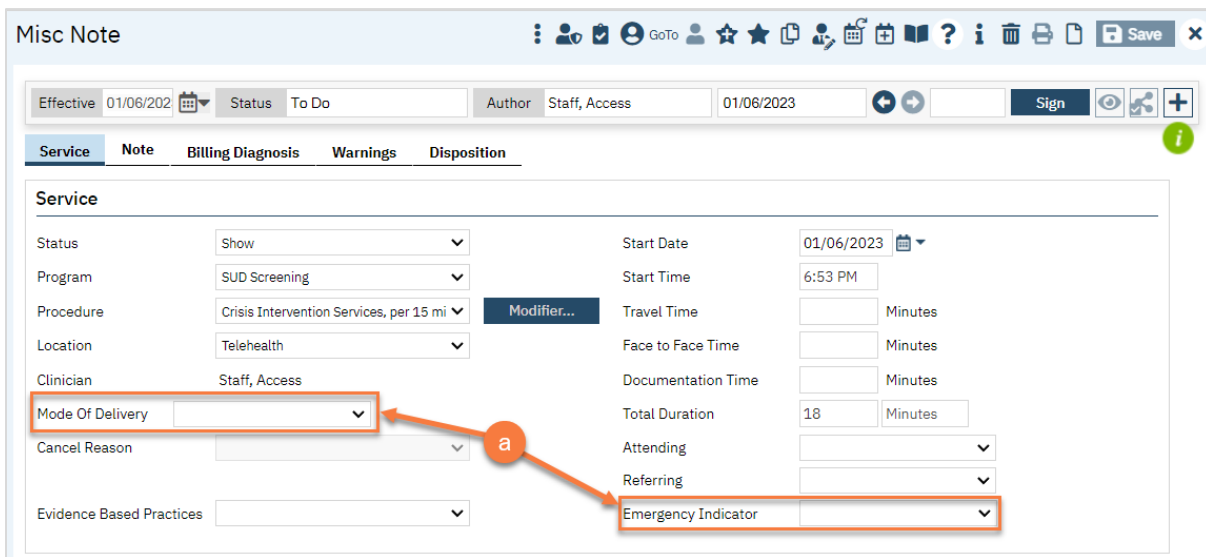
- a. In the Crisis tab, **enter the service information**. This will then open a text field for you to enter the note.
- b. **Enter narrative information in the Narration field**.
- c. **Click Save**.

10. When you're finished with the crisis call, navigate back to the Initial tab and scroll to the bottom of the page. Enter the end date and time of the Inquiry and change the status to "Complete". Once again, there are "T" (today) and "Now" buttons to make this easier.
11. Click Save.
12. Navigate back to the Crisis tab.

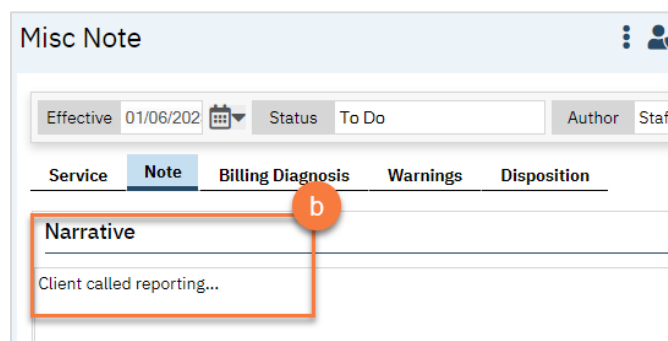
13. Click the newly available link for Open Service Note.



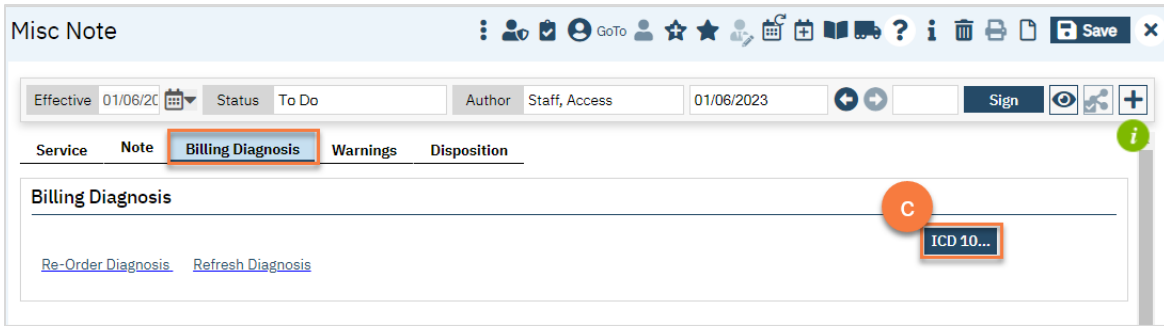
- a. This brings up a service note screen. It will pull most information forward, including creating a total duration, based on start and end times. **Enter Emergency Indicator and Mode of Delivery**, as well as any other necessary fields.



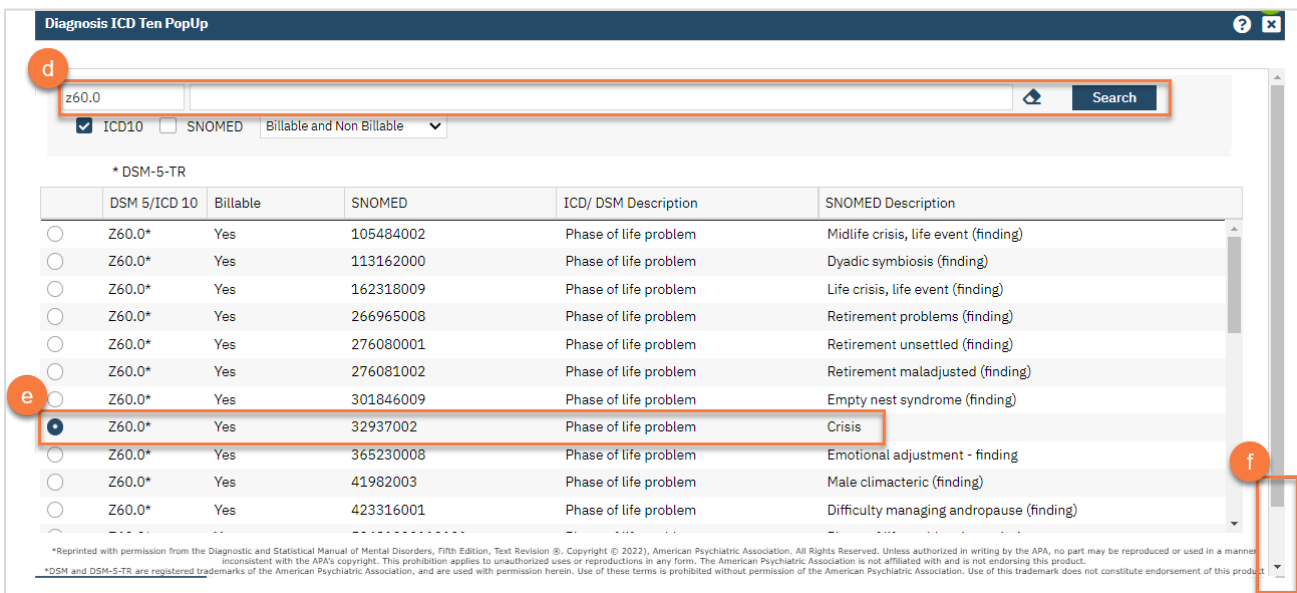
- b. Click on the **Note** tab to confirm your narrative note was pulled forward. Add any additional information as needed.



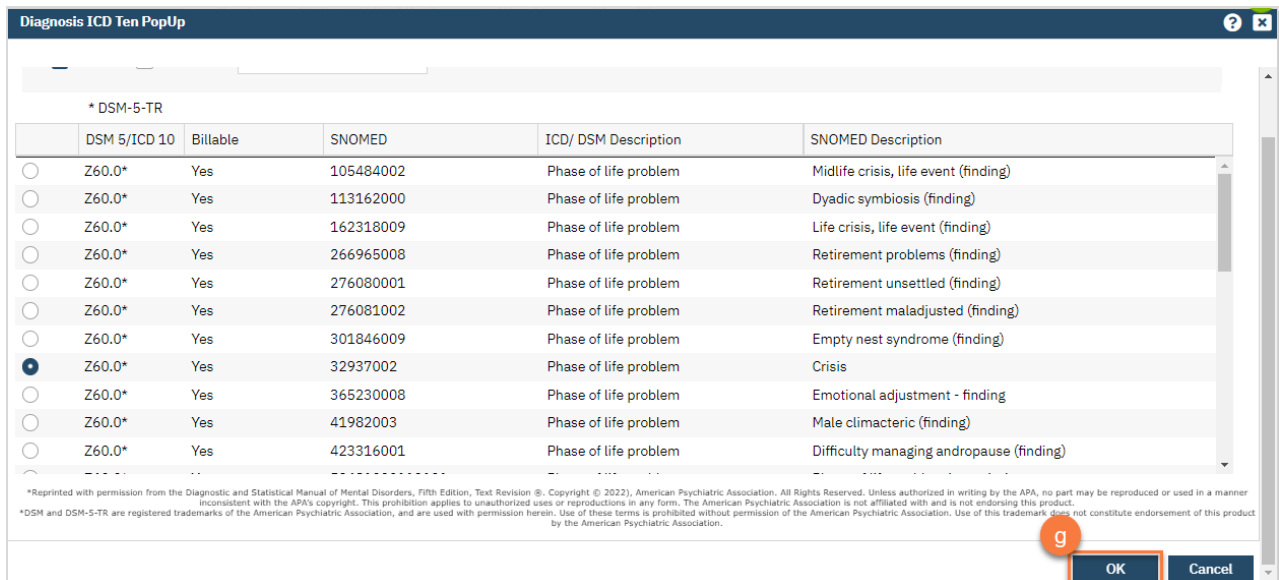
- c. Click on the **Billing Diagnosis** tab. If the client already has a diagnosis, you can leave this section as is. If this client does not have a diagnosis, click on the **ICD 10** button.



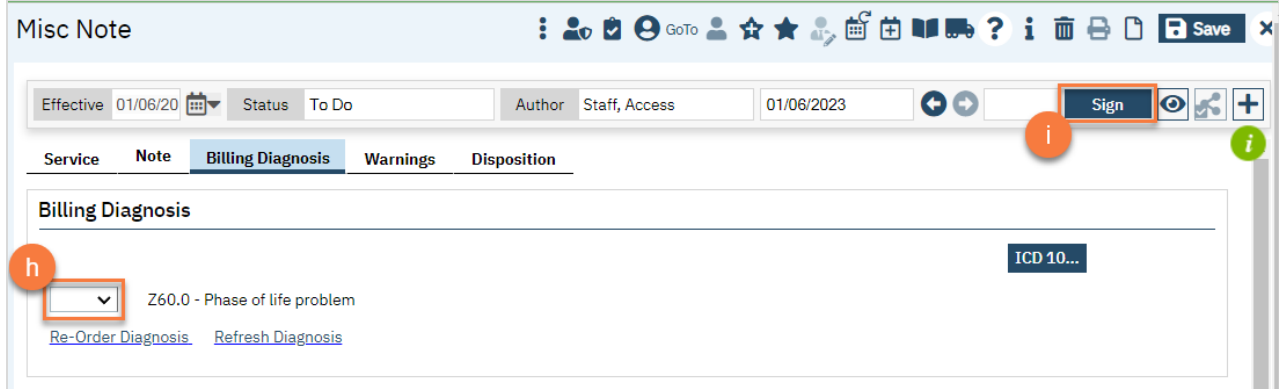
- d. This brings up a Diagnosis pop-up window. **Search for a diagnosis using the code field or description field.** If you are an LPHA, you may use “Z03.89 Encounter for observation for other suspected diseases and conditions ruled out”. If you are not an LPHA, you can select an appropriate Social Determinant of Health, such as “Z60.0 Phase of life problem – Crisis”.
- e. **Select the code you want to use.**
- f. **Scroll to the bottom of the screen.**



- g. **Click OK.**



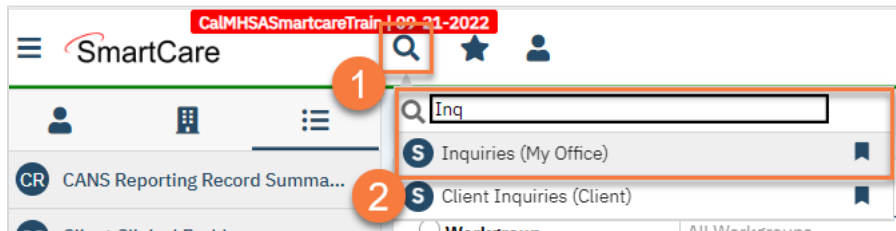
- h. This brings you back to the Billing Diagnosis tab on the note. Select “1” from the drop down next to the newly added ICD-10 code.
- i. Once you’ve completed all pieces of the service note, click Sign. You are now finished and may close any open screens.



## What do I do when I receive a paper referral from a partner agency?

Paper referrals, meaning referrals that are received via a form, fax, paper, etc. are documented on the Inquiry screen.

1. Search for the Inquiry screen using the search icon.
2. Select “Inquiries (My Office)”



3. This will bring you to the Inquiries list page. Create a new inquiry by using the new icon.

Inquiries (162)

Recorded By All Assigned To All Dispositions All Status All Inquiry Type Apply Filter

All Programs All Locations All Urgency Level All Contact Type All Priority Population

From 01/01/1900 To 12/31/9999 Last Name First Name Phone

Client (Potential)	Client Id	Inquirer	Start Date/Time	Recorded By	Assigned To	Disposition	Inquiry Status
Wills, Anna	1223	Wills, Anna	1/4/2023 10:30 AM	Clinician, Robert			In Progress
Rowe, Charla	1220	Rowe, Charla	1/3/2023 10:13 AM	Rowe, Charla			In Progress
Wills, Anna		Wills, Anna	1/1/2023 10:53 AM	Clinician, Robert			In Progress
Williams, LaQuita	1217	Williams, LaQuita	12/30/2022 2:06 PM	Williams, LaQuita			In Progress
Williams, LaQuita	1216	Williams, LaQuita	12/30/2022 8:56 AM	Williams, LaQuita			In Progress
Staff, Access	1215	Staff, Access	12/29/2022 3:21 PM	Staff, Access			In Progress
Clinician, Robert	1214	Clinician, Robert	12/29/2022 2:58 PM	Clinician, Robert			Complete
Fitzgerald, John	1213	Fitzgerald, John	12/29/2022 12:04 PM	Fitzgerald, John			In Progress
Staff, Access	1209	Staff, Access	12/29/2022 8:25 AM	Staff, Access			In Progress
Rowe, Charla	1208	Rowe, Charla	12/29/2022 8:17 AM	Rowe, Charla			In Progress
Rowe, Charla	1207	Rowe, Charla	12/28/2022 5:02 PM	Rowe, Charla	Clinician, Robert		In Progress
Baize, Jacob	1204	Baize, Jacob	12/28/2022 2:37 PM	Baize, Jacob			Complete
Clinician, Robert	1206	Clinician, Robert	12/28/2022 12:55 PM	Clinician, Robert			In Progress
Williams, LaQuita	1203	Williams, LaQuita	12/28/2022 8:44 AM	Williams, LaQuita			In Progress
Clinician, Robert	1201	Clinician, Robert	12/27/2022 4:10 PM	Clinician, Robert			In Progress
Fitzgerald, John	1200	Fitzgerald, John	12/27/2022 4:01 PM	Fitzgerald, John			In Progress
Sullivan, Kevin	1196	Sullivan, Kevin	12/27/2022 1:44 PM	Sullivan, Kevin			In Progress
Sullivan, Kevin		Sullivan, Kevin	12/27/2022 1:27 PM	Sullivan, Kevin			In Progress
Fitzgerald, John	1195	Fitzgerald, John	12/27/2022 1:18 PM	Fitzgerald, John	Sullivan, Kevin		In Progress
Staff, Access	1194	Staff, Access	12/27/2022 1:12 PM	Staff, Access			Complete
Williams, LaQuita	1192	Williams, LaQuita	12/26/2022 9:49 PM	Williams, LaQuita			In Progress
Rowe, Charla	1190	Rowe, Charla	12/23/2022 4:13 PM	Rowe, Charla			Complete

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- This will bring up the client search window. You may search to determine if the person is a current client. If person is a new client, or you cannot find them in the system, click "Inquiry (New Client)".

**Client Search** ? x

**Clear**

**Name Search**  Include Client Contacts  Only Include Active Clients (Checking will not allow option to create new Client)

**Broad Search** **Narrow Search** Type of Client  Individual  Organization **All Client Search**

Last Name  First Name  Program

**Other Search Strategies**

**SSN Search**    **Phone # Search**

**DOB Search**   **Master Client ID Search**

**Primary Clinician Search**  **Client ID Search**

**Authorization ID / #**  **Insured ID Search**

**Records Found**

ID	Master ID	Client Name	Chosen Name	SSN/EIN	DOB	Status	City	Primary Clinician
No data to display								

**Select** **Cancel**

4

- a. To search for a client, enter their name and click “Broad Search.” You can also search by SSN by entering their social security number and clicking “SSN Search.” You can do the same with date of birth (DOB), phone number, etc. If you find the person in the system, meaning they show in the Records Found section, click “Select” to bring their information into the Inquiry screen.

**Client Search** ? x

**Clear**

**Name Search**  Include Client Contacts  Only Include Active Clients (Checking will not allow option to create new Client)

**Broad Search** **Narrow Search** Type of Client  Individual  Organization **All Client Search**

Last Name  First Name  Program

**Other Search Strategies**

**SSN Search**    **Phone # Search**

**DOB Search**   **Master Client ID Search**

**Primary Clinician Search**  **Client ID Search**

**Authorization ID / #**  **Insured ID Search**

**Records Found**

ID	Master ID	Client Name	Chosen Name	SSN/EIN	DOB	Status	City	Primary Clinician
No data to display								

**Select** **Cancel**

**Inquiry (New Client)**

a

5. This brings you to the Inquiry Details screen. **Complete the information about the person requesting services, or “Inquirer”.**
  - a. Make sure to input the date and time you received the referral in Start Date and Start Time. There are buttons for “T” (today) and “Now” to help make this quick and easy.

**Inquiry Details**
Guide Menu
Remove Client Link
Link/Create Client
Register Client
Settings
AB
Trash
Print
Save
Close

Initial

Insurance

Demographics

**Inquirer Information**
 Crisis

Relation To Client Self ▼

Call Back (916) 555-7878 Ext

Start Date 01/06/2023 T Y 📅

First Name Manual

Ext

Start Time 05:16 PM Now

Middle Name

Email

Last Name Training

**Client Information (Potential)**

First Name Manual

SSN   SSN Unknown/Refused

Home Phone (916) 555-7878

Client is not homeless

Address1

Address2

City

State  ▼ Zip

Presenting Problem

Middle Name

Client is homeless

DOB 06/07/2002 📅 Age (20 Years)

Cell

Client is chronically homeless

Urgency Level \*  ▼

Inquiry type  ▼

Contact type \*  ▼

Priority Population  ▼

County of Residence Search here 📍

Current Client Information (If any)

Last Name Training

Client ID

Sex Male ▼

DOB 06/07/2002 📅 Age (20 Years)

Medi-Cal ID

Email

Client Can Legally Sign  Yes  No

- b. To complete the rest of the referring agency’s information, navigate to the Referral Resource section further down on the page. Your county may choose to leave the inquirer information blank and simply enter the agency information, along with contact person, in this section. This section’s information currently does not show on the list page, however.



Inquiry Details Remove Client Link Link/Create Client Register Client i AB 🗑️ 🖨️ 💾 Save

**Initial** Insurance Demographics

**b**

**Referral Resource**

Referral Date  📅 Referral Type  Referral Subtype

Organization Name  Phone

First Name  Last Name

Address Line 1  Address Line 2

City  State  Zip  Email

Comments

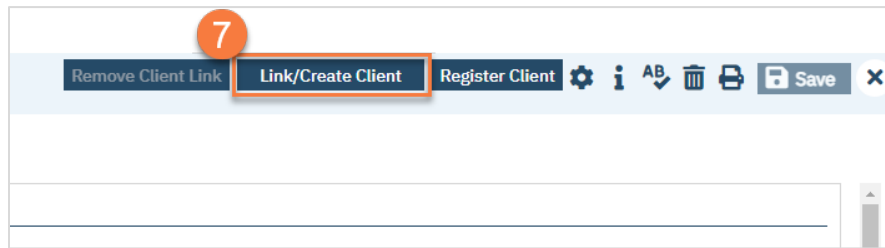
6. Complete the information about the potential client.
  - a. Complete the First Name and Last Name fields. Middle Name is not required but can be added as necessary.
  - b. Complete the SSN and DOB fields. This is for the client’s social security number (SSN) and date of birth (DOB), respectively. If the client refuses to share, or doesn’t know, you can simply check the box “SSN Unknown/Refused.” Once saved, this will fill in the SSN with “999999999”, which is SmartCare’s version of “no SSN”.
  - c. Complete the Sex field.
  - d. Complete the Urgency Level, Inquiry type, and Contact type fields. The options for each field are listed in the tables below. This includes a description of when to use each option.
  - e. Click Save.

Urgency Level	Description/Use Case	Timelines
Emergent	Use if the referral is an emergency	Addressed immediately
Not Urgent	Use if the referral is a routine request for services	Appointment within 10 business days
Urgent	Use if the referral is an urgent request for services	Appointment within 72 hours

Inquiry Type	Description/Use Case
Requests for services/screening	Use when the referral is a request for new services
Crisis	Use when the referral is for crisis services
Information	Use when the referral is for information
Discharge/Transition Coordination	Use when the referral is for another provider to coordinate transition of care to/from your agency
Jail Diversion	Use when the referral is related to Jail Diversion programs
Consultation	Use when the referral is for an outside provider seeking a consultation
Other	Use when the referral is not addressed by any of the above

Contact Type	Description/Use Case
Call	Use when the inquiry was complete via telephone
Face to Face	Use when the inquiry was completed via in-person, such as a walk-in
Form	Use when the inquiry was completed via form, such as a referral that was sent to the county
Teleconference	Use when the inquiry was complete via teleconference, such as Zoom, FaceTime, Webex, or other video-audio conferencing software

7. Select the “Link/Create Client” button. This will bring up the client search window, with a few extra buttons at the bottom.



- a. You must **search by name** by clicking on either “Broad Search” or “Narrow Search”.
- b. You must also **search by SSN and DOB** by clicking on those respective buttons.

 A screenshot of the 'Client Search' window. At the top, there is a 'Clear' button. Below it is the 'Name Search' section with checkboxes for 'Include Client Contacts' and 'Only Include Active Clients (Checking will not allow option to create new Client)'. There are two buttons, 'Broad Search' and 'Narrow Search', both highlighted with red boxes and a circled 'a'. To their right are radio buttons for 'Type of Client' with 'Individual' selected. An 'All Client Search' button is also present. Below these are input fields for 'Last Name' (containing 'Training'), 'First Name' (containing 'Manual'), and a 'Program' dropdown menu. The 'Other Search Strategies' section contains several search buttons: 'SSN Search' (highlighted with a red box and a circled 'b'), 'DOB Search' (highlighted with a red box and a circled 'b'), 'Primary Clinician Search', 'Authorization ID / #', 'Phone # Search', 'Master Client ID Search', 'Client ID Search', and 'Insured ID Search'. Below this is a 'Records Found' section with a table header: ID, Master ID, Client Name, Chosen Name, SSN/EIN, DOB, Status, City, Primary Clinician. The table body is empty and contains the text 'No data to display'. At the bottom right, there are 'Select' and 'Cancel' buttons, and a 'Create New Client Record' button.

- c. If no records are found based on the search you do, an alert will show at the top of the window.

The screenshot shows the 'Client Search' window. At the top, there is a 'Clear' button and a message 'No Search Records Found' with a red 'X' icon. Below this is the 'Name Search' section with checkboxes for 'Include Client Contacts' and 'Only Include Active Clients'. There are buttons for 'Broad Search', 'Narrow Search', and 'All Client Search'. The 'Type of Client' is set to 'Individual'. Search fields include 'Last Name' (Training), 'First Name' (Manual), and 'Program'. The 'Other Search Strategies' section includes fields for SSN Search, DOB Search (06/07/2002), Primary Clinician Search, Authorization ID / #, Phone # Search, Master Client ID Search, Client ID Search, and Insured ID Search. The 'Records Found' section contains a table with columns: ID, Master ID, Client Name, Chosen Name, SSN/EIN, DOB, Status, City, and Primary Clinician. The table is empty with the text 'No data to display'. At the bottom right, there are 'Select', 'Cancel', and 'Create New Client Record' buttons.

- d. Any search results will show in the “Records Found” area. **Review the Records Found** to determine if the person is already in the system as a client.
- e. If the person is already a client in the system, **select the button next to the appropriate record.**
- f. **Click “Select”** to link the Inquiry to the selected client.
- g. If the person is not a client, meaning no records were found matching the client’s information, **click “Create New Client Record.”**

**Client Search**

Clear

**Name Search**  Include Client Contacts  Only Include Active Clients (Checking will not allow option to create new Client)

**Broad Search** **Narrow Search** Type of Client  Individual  Organization **All Client Search**

Last Name Training First Name Manual Program

**Other Search Strategies**

**SSN Search** 999 99 9999 **Phone # Search**

**DOB Search** 06/07/2002 **Master Client ID Search**

**Primary Clinician Search** **Client ID Search**

**Authorization ID / #** **Insured ID Search**

**Records Found**

ID	Master ID	Client Name	Chosen Name	SSN/EIN	DOB	Status	City	Primary Clinician
1234	1234			9999	08/29/19...	Active		
1081	1081			9999	09/17/19...	Active		
1072	1072			9999	03/03/19...	Active		
1209	1209			9999	10/10/19...	Active	heavyton	
1096	1096			9999	08/01/19...	Active		Clinician, Robert
1007	1007			9999	05/27/19...	Active	Test	

Select Cancel

Create New Client Record

h. This will take you back to the Inquiry screen but now a client ID number will be added.

**Inquiry Details** Guide Menu Remove Client Link Link/Create Client Register Client Save

**Initial Insurance Demographics**

**Inquirer Information**  Crisis

Relation To Client Self First Name Manual Middle Name Last Name Training

Call Back (916) 555-7878 Ext Email

Start Date 01/06/2023 Start Time 5:16 PM Now

**Client Information (Potential)**

First Name Manual Middle Name Last Name Training Client ID 1239 Sex Male

SSN 999999999  SSN Unknown/Refused DOB 06/07/2002 Age (20 Years) Medi-Cal ID

Home Phone (916) 555-7878 Cell Email

Client is not homeless  Client is homeless  Client is chronically homeless

Urgency Level Not urgent

Address1 Inquiry type Request for services/screening

Address2 Contact type Call

City Priority Population

State Zip County of Residence Search here

Presenting Problem

Client Can Legally Sign  Yes  No

Current Client Information (If any)

Client Id: 1239  
Last Inquiry Date:  
Coverage History  
No Coverage History

8. Click on the "Insurance" tab.

a. Select "Medi-Cal" from the "Payer" drop-down and enter the client's Medi-Cal number (CIN) in the "Insurance ID" field. Click "Verify" to verify the client's Medi-Cal insurance.

**Inquiry Details** Remove Client Link Link/Create Client Register Client Save X

Initial **Insurance** Demographics

**Electronic Eligibility Verification**

Payer  Insurance Id  **Verify...**

**Coverage Information**  Show Current Plans Only

Plan	Insured ID	Group ID	Comment
Coverage Information			

**Add**

9. Click on the “Demographics” tab.

- a. We recommend **completing the “Gender Identity” and “Pronoun” fields** to ensure the person is not misgendered as additional staff engage with the client.

**Inquiry Details** Remove Client Link Link/Create Client Register Client Save X

Initial Insurance **Demographics**

**General Information**

Primary Care Coordinator  Medical Provider  Professional Suffix   Active

Prefix  Suffix

**Identifying Information**

Marital Status  **Gender Identity**  Sexual Orientation

Deceased On  Cause of Death  **Pronoun**

**Ethnicity**

- Amerasian
- American Native
- Asian Indian
- Black
- Cambodian

**Race**

- Alaskan Native
- American Indian
- American Indian and Alaskan Native
- Asian
- Asian Indian

**Client declined to provide**

- Date of Birth
- Ethnicity
- Gender Identity
- Hispanic Origin
- Primary/Preferred Language

- b. **Complete the “Primary/Preferred Language” field.** If the client does not speak English or requires an interpreter, make sure to check the appropriate checkbox.

**Inquiry Details** Remove Client Link Link/Create Client Register Client [Settings] [Info] [AB] [Trash] [Print] [Save]

**Initial Insurance Demographics**

Employment Information [Text Field]

---

**Language**

Primary/Preferred Language [Dropdown]  Client does not speak English Hispanic Origin [Dropdown]

Interpreter Services Needed

---

**Transportation Information**

Transportation Service

Note any special needs accommodations (e.g. wheelchair, service animal, high rise)

[Text Field]

---

**Preferences**

Communication Preference [Dropdown] Mobile Phone Provider [Dropdown]

Days  M  T  W  Th  F

Geographic Location [Text Field]

Comment [Text Area]

[?] [Save]

10. You may enter any additional information in any of the tabs, but none are required. Once complete, **enter the end date and time of the Inquiry and change the status to "Complete"**. Once again, there are "T" (today) and "Now" buttons to make this easier.
11. **Click Save.** You may now close the Inquiry and move on to Screening.

**Inquiry Details** Guide Menu Remove Client Link Link/Create Client Register Client [Settings] [Info] [AB] [Trash] [Print] [Save] [X]

**Initial Insurance Demographics**

SUD  Yes  No  Not Evaluated  Client is seeking services

Injecting Drugs  Yes  No  Unknown

Pregnant  Yes  No  Unknown  Not Applicable

---

**Disposition**

Select Disposition [Dropdown]

Select Service Type [Dropdown]

Select Provider/Agency [Dropdown]

[Add Provider](#)

[Add Service Type](#)

Assigned Staff [Text Field] Assigned WorkGroup [Dropdown]

Disposition Comments [Text Area]

[Add Disposition](#)

Screening Comment - Include Follow Up and Contact Information [Text Area]

Additional Waitlist information [Text Area]

End Date [Text Field] [T] [Y] [Calendar] End Time [Text Field] [Now] Status [In Progress] [Dropdown]

[10] [11] [?]

## What do I do when someone walks in for an assessment?

Walk-in assessments can skip the Inquiry and Screening steps and go straight to [Intake and Assessment](#).

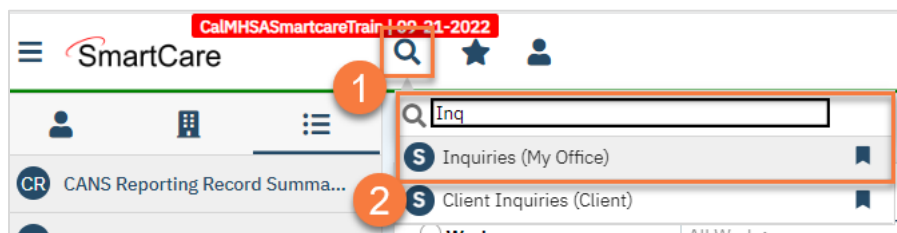
## What do I do if someone calls a non-crisis line and says they're in crisis?

When someone calls a non-crisis line saying they're in crisis, transfer them immediately to crisis services per your county's policies and procedures. It's ok if you've started an inquiry. Simply save the inquiry. The crisis services staff can continue the inquiry from their computer.

## What do I do if someone calls requesting services, but I don't provide crisis or screening services?

Even if you don't provide screening or crisis services, you can still document the request for services. This is done on the Inquiry screen.

1. Search for the Inquiry screen using the search icon.
2. Select "Inquiries (My Office)"



3. This will bring you to the Inquiries list page. Create a new inquiry by using the new icon.



Inquiries (162)

Recorded By All Assigned To All Dispositions All Status All Inquiry Type Apply Filter

All Programs All Locations All Urgency Level All Contact Type All Priority Population

From 01/01/1900 To 12/31/9999 Last Name First Name Phone

Client (Potential)	Client Id	Inquirer	Start Date/Time	Recorded By	Assigned To	Disposition	Inquiry Status
Wills, Anna	1223	Wills, Anna	1/4/2023 10:30 AM	Clinician, Robert			In Progress
Rowe, Charla	1220	Rowe, Charla	1/3/2023 10:13 AM	Rowe, Charla			In Progress
Wills, Anna		Wills, Anna	1/1/2023 10:53 AM	Clinician, Robert			In Progress
Williams, LaQuita	1217	Williams, LaQuita	12/30/2022 2:06 PM	Williams, LaQuita			In Progress
Williams, LaQuita	1216	Williams, LaQuita	12/30/2022 8:56 AM	Williams, LaQuita			In Progress
Staff, Access	1215	Staff, Access	12/29/2022 3:21 PM	Staff, Access			In Progress
Clinician, Robert	1214	Clinician, Robert	12/29/2022 2:58 PM	Clinician, Robert			Complete
Fitzgerald, John	1213	Fitzgerald, John	12/29/2022 12:04 PM	Fitzgerald, John			In Progress
Staff, Access	1209	Staff, Access	12/29/2022 8:25 AM	Staff, Access			In Progress
Rowe, Charla	1208	Rowe, Charla	12/29/2022 8:17 AM	Rowe, Charla			In Progress
Rowe, Charla	1207	Rowe, Charla	12/28/2022 5:02 PM	Rowe, Charla	Clinician, Robert		In Progress
Baize, Jacob	1204	Baize, Jacob	12/28/2022 2:37 PM	Baize, Jacob			Complete
Clinician, Robert	1206	Clinician, Robert	12/28/2022 12:55 PM	Clinician, Robert			In Progress
Williams, LaQuita	1203	Williams, LaQuita	12/28/2022 8:44 AM	Williams, LaQuita			In Progress
Clinician, Robert	1201	Clinician, Robert	12/27/2022 4:10 PM	Clinician, Robert			In Progress
Fitzgerald, John	1200	Fitzgerald, John	12/27/2022 4:01 PM	Fitzgerald, John			In Progress
Sullivan, Kevin	1196	Sullivan, Kevin	12/27/2022 1:44 PM	Sullivan, Kevin			In Progress
Sullivan, Kevin		Sullivan, Kevin	12/27/2022 1:27 PM	Sullivan, Kevin			In Progress
Fitzgerald, John	1195	Fitzgerald, John	12/27/2022 1:18 PM	Fitzgerald, John	Sullivan, Kevin		In Progress
Staff, Access	1194	Staff, Access	12/27/2022 1:12 PM	Staff, Access			Complete
Williams, LaQuita	1192	Williams, LaQuita	12/26/2022 9:49 PM	Williams, LaQuita			In Progress
Rowe, Charla	1190	Rowe, Charla	12/23/2022 4:13 PM	Rowe, Charla			Complete

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- This will bring up the client search window. You may search to determine if the person is a current client. If person is a new client, or you cannot find them in the system, click "Inquiry (New Client)".

**Client Search** [?] [X]

Clear

**Name Search**  Include Client Contacts  Only Include Active Clients (Checking will not allow option to create new Client)

Broad Search | **Narrow Search** | Type of Client  Individual  Organization | All Client Search

Last Name  First Name  Program

**Other Search Strategies**

SSN Search    | Phone # Search

DOB Search  [Calendar Icon] | Master Client ID Search

Primary Clinician Search  | Client ID Search

Authorization ID / #  | Insured ID Search

**Records Found**

ID	Master ID	Client Name	Chosen Name	SSN/EIN	DOB	Status	City	Primary Clinician
No data to display								

Select Cancel

**4**

- a. To search for a client, enter their name and click “Broad Search.” You can also search by SSN by entering their social security number and clicking “SSN Search.” You can do the same with date of birth (DOB), phone number, etc. If you find the person in the system, meaning they show in the Records Found section, click “Select” to bring their information into the Inquiry screen.

**Client Search** [?] [X]

Clear

**Name Search**  Include Client Contacts  Only Include Active Clients (Checking will not allow option to create new Client)

Broad Search | **Narrow Search** | Type of Client  Individual  Organization | All Client Search

Last Name  First Name  Program

**Other Search Strategies**

SSN Search    | Phone # Search

DOB Search  [Calendar Icon] | Master Client ID Search

Primary Clinician Search  | Client ID Search

Authorization ID / #  | Insured ID Search

**Records Found**

ID	Master ID	Client Name	Chosen Name	SSN/EIN	DOB	Status	City	Primary Clinician
No data to display								

Select Cancel

**a**

Inquiry (New Client)

5. This brings you to the Inquiry Details screen. **Complete the information about the caller, or “Inquirer”.**
  - a. If the client is requesting services for themselves, select “Self” under “Relation to Client.” This way, as you enter the caller’s information, it will push this information automatically into the “Client Information” section.
  - b. Make sure to input the start date and time of the call. There are buttons for “T” (today) and “Now” to help make this quick and easy.

The screenshot shows the 'Inquiry Details' form with two main sections: 'Inquirer Information' and 'Client Information (Potential)'. The 'Inquirer Information' section includes fields for 'Relation To Client' (set to 'Self'), 'First Name' (Manual), 'Middle Name', 'Last Name' (Training), 'Call Back' ((916) 555-7878), 'Ext', 'Email', 'Start Date' (01/06/2023), and 'Start Time' (05:16 PM). A red box labeled '5' surrounds the entire 'Inquirer Information' section. Red callout 'a' points to the 'Relation To Client' dropdown, and red callout 'b' points to the 'Start Date' field. The 'Client Information (Potential)' section includes fields for 'First Name' (Manual), 'Middle Name', 'Last Name' (Training), 'Client ID', 'Sex' (Male), 'SSN', 'DOB' (06/07/2020), 'Age' (20 Years), 'Medi-Cal ID', 'Home Phone', 'Cell', 'Email', 'Urgency Level', 'Inquiry type', 'Contact type', 'Priority Population', 'City', 'State', 'Zip', 'County of Residence', 'Presenting Problem', and 'Current Client Information (If any)'. There are also radio buttons for 'Client is not homeless', 'Client is homeless', and 'Client is chronically homeless', and a checkbox for 'SSN Unknown/Refused'. A 'Client Can Legally Sign' section with 'Yes' and 'No' options is at the bottom.

6. **Complete the information about the potential client.**
  - a. **Complete the First Name and Last Name fields.** Middle Name is not required but can be added as necessary.
  - b. **Complete the SSN and DOB fields.** This is for the client’s social security number (SSN) and date of birth (DOB), respectively. If the client refuses to share, or doesn’t know, you can simply check the box “SSN Unknown/Refused.” Once saved, this will fill in the SSN with “999999999”, which is SmartCare’s version of “no SSN”. These fields can be changed in the future if necessary.
  - c. **Complete the Sex field.** This field can be changed in the future if necessary.
  - d. **Complete the Urgency Level, Inquiry type, and Contact type fields.** The options for each field are listed in the tables below. This includes a description of when to use each option.
  - e. **Click Save.**

**Inquiry Details** Guide Menu Remove Client Link Link/Create Client Register Client Settings AB Print Save

**Initial** Insurance Demographics

**Inquirer Information**  Crisis

Relation To Client: Self  First Name: Manual  Middle Name:  Last Name: Training

Call Back: (916) 555-7878  Ext:  Email:

Start Date: 01/06/2023  Start Time: 05:16 PM  Now

**Client Information (Potential)**

First Name: Manual  Middle Name:  Last Name: Training  Client ID:  Sex: Male

SSN:   SSN Unknown/Refused  DOB: 06/07/2002  Age (20 Years)  Medi-Cal ID:

Home Phone: (916) 555-7878  Cell:  Email:

Client is not homeless  Client is homeless  Client is chronically homeless

Address1:  Address2:

City:  Priority Population:

State:  Zip:  County of Residence: Search here

Urgency Level: Not urgent

Inquiry type: Request for services/screening

Contact type: Call

Presenting Problem:

Current Client Information (If any):

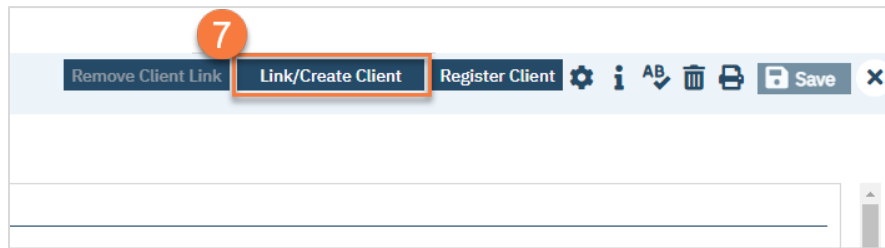
Client Can Legally Sign  Yes  No

Urgency Level	Description/Use Case	Timelines
Emergent	Use if the call is an emergency	Addressed immediately
Not Urgent	Use if the call is a routine request for services	Appointment within 10 business days
Urgent	Use if the call is an urgent request	Appointment within 72 hours

Inquiry Type	Description/Use Case
Requests for services/screening	Use when the reason for the call is a request for new services
Crisis	Use when the reason for the call is for crisis services
Information	Use when the reason for the call is for information
Discharge/Transition Coordination	Use when the reason for the call is for another provider to coordinate transition of care to/from your agency
Jail Diversion	Use when the reason for the call is related to Jail Diversion programs
Consultation	Use when the reason for the call is for an outside provider seeking a consultation
Other	Use when the reason for the call is not addressed by any of the above

Contact Type	Description/Use Case
Call	Use when the inquiry was complete via telephone
Face to Face	Use when the inquiry was completed via in-person, such as a walk-in
Form	Use when the inquiry was completed via form, such as a referral that was sent to the county
Teleconference	Use when the inquiry was complete via teleconference, such as Zoom, FaceTime, Webex, or other video-audio conferencing software

7. Select the “Link/Create Client” button. This will bring up the client search window, with a few extra buttons at the bottom.



- a. You must **search by name** by clicking on either “Broad Search” or “Narrow Search”.
- b. You must also **search by SSN and DOB** by clicking on those respective buttons.

 A screenshot of the 'Client Search' window. At the top is a 'Clear' button. Below it is the 'Name Search' section with checkboxes for 'Include Client Contacts' and 'Only Include Active Clients (Checking will not allow option to create new Client)'. There are buttons for 'Broad Search' (circled in red with 'a'), 'Narrow Search', and 'All Client Search'. Radio buttons for 'Type of Client' are set to 'Individual'. Input fields for 'Last Name' (Training), 'First Name' (Manual), and 'Program' are visible. The 'Other Search Strategies' section includes buttons for 'SSN Search' (circled in red with 'b'), 'DOB Search', 'Primary Clinician Search', 'Authorization ID / #', 'Phone # Search', 'Master Client ID Search', 'Client ID Search', and 'Insured ID Search'. Below this is a table titled 'Records Found' with columns: ID, Master ID, Client Name, Chosen Name, SSN/EIN, DOB, Status, City, and Primary Clinician. The table is currently empty, showing 'No data to display'. At the bottom right are buttons for 'Select', 'Cancel', and 'Create New Client Record'.

- c. If no records are found based on the search you do, an alert will show at the top of the window.

The screenshot shows the 'Client Search' window. At the top, there is a 'Clear' button and a red error message: 'No Search Records Found'. Below this, the 'Name Search' section has checkboxes for 'Include Client Contacts' and 'Only Include Active Clients'. There are buttons for 'Broad Search', 'Narrow Search', and 'All Client Search'. The 'Type of Client' is set to 'Individual'. Search fields include 'Last Name' (Training), 'First Name' (Manual), and 'Program'. The 'Other Search Strategies' section includes fields for SSN, DOB, Primary Clinician, Authorization ID, Phone #, Master Client ID, Client ID, and Insured ID. The 'Records Found' section shows a table with columns: ID, Master ID, Client Name, Chosen Name, SSN/EIN, DOB, Status, City, and Primary Clinician. The table is empty with the text 'No data to display'. At the bottom right, there are 'Select', 'Cancel', and 'Create New Client Record' buttons.

- d. Any search results will show in the “Records Found” area. **Review the Records Found** to determine if the person is already in the system as a client.
- e. If the person is already a client in the system, **select the button next to the appropriate record.**
- f. **Click “Select”** to link the Inquiry to the selected client.
- g. If the person is not a client, meaning no records were found matching the client’s information, **click “Create New Client Record.”**

**Client Search**

Clear

**Name Search**  Include Client Contacts  Only Include Active Clients (Checking will not allow option to create new Client)

**Broad Search** **Narrow Search** Type of Client  Individual  Organization **All Client Search**

Last Name Training First Name Manual Program

**Other Search Strategies**

**SSN Search** 999 99 9999 **Phone # Search**

**DOB Search** 06/07/2002 **Master Client ID Search**

**Primary Clinician Search** **Client ID Search**

**Authorization ID / #** **Insured ID Search**

**Records Found**

ID	Master ID	Client Name	Chosen Name	SSN/EIN	DOB	Status	City	Primary Clinician
<input checked="" type="radio"/> 1234	1234			9999	08/29/19...	Active		
<input type="radio"/> 1081	1081			9999	09/17/19...	Active		
<input type="radio"/> 1072	1072			9999	03/03/19...	Active		
<input type="radio"/> 1209	1209			9999	10/10/19...	Active	heavyton	
<input type="radio"/> 1096	1096			9999	08/01/19...	Active		Clinician, Robert
<input type="radio"/> 1007	1007			9999	05/27/19...	Active	Test	

Select Cancel

Create New Client Record

h. This will take you back to the Inquiry screen but now a client ID number will be added.

**Inquiry Details** Guide Menu Remove Client Link Link/Create Client Register Client Save

**Initial** Insurance Demographics

**Inquirer Information**  Crisis

Relation To Client Self First Name Manual Middle Name Last Name Training

Call Back (916) 555-7878 Ext Email

Start Date 01/06/2023 Start Time 5:16 PM Now

**Client Information (Potential)**

First Name Manual Middle Name Last Name Training Client ID 1239 Sex Male

SSN 999999999  SSN Unknown/Refused DOB 06/07/2002 Age (20 Years) Medi-Cal ID

Home Phone (916) 555-7878 Cell Email

Client is not homeless  Client is homeless  Client is chronically homeless

Urgency Level Not urgent

Address1 Inquiry type Request for services/screening

Address2 Contact type Call

City Priority Population

State Zip County of Residence Search here

Presenting Problem

Client Can Legally Sign  Yes  No

Current Client Information (If any)

Client Id: 1239  
Last Inquiry Date:  
Coverage History  
No Coverage History

8. Click on the "Insurance" tab.

a. Select "Medi-Cal" from the "Payer" drop-down and enter the client's Medi-Cal number (CIN) in the "Insurance ID" field. Click "Verify" to verify the client's Medi-Cal insurance.

**Inquiry Details** Remove Client Link Link/Create Client Register Client Save X

Initial **Insurance** Demographics

**Electronic Eligibility Verification**

Payer [v] Insurance Id [ ] Verify...

**Coverage Information**  Show Current Plans Only

Plan	Insured ID	Group ID	Comment
Coverage Information			

Add

9. Click on the “Demographics” tab.

- a. We recommend **completing the “Gender Identity” and “Pronoun” fields** to ensure the person is not misgendered as additional staff engage with the client.

**Inquiry Details** Remove Client Link Link/Create Client Register Client Save X

Initial Insurance **Demographics**

**General Information**

Primary Care Coordinator [v] Medical Provider [v] Professional Suffix [ ]  Active

Prefix [v] Suffix [v]

**Identifying Information**

Marital Status [v] Gender Identity [v] Sexual Orientation [v]

Deceased On [v] Cause of Death [v] Pronoun [v]

**Ethnicity**

- Amerasian
- American Native
- Asian Indian
- Black
- Cambodian

**Race**

- Alaskan Native
- American Indian
- American Indian and Alaskan Native
- Asian
- Asian Indian

**Client declined to provide**

- Date of Birth
- Ethnicity
- Gender Identity
- Hispanic Origin
- Primary/Preferred Language

- b. **Complete the “Primary/Preferred Language” field.** If the client does not speak English or requires an interpreter, make sure to check the appropriate checkbox.



**Inquiry Details** Remove Client Link Link/Create Client Register Client Settings Info AB Trash Print Save

**Initial** **Insurance** **Demographics**

Employment Information

---

**Language**

Primary/Preferred Language   Client does not speak English  Hispanic Origin

Interpreter Services Needed

---

**Transportation Information**

Transportation Service

Note any special needs accommodations (e.g. wheelchair, service animal, high rise)

---

**Preferences**

Communication Preference  Mobile Phone Provider

Days  M  T  W  Th  F

Geographic Location

Comment

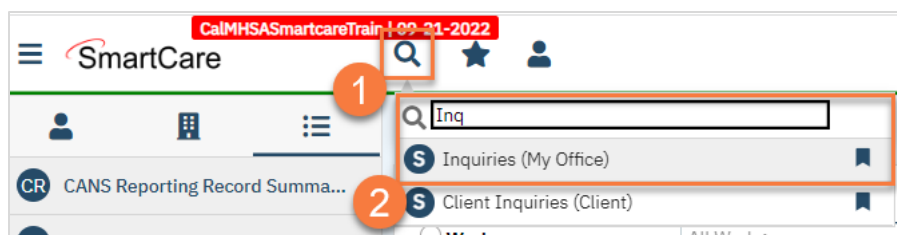
?

10. You may enter any additional information in any of the tabs, but none are required. Once complete, **enter the end date and time of the Inquiry**. Once again, there are “T” (today) and “Now” buttons to make this easier. **Leave the status as “In Progress”**.
11. **Click Save**. You may now close the Inquiry. Your Access Team will likely have procedures to monitor the Inquiries list page to address any that are in progress. If your county does not have these procedures, we recommend that you notify the appropriate person per your county’s procedures.

## How can I view requests for services that are pending?

Viewing all inquiries, both completed and pending, is done in the Inquiries list page.

1. Search for the Inquiry screen using the search icon.
2. Select "Inquiries (My Office)"



3. This will bring you to the Inquiries list page. **Use the filters as necessary**, such as filtering the status to show only "In Progress". The "Recorded By" column indicates who created the inquiry. The
4. To see the details of an inquiry, **click on the link in the "Start Date/Time"** column.

SmartCare CalMHASmartcareTrain | 09-21-2022

Inquiries (162)

Recorded By All Assigned To All Dispositions All Status All Inquiry Type Apply Filter

All Programs All Locations All Urgency Level All Contact Type All Priority Population

From 01/01/1900 To 12/31/9999 Last Name First Name Phone

Client (Potential)	Client Id	Inquirer	Start Date/Time	Recorded By	Assigned To	Disposition	Inquiry Status
...	1223	...	1/4/2023 10:30 AM	...	...	...	In Progress
...	1220	...	1/3/2023 10:13 AM	Charla	...	...	In Progress
...	1217	...	1/1/2023 10:53 AM	Clinician, Robert	...	...	In Progress
...	1216	...	12/30/2022 2:06 PM	Williams, LaQuita	...	...	In Progress
...	1215	...	12/30/2022 8:56 AM	Williams, LaQuita	...	...	In Progress
...	1214	...	12/29/2022 3:21 PM	Staff, Access	...	...	In Progress
...	1214	...	12/29/2022 2:58 PM	Clinician, Robert	...	...	Complete
...	1213	...	12/29/2022 12:04 PM	Fitzgerald, John	...	...	In Progress
...	1209	...	12/29/2022 8:25 AM	Staff, Access	...	...	In Progress
...	1208	...	12/29/2022 8:17 AM	Rowe, Charla	...	...	In Progress
...	1207	...	12/28/2022 5:02 PM	Rowe, Charla	Clinician, Robert	...	In Progress
...	1204	...	12/28/2022 2:37 PM	Baize, Jacob	...	...	Complete
...	1206	...	12/28/2022 12:55 PM	Clinician, Robert	...	...	In Progress
...	1203	...	12/28/2022 8:44 AM	Williams, LaQuita	...	...	In Progress
...	1201	...	12/27/2022 4:10 PM	Clinician, Robert	...	...	In Progress
...	1200	...	12/27/2022 4:01 PM	Fitzgerald, John	...	...	In Progress
...	1196	...	12/27/2022 1:44 PM	Sullivan, Kevin	...	...	In Progress
...	1195	...	12/27/2022 1:27 PM	Sullivan, Kevin	...	...	In Progress
...	1194	...	12/27/2022 1:12 PM	Staff, Access	...	...	Complete
...	1192	...	12/26/2022 9:49 PM	Williams, LaQuita	...	...	In Progress
...	1190	...	12/23/2022 4:13 PM	Rowe, Charla	...	...	Complete

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- Once in the Inquiry Details screen, you can assign the inquiry to a staff member by navigating to the “Inquiry Handled By” section and use the “Assigned Staff” field. This field shows on the Inquiries list page, meaning staff can sort by inquiries that are assigned to them.

Inquiry Details Remove Client Link Link/Create Client Register Client

Initial Insurance Demographics

Inquiry Handled By

Recorded By Charla Rowe Information Gathered By Charla Rowe

Program Gathered By Other

Location Assigned To



# Life Cycle of the Client: Screening

Generally speaking, after a request for services is made, the client is screened to determine if they are appropriate for the types of services the county and its providers offer. There are three main screening tools used for this:

1. Adult Medi-Cal Mental Health Screening Tool – Created by DHCS, this tool is used to determine if an adult client (age 21+) is appropriate for Specialty Mental Health Services or if they'd be better served by one of the county's Managed Care Plans.
2. Youth Medi-Cal Mental Health Screening Tool – Created by DHCS, this tool is used to determine if a youth client (age 0-20) is appropriate for Specialty Mental Health Services or if they'd be better served by one of the county's Managed Care Plans.
3. BQuIP SUD Screening Tool – Commissioned by DHCS and created by UCLA, the Brief Questionnaire for Initial Placement, or BQuIP, is a screening tool that generates recommendations for initial placement for individual seeking treatment for substance use disorders.

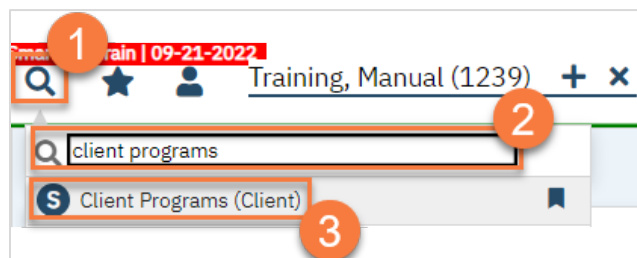
Note: There are times a screening can be skipped and a client moved directly to the assessment phase. This is often the case for programs that work directly with partner agencies to expedite the access process. For example, Child Welfare Services may request an assessment on a foster youth without requiring a screening first. Review your county's policies and procedures for more details.

Most often, the screening will be completed when the client calls the county's Access Line. Most Access Line staff are trained to do a screening, or the client can be immediately transferred to someone who is trained. In some cases, however, a screening may be assigned to a staff member to complete after the initial call. For example, if the client calls the a number other than the Access Line.

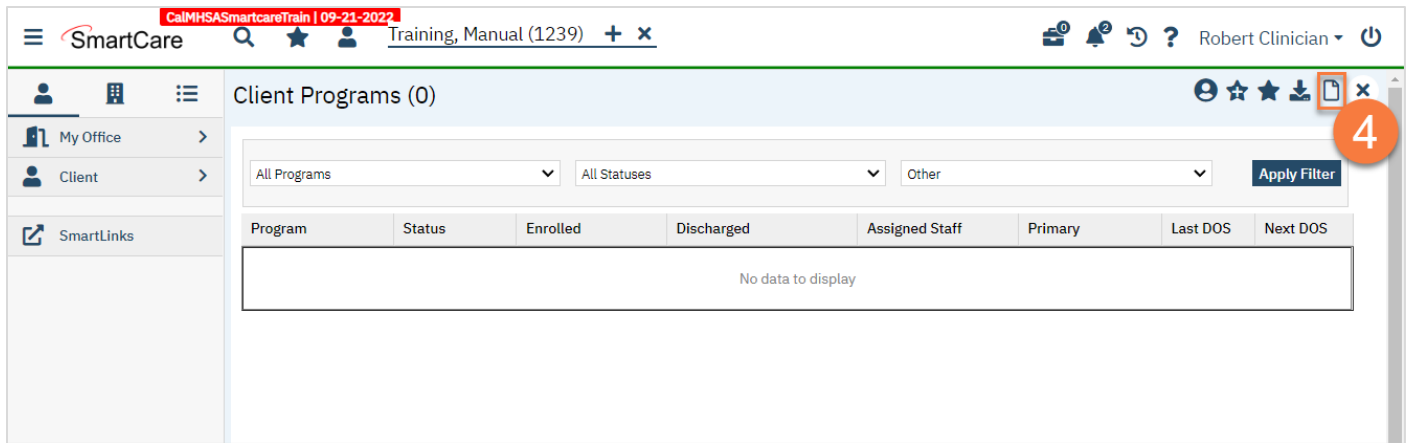
## Set up for Screening

Before doing a screening tool, you need to enroll the client in a program. We recommend using an Access program for this.

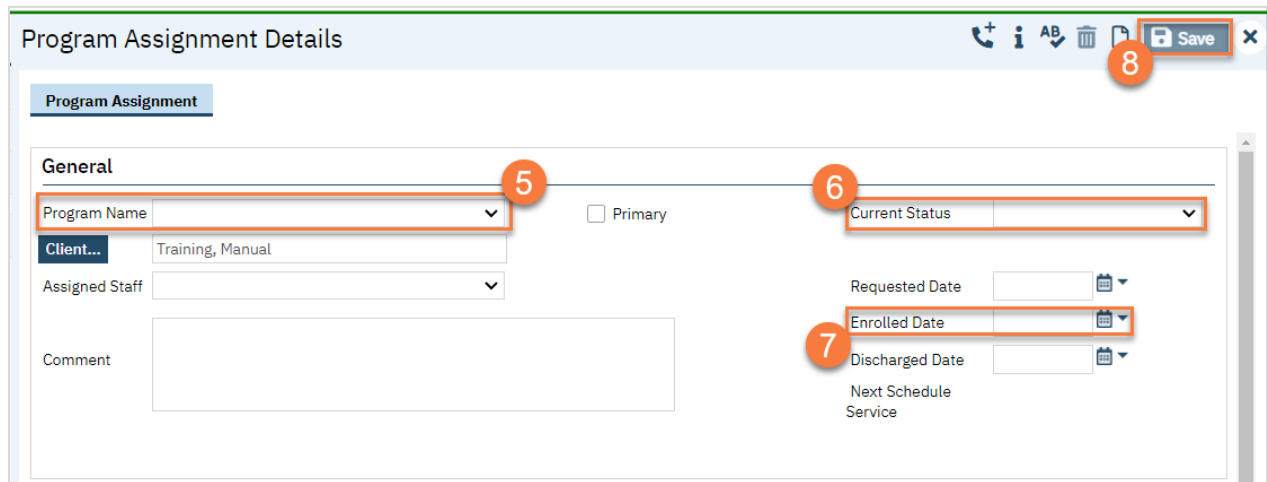
1. To document the referral in SmartCare, you must first have the client open, then **click the Search icon**.
2. **Type Client Programs** into the search bar.
3. **Click to select Client Programs (Client)**.



4. This takes you to the Client Programs list page. **Click on the "new" icon**.

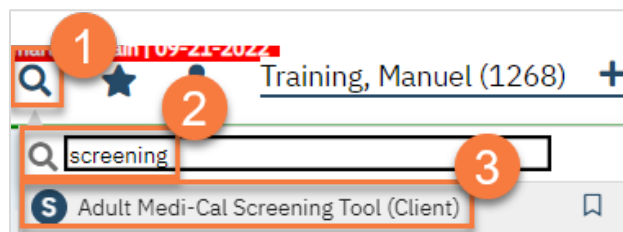


5. Select the program your county uses for screening services.
6. Change the Status to "Enrolled".
7. Enter the Enrolled Date.
8. Click Save.

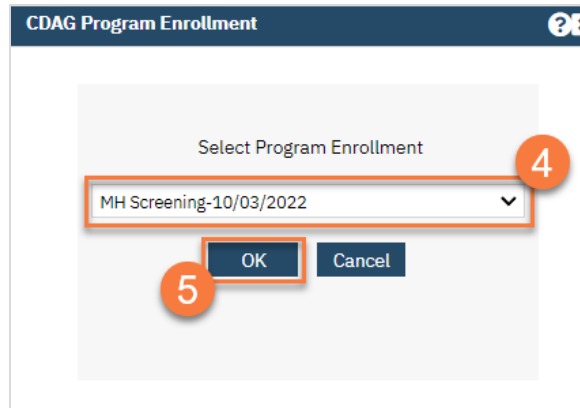


## How do I complete an Adult Medi-Cal Screening Tool?

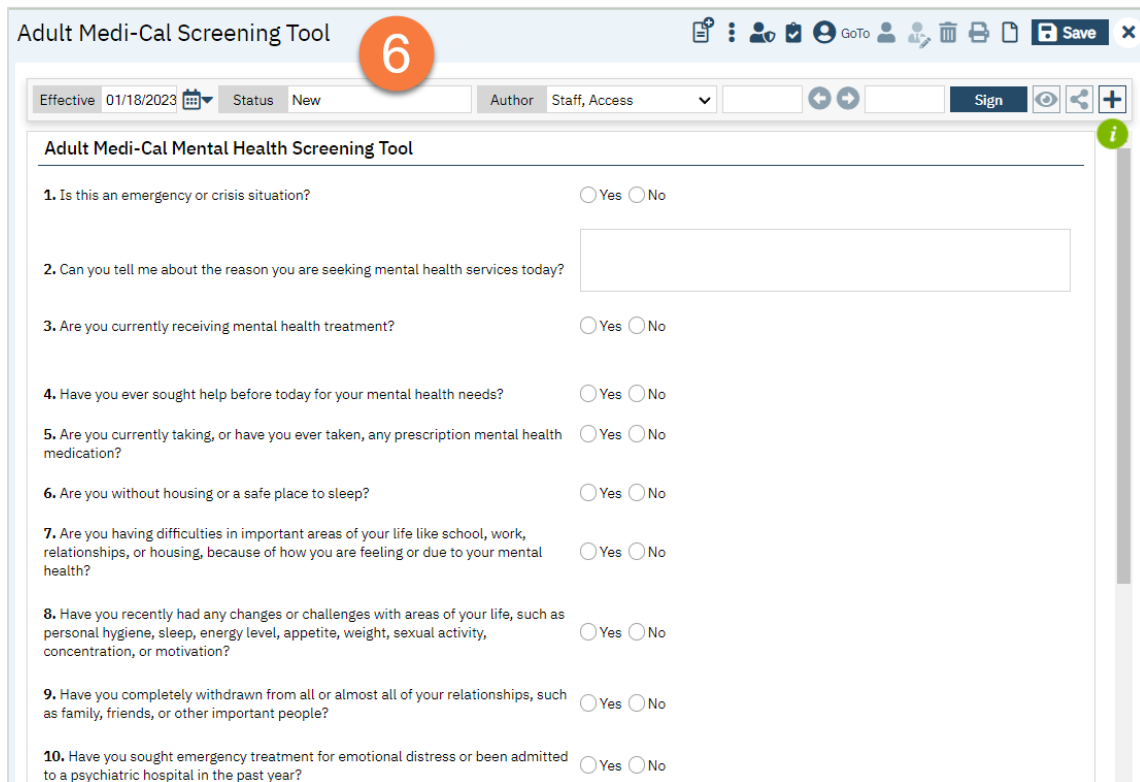
1. You must first have the client open, then **click the Search icon**.
2. **Type Adult Medi-Cal Screening Tool** into the search bar.
3. **Click to select Adult Medi-Cal Screening Tool (Client)**.



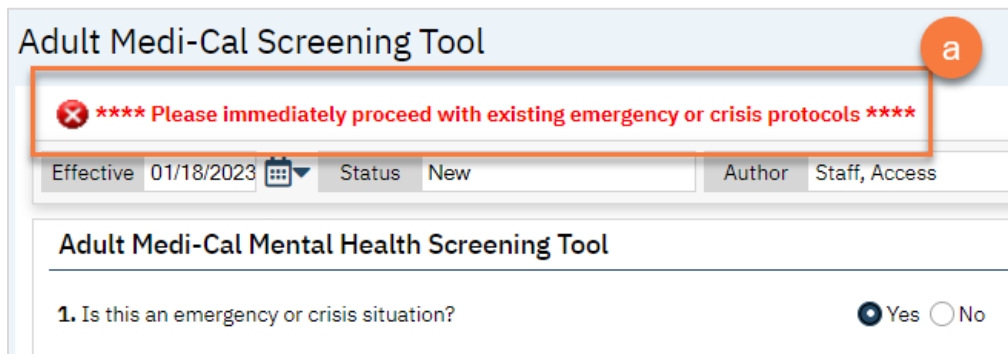
4. In the CDAG Program Enrollment window pop-up, **click the drop down** and **click to select** the appropriate program.
5. **Click OK** to continue.



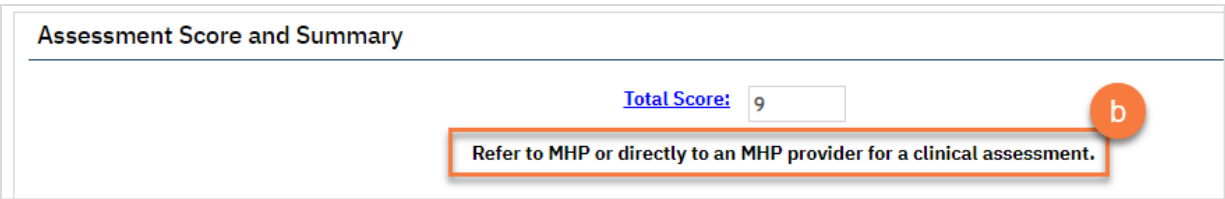
6. The Adult Medi-Cal Screening Tool document will open. **Complete the document.**



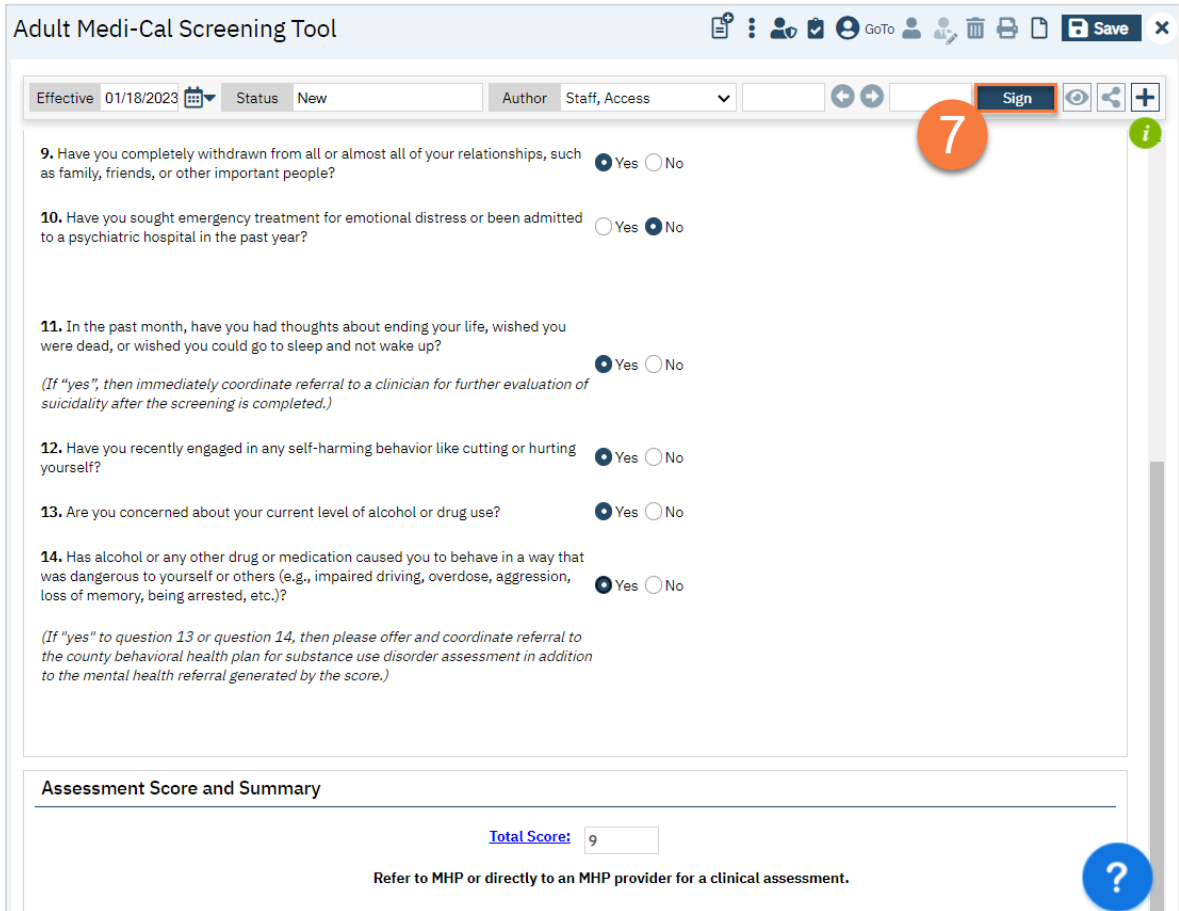
a. Any alerts will show at the top of the page.



b. Any recommendation will show at the bottom of the page.

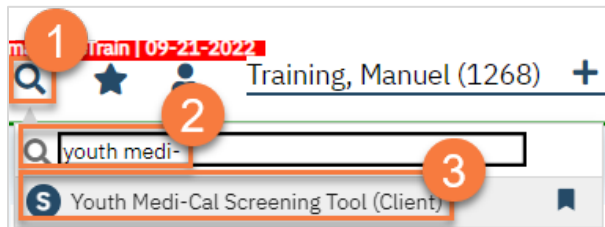


7. Click **Sign** to complete and generate the document.



## How do I complete a Youth Medi-Cal Screening Tool?

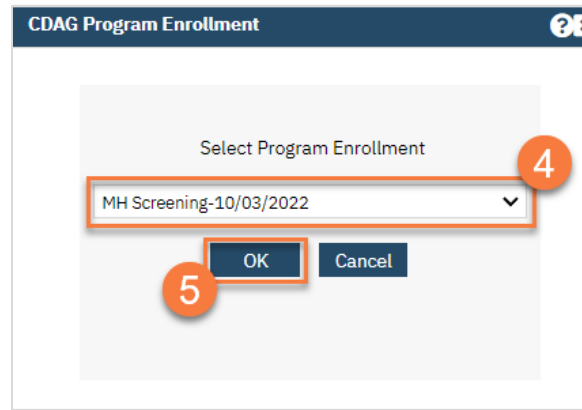
1. You must first have the client open, then **click the Search icon**.
2. **Type Youth Medi-Cal Screening Tool** into the search bar.
3. **Click to select Youth Medi-Cal Screening Tool (Client)**.



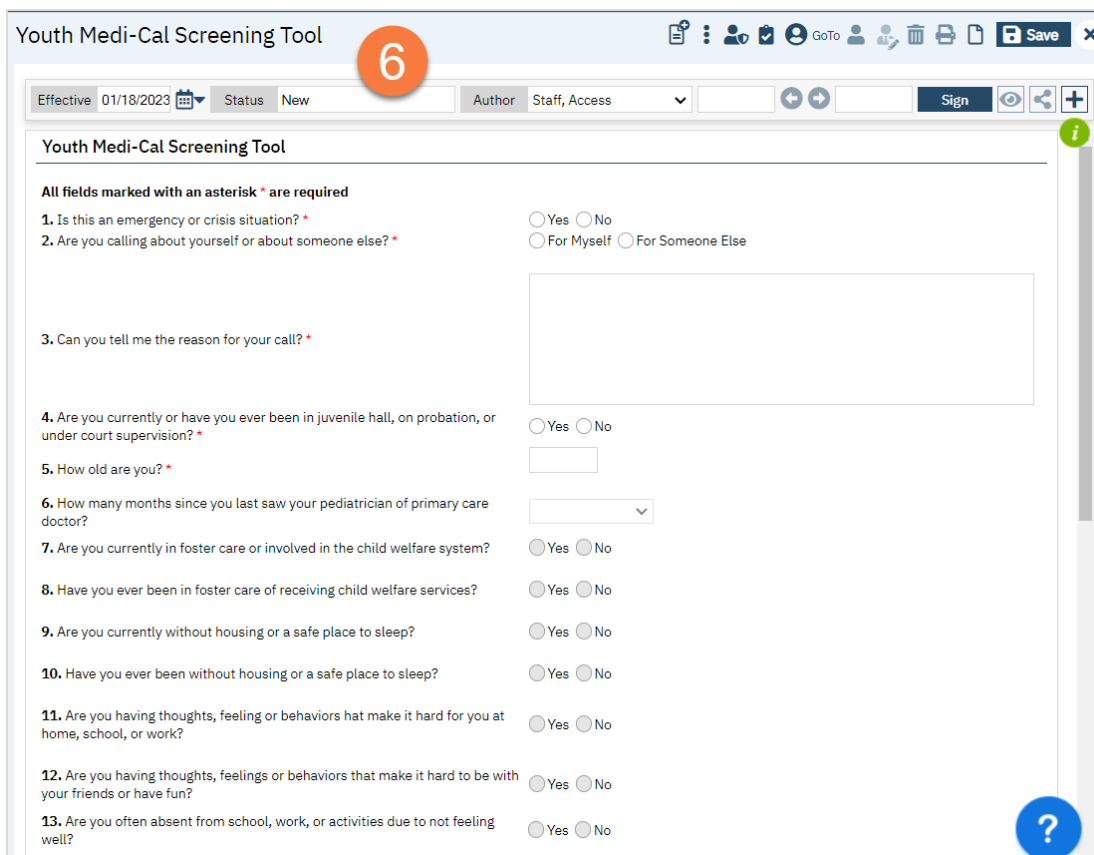
4. In the CDAG Program Enrollment window pop-up, **click the drop down** and **click to select** the appropriate program.



5. Click OK to continue.



6. The Youth Medi-Cal Screening Tool document will open. **Complete the document.** The wording of the questions varies slightly depending on if you're screening the youth directly or gathering information from a parent or guardian. The system will automatically alter the language to match the appropriate DHCS form.



- a. Any alerts will show at the top of the page

### Youth Medi-Cal Screening Tool

✖ \*\*\*\* Please immediately proceed with existing emergency or crisis protocols \*\*\*\*

Effective 01/18/2023 Status New Author Staff, Access

---

#### Youth Medi-Cal Screening Tool

**All fields marked with an asterisk \* are required**

1. Is this an emergency or crisis situation? \*  Yes  No

b. Any recommendations will show at the bottom of the page.

#### Assessment Score and Summary

Total Score:

**Refer to MHP**  
**Connect to MCP for a pediatrician visit**  
**Immediately refer to a clinician for evaluation on homicidality and/or suicidality after assessment**  
**Refer to county behavioral health plan for SUD assessment**

7. Click **Sign** to complete and generate the document.

### Youth Medi-Cal Screening Tool

Save

Effective 01/18/2023 Status New Author Staff, Access Sign

14. Is a person who takes care of you often not around or unable to take care of you?  Yes  No

15. Do you feel unsupported or unsafe?  Yes  No

16. Is anyone hurting you?  Yes  No

17. Are you having trouble with drugs or alcohol?  Yes  No

18. Is anyone in your family who lives with you having trouble with drugs or alcohol?  Yes  No

19. Do you hurt yourself on purpose?  Yes  No

20. In the past month, have you had thoughts about ending your life, wished you were dead, or wished you could go to sleep and never wake up?  Yes  No

21. Do you have plans to hurt others?  Yes  No

22. Has someone outside of your family told you that you need help with anxiety, depression, or your behaviors?  Yes  No

23. Have you been seen in the hospital to get help for a mental health condition within the last six months?  Yes  No

---

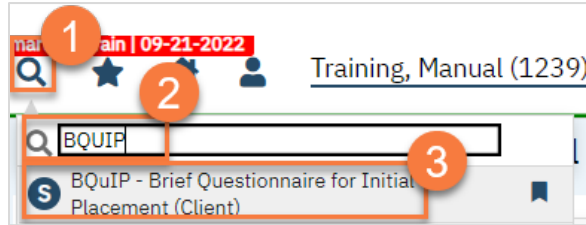
#### Assessment Score and Summary

Total Score:

**Refer to MHP**  
**Connect to MCP for a pediatrician visit**  
**Immediately refer to a clinician for evaluation on homicidality and/or suicidality after assessment**  
**Refer to county behavioral health plan for SUD assessment**

## How do I complete a BQuIP SUD Screening Tool?

1. You must first have the client open, then click the Search icon.
2. Type BQuIP into the search bar.
3. Click to select BQuIP – Brief Questionnaire for Initial Placement (Client).



4. The BQuIP document will open. **Complete the document.** Not all questions are visible, as only the next question will show. This allows you easier access to the Clinical Comments field for taking notes as you're working through the screening. As you answer questions, you may be alerted to stop the screening and follow crisis protocols, based on the client's answers.

A screenshot of the BQuIP document interface. The title bar reads 'BQuIP - Brief Questionnaire for Initial Placement' with a large orange circle labeled '4' next to it. Below the title bar, there are fields for 'Effective' (01/14/2022), 'Status' (New), and 'Author' (Rowe, Charla). The main content area contains the following text:

**1.) Which of the following drugs or alcohol have you used in the last 12 months?**  
(Read list and select all that apply)

Alcohol

Opiates/opioids (e.g., heroin, prescription narcotics)

Stimulants (e.g., cocaine, amphetamines)

Cannabis (e.g., marijuana, Tetrahydrocannabinol [THC])

Benzodiazepines (e.g., sedatives, tranquilizers)

Other drug(s)

None

Skip this question

Click here if you stopped the BQuIP early, but **NOT FOR IMMEDIATE INTERVENTION.** (No recommendation will be generated)

**Record clinical notes here:**

[Empty text box for clinical notes]

- a. Alerts will be highlighted and give you directions as you answer questions.

3.) Are you currently experiencing SEVERE WITHDRAWAL symptoms?  
 (e.g., tremors/shaking, recent seizures, hallucinations, vomiting, diarrhea, racing heartbeat or other significant physical symptoms)

Yes  No

**ALERT: HIGH POTENTIAL FOR CLINICALLY RISKY WITHDRAWAL. CONSIDER NEED FOR IMMEDIATE INTERVENTION.**  
 (e.g., provide immediate medical consult or referral to emergency room/911 or onsite withdrawal management if appropriate/available)

Check this box and click "Sign" if you are ending this assessment early for immediate intervention.

-OR-

Press this button to indicate that immediate intervention is not needed, and to display the next question

5. Once complete, click Sign to complete and generate the document.

BQuIP - Brief Questionnaire for Initial Placement

Effective 01/14/2022 Status New Author Rowe, Charla

16.) Of the drugs we have talked about, have you injected any in the last year?

Yes  No

Check this box to indicate that emergency services were engaged for Recovery Environment.

Interview complete- Please click "Sign" or "Save" in the top right.

Click here if you stopped the BQuIP early, but NOT FOR IMMEDIATE INTERVENTION. (No recommendation will be generated)

Record clinical notes here:

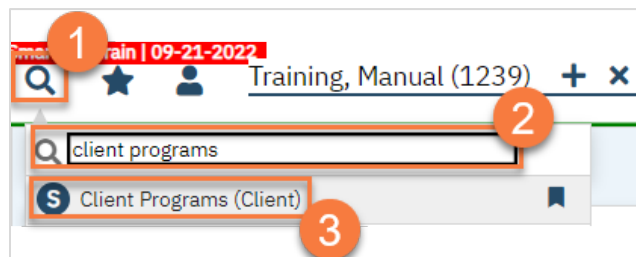
Comments and notes here

## What do I do if the screening indicates that the client should be referred to the County's (MHP) system of care?

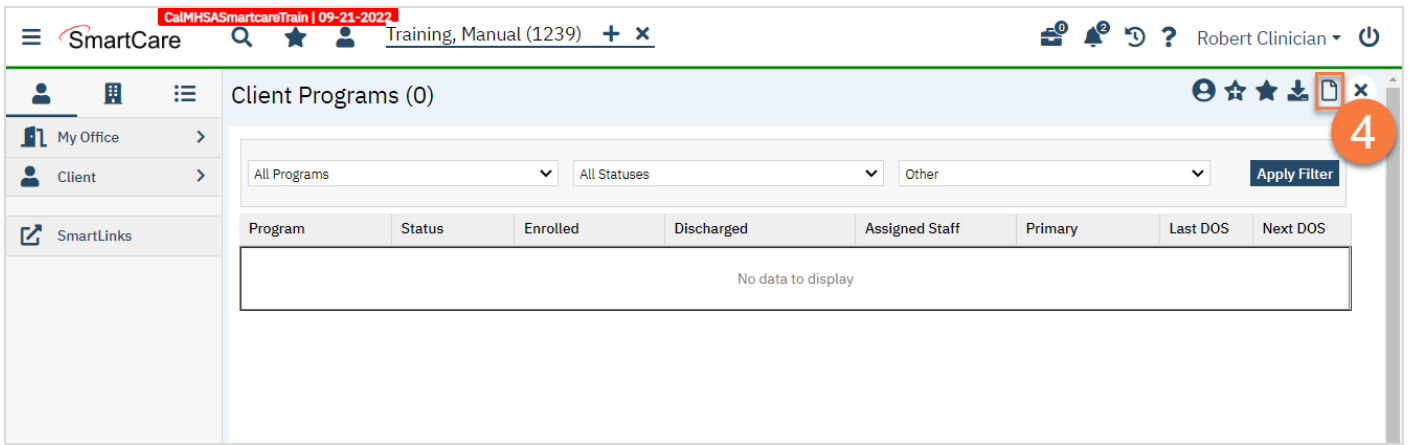
Since the MHP's system of care includes county owned and operated programs as well as contracted providers, you'll have to first determine if the provider you'll be referring to uses the county's instance of SmartCare or not.

### How to refer to a county or contractor program that uses SmartCare:

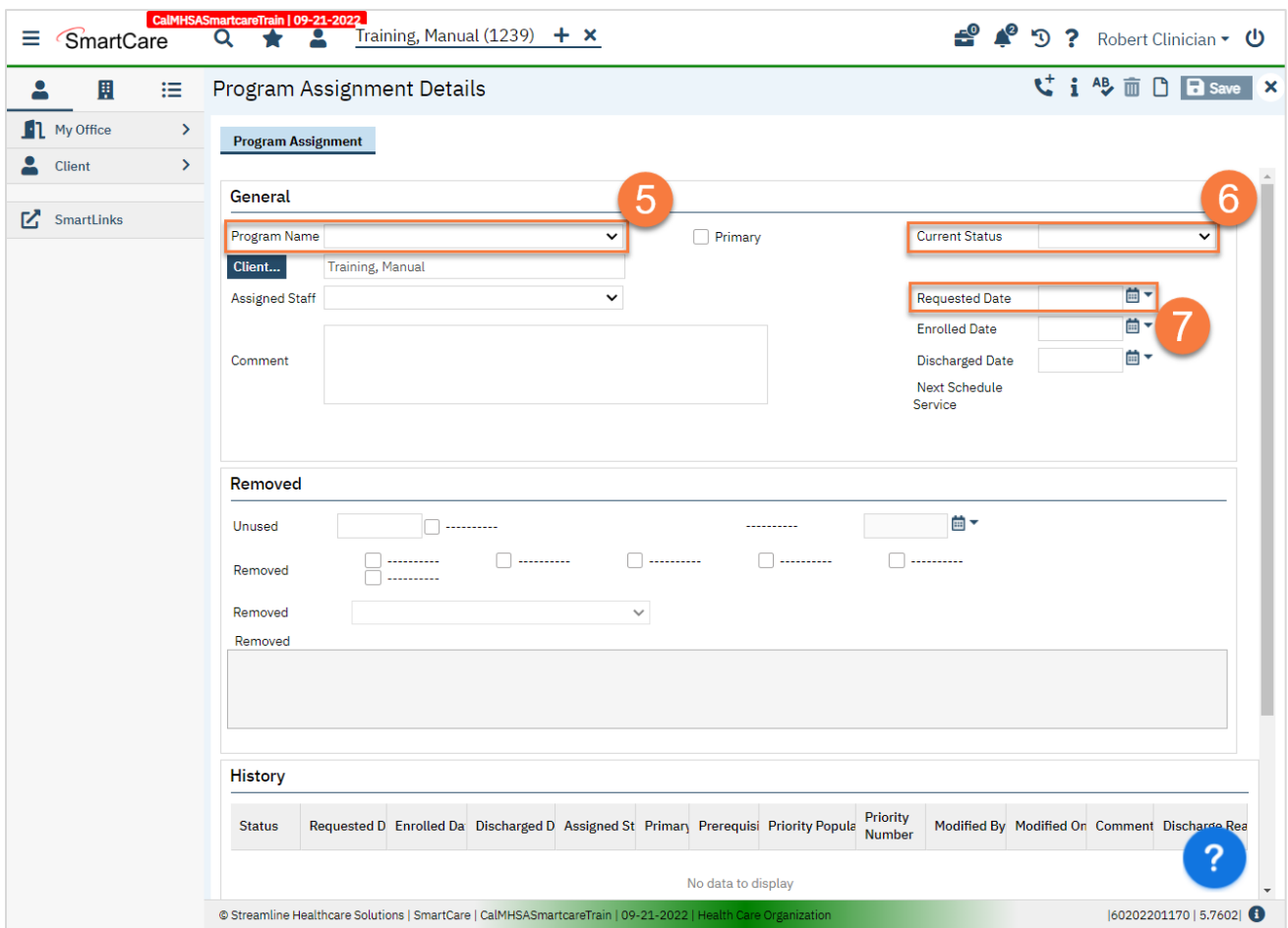
1. To document the referral in SmartCare, you must first have the client open, then click the Search icon.
2. Type Client Programs into the search bar.
3. Click to select Client Programs (Client).



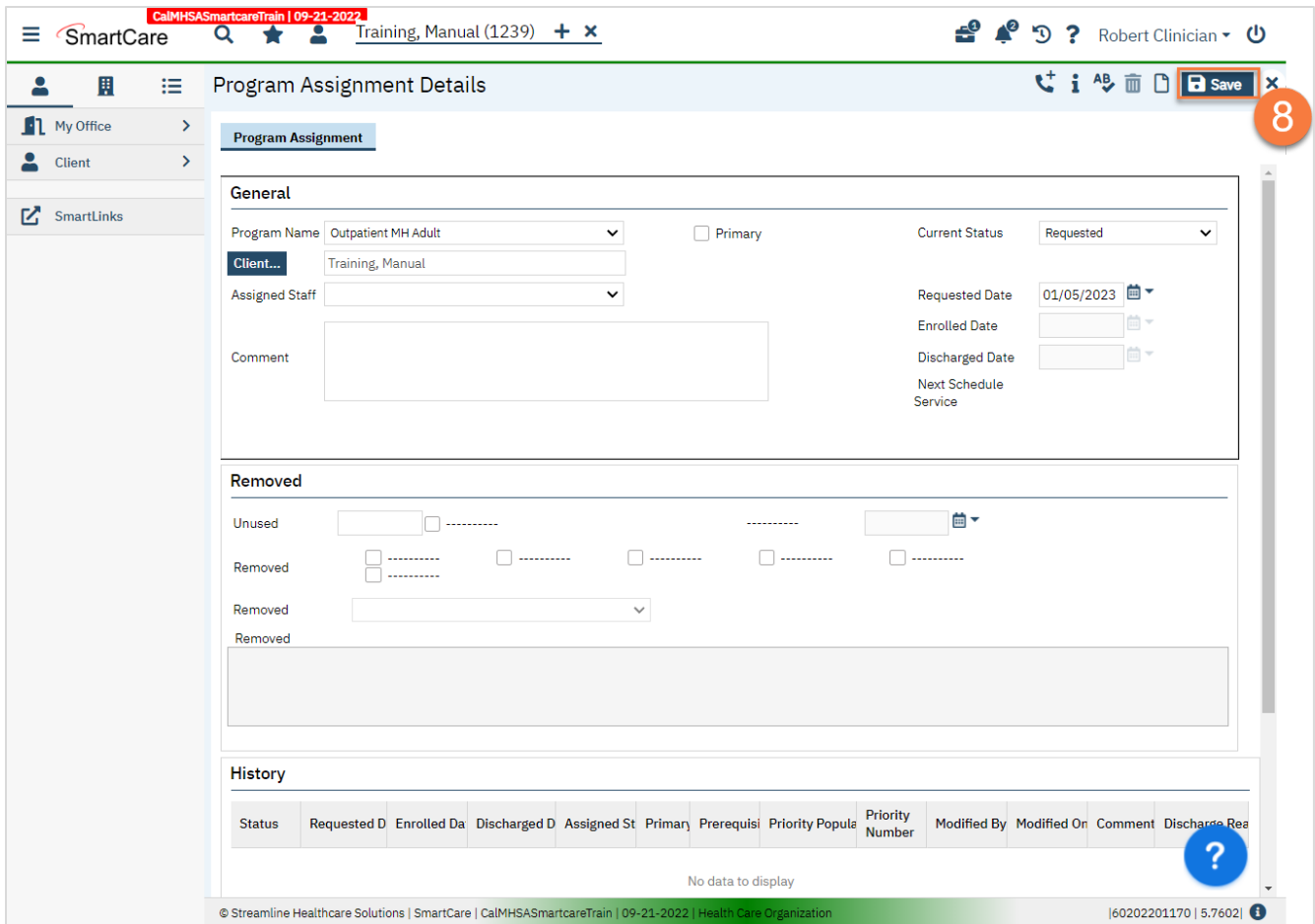
4. This takes you to the Client Programs list page. Click on the "new" icon.



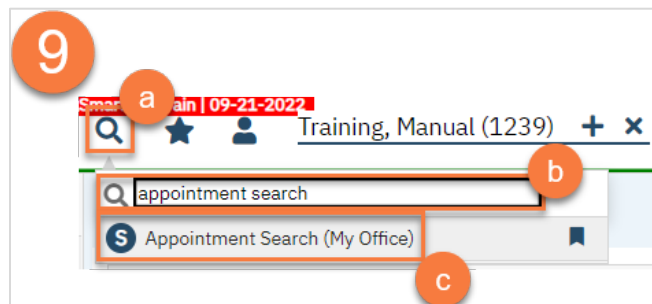
5. Select the program you're referring to.
6. Change the Status to "Requested".
7. Enter the Requested Date.



8. Click Save.



9. If this program allows you to schedule intake assessments on their behalf, open the Appointment Search screen. If this program does not allow you to schedule intake assessments on their behalf, you're finished and may close.
  - a. Click the Search icon.
  - b. Type Appointment Search into the search bar.
  - c. Click to select Appointment Search.



- d. Use the filters to limit the search to intake appointments for that program and any other requests the client has, such as client's availability. Then click Search.

### Appointment Search

☆ ☆ ⬇ ? ✕

Plan  Service Area  Programs

Location  Staff  License  License Group

Sex  Speciality  Category  Allow Overbooking Up to  Appointment(s)

Minutes  From  To   Any Weekday  M  T  W  T  F  S  S

Only show time slots marked as Free Appt. Type  Start Date

Ignore Age Range Preference Search for Client

Staff Name	Date/Time	Duration	Type	Location Name
No Appointment(s) Available				

- e. This will bring up a list of available appointments. **If the client declines the first few available appointment dates, click on the “Client Refuses Appointment” icon.** This will be used for tracking timeliness. Note: you only need to decline 1 appointment per day. In the below example, there are 3 available appointments on 1/9/23 and 3 available appointments on 1/10/23. You would only need to decline one of these appointments on each date, so you would only decline 2 total appointments, not all 6.

### Appointment Search (26)

☆ ☆ ⬇ ? ✕

Plan  Service Area  Programs

















Location  Staff  License  License Group

Sex  Speciality  Category  Allow Overbooking Up to  Appointment(s)

Minutes  From  To   Any Weekday  M  T  W  T  F  S  S

Only show time slots marked as Free Appt. Type  Start Date

Ignore Age Range Preference Search for Client

Staff Name	Date/Time	Duration	Type	Location Name
 Stephan, Kristy	01/09/2023 8:00 AM	120 mins	Intake	
 Clinician, Robert	01/09/2023 8:00 AM	120 mins	Intake	
 Clinician, Robert	01/09/2023 1:00 PM	180 mins	Intake	
 Stephan, Kristy	01/10/2023 8:00 AM	120 mins	Intake	
 Clinician, Robert	01/10/2023 8:00 AM	150 mins	Intake	
 Clinician, Robert	01/10/2023 1:00 PM	180 mins	Intake	
 Stephan, Kristy	01/11/2023 8:00 AM	120 mins	Intake	
 Clinician, Robert	01/11/2023 8:00 AM	150 mins	Intake	
 Stephan, Kristy	01/12/2023 8:00 AM	120 mins	Intake	
 Clinician, Robert	01/12/2023 8:00 AM	150 mins	Intake	
 Stephan, Kristy	01/13/2023 8:00 AM	120 mins	Intake	
 Clinician, Robert	01/13/2023 8:00 AM	150 mins	Intake	
 Stephan, Kristy	01/16/2023 8:00 AM	120 mins	Intake	
 Clinician, Robert	01/16/2023 8:00 AM	150 mins	Intake	
 Stephan, Kristy	01/17/2023 8:00 AM	120 mins	Intake	
 Clinician, Robert	01/17/2023 8:00 AM	150 mins	Intake	

- f. Clicking on the “Client Refuses Appointment” icon will bring up a pop-up window. Enter the Refusal Reason and then click “OK”.



g. For the appointment that the client chooses, click on the “Schedule Appointment” icon.

	Staff Name	Date/Time	Δ	Duration	Type	Location Name
	Stephan, Khristy	01/09/2023 8:00 AM		120 mins	Intake	
	Clinician, Robert	01/09/2023 8:00 AM		120 mins	Intake	
	Clinician, Robert	01/09/2023 1:00 PM		180 mins	Intake	
	Stephan, Khristy	01/10/2023 8:00 AM		120 mins	Intake	
	Clinician, Robert	01/10/2023 8:00 AM		150 mins	Intake	
	Clinician, Robert	01/10/2023 1:00 PM		180 mins	Intake	
	Stephan, Khristy	01/11/2023 8:00 AM		120 mins	Intake	
	Clinician, Robert	01/11/2023 8:00 AM		150 mins	Intake	
	Stephan, Khristy	01/12/2023 8:00 AM		120 mins	Intake	
	Clinician, Robert	01/12/2023 8:00 AM		150 mins	Intake	
	Stephan, Khristy	01/13/2023 8:00 AM		120 mins	Intake	
	Clinician, Robert	01/13/2023 8:00 AM		150 mins	Intake	
	Stephan, Khristy	01/16/2023 8:00 AM		120 mins	Intake	
	Clinician, Robert	01/16/2023 8:00 AM		150 mins	Intake	
	Stephan, Khristy	01/17/2023 8:00 AM		120 mins	Intake	
	Clinician, Robert	01/17/2023 8:00 AM		150 mins	Intake	

- h. This takes you to the Service Detail screen. **Confirm/enter the appointment information.** You can also denote if the person needs transportation or interpretation services.
- i. Once complete, **click Save.** The appointment is now scheduled and you are finished.



**Service Detail**

Regenerate Charge [Refresh] [Print] [Export] [Star] [Star] [AB] [Trash] [Save] [Close]

Service Detail | Billing Diagnosis | Authorization(s) | Disposition

**Service**

Client... Training, Manua... Status Scheduled Start Date 01/16/2023 Program Outpatient MH Adult

Procedure Mental Health Assessment by Non-Physi Modifier... Start Time 10:30 AM Total Duration 90 Minutes

Clinician Name Clinician, Robert End Date 01/16/2023

Location Office Attending Referring

Client was present Other Person(s) Present Cancel Reason

Group... Charge \$234.90 Balance Rate ID 275

Billable  Do Not Complete

Mode Of Delivery Face-to-face

Travel Time Minutes Note [ATP] [Calendar] [Clock]

Face to Face Time Minutes

Documentation Time Minutes

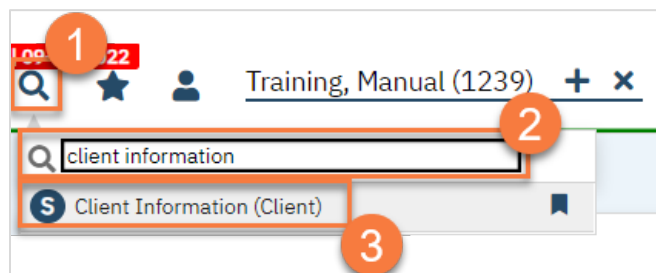
Override Charge Amount Overridden By

Evidence Based Practices  Override Errors Overridden By

Transportation Service No  Interpreter Services Needed

## How to refer to an agency or program that doesn't use SmartCare:

1. To document the referral in SmartCare, you must first have the client open, then click the Search icon.
2. Type Client Information into the search bar.
3. Click to select Client Information (Client).



4. Navigate to the "External Referral" tab.
5. Complete the information about the referral you're providing. Put yourself as the Referring Provider.
6. Click "Insert".

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### Client Information

General Aliases Demographics Financial Release of Information Log Contacts Family **External Referral** Interfaces

Custom Fields

Referral Information Referral Follow-Up

**Referral Information** Open PC Providers

Referral Date  Type of Provider  Provider Name

Referring Provider  Provider Information (address, phone number, fax number, etc.)

**Referral Reason**

Reason for Referral 1  Reason for Referral 2

Reason for Referral 3

Comments

**6** Insert Clear

**List of Referrals**

Referral Date	Type of Provider	Provider Name	Referral Status
No data to display			

?

7. Your referral should now show in the List of Referrals section. **Click Save.**

**Client Information** [Save] [7]

General Aliases Demographics Financial Release of Information Log Contacts Family **External Referral** Custom Fields

**Referral Information** Referral Follow-Up

Referral Date [ ] Type of Provider [ ] Provider Name [ ]

Referring Provider [ ] Provider Information (address, phone number, fax number, etc.) [ ]

**Referral Reason**

Reason for Referral 1 [ ] Reason for Referral 2 [ ]

Reason for Referral 3 [ ]

Comments [ ]

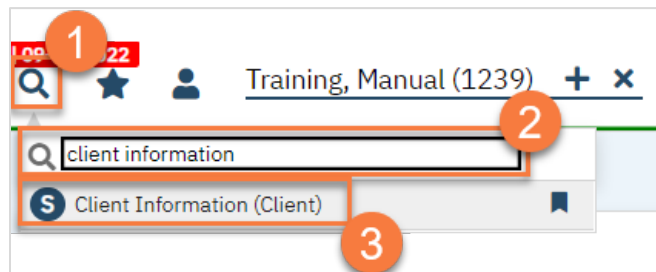
[Insert] [Clear]

**List of Referrals**

Referral Date	Type of Provider	Provider Name	Referral Status
01/06/2023	Substance Use Services Provider	Happy County Recovery	

## How do I document follow-up done on an external referral?

1. To document follow-up on a referral in SmartCare, you must first have the client open, then **click the Search icon**.
2. **Type Client Information** into the search bar.
3. Click to select **Client Information (Client)**.



4. Navigate to the **“External Referral”** tab.
5. Click on the **Referral Follow-Up** tab.
6. Select the referral you want to follow up on from the **List of Referrals**.

Client Information

General Aliases Demographics Financial Release of Information Log Contacts Family **External Referral** Interfaces

Custom Fields

Referral Information **Referral Follow-Up**

**Appointment Information**

Appointment Date  Appointment Time

Comment

**Follow Up Information**

Did patient make appointment  Yes  No If No Select Reason why

Received All Information on Visit?  Additional Follow up needed?  Yes  No

Comments Referral Status

Modify Clear

**List of Referrals**

	Referral Date	Type of Provider	Provider Name	Referral Status
X	01/16/2023	Managed Care Plan	Covered California	

7. If there's any information already added to this referral, it brings up the information in the top part of the screen. From here, **enter your follow up information**.
8. **Click Modify** to save your changes.
9. If you selected the wrong referral, click clear.
10. Once the client has successfully completed the referral process, enter "Complete" in the Referral Status.
11. Once you've finished entering any follow ups, **click Save**.

Client Information

General Aliases Demographics Financial Release of Information Log Contacts Family **External Referral** Interfaces

Custom Fields

Referral Information **Referral Follow-Up**

**Appointment Information**

Appointment Date  Appointment Time

Comment

MCP reports client has not made an appointment or any contact. Called and left the client a message on 1/20/23.

**Follow Up Information**

Did patient make appointment  Yes  No If No Select Reason why

Received All Information on Visit?  Additional Follow up needed?  Yes  No

Comments Referral Status

Modify Clear

**List of Referrals**

	Referral Date	Type of Provider	Provider Name	Referral Status
X	01/16/2023	Managed Care Plan	Covered California	

**Client Information**

General Aliases Demographics Financial Release of Information Log Contacts Family **External Referral** Interfaces

Custom Fields

Referral Information **Referral Follow-Up**

**Appointment Information**

Appointment Date  Appointment Time

Comment  
MCP reports client has not made an appointment or any contact. Called and left the client a message on 1/20/23.

**Follow Up Information**

Did patient make appointment  Yes  No If No Select Reason why

Received All Information on Visit?  Additional Follow up needed?  Yes  No

Comments

Referral Status

**List of Referrals**

	Referral Date	Type of Provider	Provider Name	Referral Status
X	01/16/2023	Managed Care Plan	Covered California	

## What do I do if the screening indicates that the client should be referred to the Managed Care Plan (MCP)?

If the screening indicates that you need to refer the client to the MCP, follow your county's current procedures for referring to the MCP.

1. To document the referral in SmartCare, you must first have the client open, then **click the Search icon**.
2. **Type Client Information** into the search bar.
3. **Click to select Client Information (Client)**.

1. Search icon

2. Search input: client information

3. Selected result: Client Information (Client)

4. **Navigate to the "External Referral" tab.**
5. **Complete the information about the referral** you're providing. For a referral to the Managed Care Plan, select Managed Care Plan from the Provider Type dropdown. Put yourself as the Referring Provider.
6. **Click "Insert"**.

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### Client Information

General Aliases Demographics Financial Release of Information Log Contacts Family **External Referral** Interfaces

Custom Fields

Referral Information Referral Follow-Up

**Referral Information** Open PC Providers

Referral Date  Type of Provider  Provider Name

Referring Provider  Provider Information (address, phone number, fax number, etc.)

**Referral Reason**

Reason for Referral 1  Reason for Referral 2

Reason for Referral 3

Comments

Insert Clear

**List of Referrals**

Referral Date	Type of Provider	Provider Name	Referral Status
No data to display			

?

7. Your referral should now show in the List of Referrals section. **Click Save.**

**Client Information** [Save]

General Aliases Demographics Financial Release of Information Log Contacts Family **External Referral** Custom Fields

Referral Information Referral Follow-Up

Referral Information Open PC Providers

Referral Date [ ] Type of Provider [ ] Provider Name [ ]

Referring Provider [ ] Provider Information (address, phone number, fax number, etc.) [ ]

Referral Reason

Reason for Referral 1 [ ] Reason for Referral 2 [ ]

Reason for Referral 3 [ ]

Comments [ ]

[Insert] [Clear]

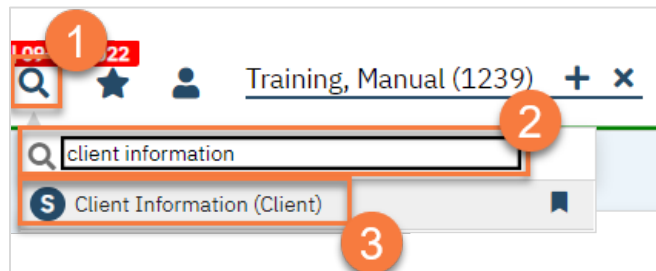
**List of Referrals**

Referral Date	Type of Provider	Provider Name	Referral Status
01/06/2023	Managed Care Plan	Covered California	

## What do I do if the screening indicates that the client should be referred to additional services, such a Primary Care Physician?

If the screening indicates you need to refer to additional services with providers that do not use your county’s instance of SmartCare, follow your county’s procedures for sending these referrals.

8. To document the referral in SmartCare, you must first have the client open, then **click the Search icon**.
9. **Type Client Information** into the search bar.
10. **Click to select Client Information (Client)**.



11. **Navigate to the “External Referral” tab**.
12. **Complete the information about the referral you’re providing**. Put yourself as the Referring Provider.
13. **Click “Insert”**.

SmartcareTrain | 09-21-2022

Training, Manual (1239) + x

Robert Clinician

### Client Information

General Aliases Demographics Financial Release of Information Log Contacts Family **External Referral** Interfaces

Custom Fields

Referral Information Referral Follow-Up

**Referral Information** Open PC Providers

Referral Date  Type of Provider  Provider Name

Referring Provider  Provider Information (address, phone number, fax number, etc.)

**Referral Reason**

Reason for Referral 1  Reason for Referral 2

Reason for Referral 3

Comments

Insert Clear

**List of Referrals**

Referral Date	Type of Provider	Provider Name	Referral Status
No data to display			

?

14. Your referral should now show in the List of Referrals section. **Click Save.**



Client Information Save

General Aliases Demographics Financial Release of Information Log Contacts Family External Referral Custom Fields

Referral Information Referral Follow-Up

**Referral Information** Open PC Providers

Referral Date  Type of Provider  Provider Name

Referring Provider  Provider Information (address, phone number, fax number, etc.)

**Referral Reason**

Reason for Referral 1  Reason for Referral 2

Reason for Referral 3

Comments

Insert Clear

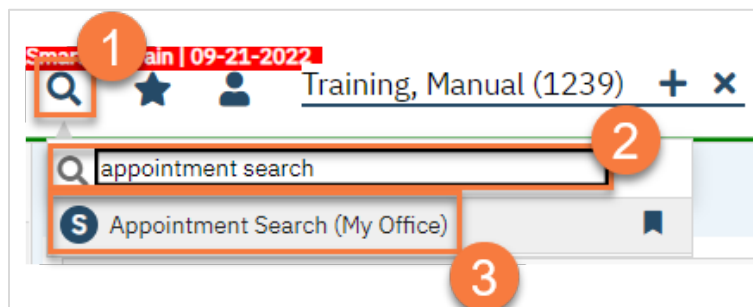
**List of Referrals**

	Referral Date	Type of Provider	Provider Name	Referral Status
<input checked="" type="checkbox"/>	01/06/2023	Primary Care Physician	Who, Doctor	

## Supervisor/Front Desk: What do I do when there's a program enrollment request for a program that manages its own scheduling?

Some programs in your county may not allow other staff to schedule intake appointments, instead keeping this task solely within this program. When someone requests enrollment in this type of program, you will be expected to schedule the initial intake appointment.

1. You must first have the client open, then **click the Search icon**.
2. **Type Appointment Search** into the search bar.
3. **Click to select Appointment Search**.



- Use the filters to limit the search to intake appointments for that program and any other requests the client has, such as client's availability. Then click Search.

Appointment Search

Plan Any Service Area Any Programs Outpatient MH Adult

Location Any Staff Any License Any License Group Any

Sex Any Speciality Any Category Any Allow Overbooking Up to Appointment(s)

Minutes 90 From 8:00 AM To 8:00 PM Any Weekday M T W T F S S

Only show time slots marked as Free Appt. Type Intake Start Date 01/09/2023 Search

Ignore Age Range Preference Search for Client Training, Manual Unable to Offer a Timely

Staff Name	Date/Time	Duration	Type	Location Name
No Appointment(s) Available				

- This will bring up a list of available appointments. If the client declines the first few available appointment dates, click on the "Client Refuses Appointment" icon. This will be used for tracking timeliness. Note: you only need to decline 1 appointment per day. In the below example, there are 3 available appointments on 1/9/23 and 3 available appointments on 1/10/23. You would only need to decline one of these appointments on each date, so you would only decline 2 total appointments, not all 6.

Appointment Search (26)

Plan Any Service Area Any Programs Outpatient MH Adult

Location Any Staff Any License Any License Group Any

Sex Any Speciality Any Category Any Allow Overbooking Up to Appointment(s)

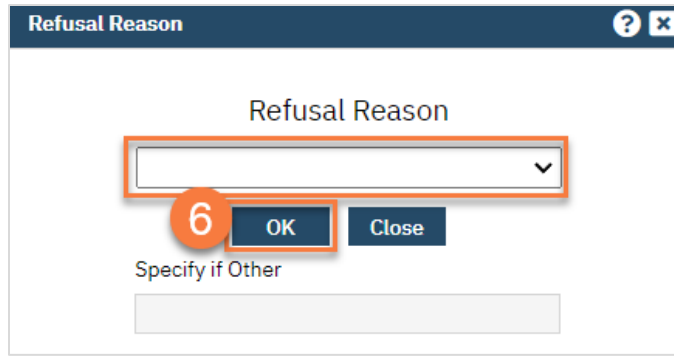
Minutes 90 From 8:00 AM To 8:00 PM Any Weekday M T W T F S S

Only show time slots marked as Free Appt. Type Intake Start Date 01/24/2023 Search

Ignore Age Range Preference Search for Client Training, Manual Unable to Offer a Timely Appt.

	Staff Name	Date/Time	Duration	Type	Location Name
	Stephan, Khristy	01/09/2023 8:00 AM	120 mins	Intake	
	Clinician, Robert	01/09/2023 8:00 AM	120 mins	Intake	
	Clinician, Robert	01/09/2023 1:00 PM	180 mins	Intake	
	Stephan, Khristy	01/10/2023 8:00 AM	120 mins	Intake	
	Clinician, Robert	01/10/2023 8:00 AM	150 mins	Intake	
	Clinician, Robert	01/10/2023 1:00 PM	180 mins	Intake	
	Stephan, Khristy	01/11/2023 8:00 AM	120 mins	Intake	
	Clinician, Robert	01/11/2023 8:00 AM	150 mins	Intake	
	Stephan, Khristy	01/12/2023 8:00 AM	120 mins	Intake	
	Clinician, Robert	01/12/2023 8:00 AM	150 mins	Intake	
	Stephan, Khristy	01/13/2023 8:00 AM	120 mins	Intake	
	Clinician, Robert	01/13/2023 8:00 AM	150 mins	Intake	
	Stephan, Khristy	01/16/2023 8:00 AM	120 mins	Intake	
	Clinician, Robert	01/16/2023 8:00 AM	150 mins	Intake	
	Stephan, Khristy	01/17/2023 8:00 AM	120 mins	Intake	
	Clinician, Robert	01/17/2023 8:00 AM	150 mins	Intake	

- Clicking on the "Client Refuses Appointment" icon will bring up a pop-up window. Enter the Refusal Reason and then click "OK".



7. For the appointment that the client chooses, click on the “Schedule Appointment” icon.

	Staff Name	Date/Time	Duration	Type	Location Name
	Stephan, Khristy	01/09/2023 8:00 AM	120 mins	Intake	
	Clinician, Robert	01/09/2023 8:00 AM	120 mins	Intake	
	Clinician, Robert	01/09/2023 1:00 PM	180 mins	Intake	
	Stephan, Khristy	01/10/2023 8:00 AM	120 mins	Intake	
	Clinician, Robert	01/10/2023 8:00 AM	150 mins	Intake	
	Clinician, Robert	01/10/2023 1:00 PM	180 mins	Intake	
	Stephan, Khristy	01/11/2023 8:00 AM	120 mins	Intake	
	Clinician, Robert	01/11/2023 8:00 AM	150 mins	Intake	
	Stephan, Khristy	01/12/2023 8:00 AM	120 mins	Intake	
	Clinician, Robert	01/12/2023 8:00 AM	150 mins	Intake	
	Stephan, Khristy	01/13/2023 8:00 AM	120 mins	Intake	
	Clinician, Robert	01/13/2023 8:00 AM	150 mins	Intake	
	Stephan, Khristy	01/16/2023 8:00 AM	120 mins	Intake	
	Clinician, Robert	01/16/2023 8:00 AM	150 mins	Intake	
	Stephan, Khristy	01/17/2023 8:00 AM	120 mins	Intake	
	Clinician, Robert	01/17/2023 8:00 AM	150 mins	Intake	

8. This takes you to the Service Detail screen. **Confirm/enter the appointment information.** You can also denote if the person needs transportation or interpretation services.

9. Once complete, **click Save.** The appointment is now scheduled and you are finished.

Service Detail | Billing Diagnosis | Authorization(s) | Disposition

Service

Client...	Training, Manua...	Status	Scheduled	Start Date	01/16/2023	Program	Outpatient MH Adult
Procedure	Mental Health Assessment by Non-Physi	Modifier...		Start Time	10:30 AM	Total Duration	90 Minutes
Clinician Name	Clinician, Robert	Attending		End Date	01/16/2023	Referring	
Location	Office	Other Person(s) Present		Cancel Reason			
Group...		Charge	\$234.90	Balance		Rate ID	275
<input checked="" type="checkbox"/> Billable	<input type="checkbox"/> Do Not Complete						
Mode Of Delivery	Face-to-face						
Travel Time		Minutes		Note			
Face to Face Time		Minutes					
Documentation Time		Minutes					
Evidence Based Practices				<input type="checkbox"/> Override Charge Amount	Overridden By		
				<input type="checkbox"/> Override Errors	Overridden By		
Transportation Service	No			<input type="checkbox"/> Interpreter Services Needed			

# Life Cycle of the Client: Intake and Assessment

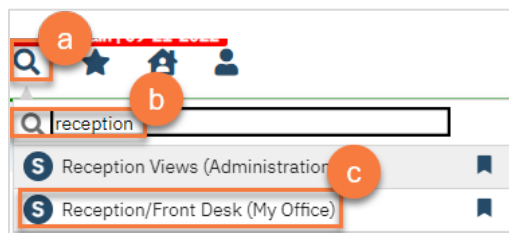
Once a person has been screened and is referred to a county, the next step is a full clinical assessment. However, there is also an intake process in order to enroll the client in the appropriate program and complete necessary program and legal documentation. In this section, we'll start with the basic intake process, then cover how to complete the intake paperwork packet, and then cover the clinical assessment and diagnosis.

Intake and Assessment Process Steps:

1. Find or create the client in SmartCare.
2. Enroll the client in the assessment program.
3. Confirm/enter the client's information, such as contact information, insurance, and basic demographics.
4. Complete the necessary intake documentation for your program.
5. Complete the clinical assessment.

## Front Desk: A client has arrived for their intake/assessment appointment. What do I do?

1. Open the Reception view, if not already done so.
  - a. Click the Search icon.
  - b. Type "Reception" in the search bar.
  - c. Select "Reception/Front Desk (My Office)" from the search results.

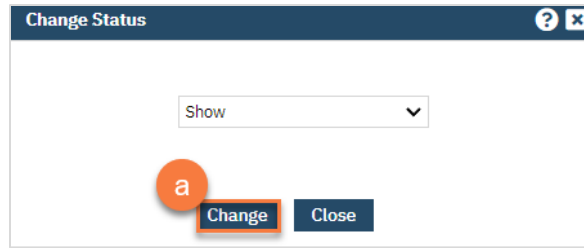


- d. This will bring up the Reception/Front Desk view. Select your program from the Views dropdown menu. Your system administrator can set up the appropriate list for your location. If you've used this screen before, it should populate from the most recent view you used.
  - e. Click Apply Filter to apply the view filter.
2. To check in a client, click the link in the Status column.

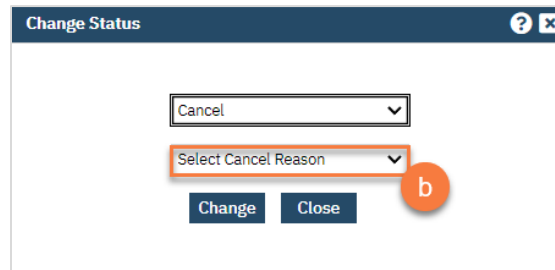
A screenshot of the "Reception/Front Desk (14)" view in a software application. The interface shows a table with columns for Time, Client, Flags, Procedure, Status, Staff, Balance, Comment, Locations, Programs, and Primary Ins. The "Status" column contains a "Sched..." link for each row. A red callout box labeled 'd' points to the "All Views" dropdown menu, and another labeled 'e' points to the "Apply Filter" button. A red callout box labeled '2' points to the "Sched..." link in the second row of the table.

Time	Client	Flags	Procedure	Status	Staff	Balance	Comment	Locations	Programs	Primary Ins.	
8:00...		i	PsychoTh	Sched...	Clinician_B...	\$0.00	Add	Office	Outpatient M...	Medi-Cal DMC	Add Card ...
11:0...		i	Alcohol an...	Sched...	Clinician_S...	\$0.00	Add	Office	SUD Outpatie...	Medi-Cal DMC	Add Card ...
11:0...		i	Alcohol an...	Sched...	Clinician_S...	\$0.00	Add	Office	SUD Outpatie...	Medi-Cal MH	Add Card ...
11:0...		i	Alcohol an...	Sched...	Clinician_S...	\$0.00	Add	Office	SUD Outpatie...	Medi-Cal DMC	Add Card ...
11:0...		i	Alcohol an...	Sched...	Clinician_S...	\$0.00	Add	Office	SUD Outpatie...	Medi-Cal DMC	Add Card ...
11:0...		i	Alcohol an...	Sched...	Clinician_S...	\$0.00	Add	Office	SUD Outpatie...	Medi-Cal DMC	Add Card ...
2:00...		i	Group Psy...	Sched...	Clinician_B...	\$369.80	Add	Community ...	Outpatient M...		Add Card ...
2:00...		i	Group Psy...	Sched...	Clinician_B...	\$0.00	Add	Community ...	Outpatient M...	Medi-Cal MH	Add Card ...
2:00...		i	Group Psy...	Sched...	Clinician_B...	\$0.00	Add	Community ...	Outpatient M...	Medi-Cal MH	Add Card ...
2:00...		i	Group Psy...	Sched...	Clinician_B...	\$0.00	Add	Community ...	Outpatient M...	Medi-Cal MH	Add Card ...
2:00...		i	Group Psy...	Sched...	Supervisor...	\$0.00	Add	Community ...	Outpatient M...		Add Card ...
2:00...		i	Group Psy...	Sched...	Supervisor...	\$0.00	Add	Community ...	Outpatient M...	Medi-Cal DMC	Add Card ...
2:00...		i	Group Psy...	Sched...	Supervisor...	\$939.60	Add	Community ...	Outpatient M...		Add Card ...

- a. This will bring up a pop-up window which auto-populates to "Show." Click Change to check the client in.



- b. You can also use this to cancel the appointment or mark the client as a no-show. If you mark this as “Cancel,” you’ll need to enter the reason for cancellation. If you mark this as “cancel” or “no show,” you can NOT undo this.



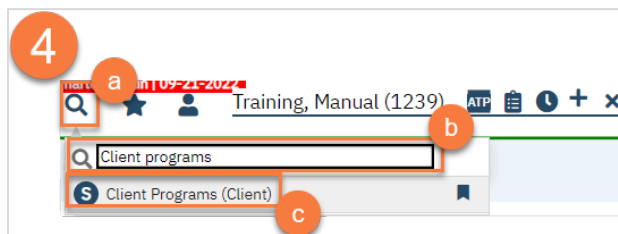
3. To open the client’s chart, click on the link in the Client column.

Reception/Front Desk (14)

01/23/2023 All Views All Statuses All Clinicians Apply Filter

	Time	Client	Flags	Procedure	Status	Staff	Balance	Comment	Locations	Programs	Primary Ins.	
(0)	8:00...	<a href="#">[Client Name]</a>	i ASAM	PsychoTh...	Sched...	Clinician_B...	\$0.00	Add	Office	Outpatient M...	Medi-Cal DMC	Add Card ...
(0)	11:0...	<a href="#">[Client Name]</a>	i ASAM	Alcohol an...	Sched...	Clinician_S...	\$0.00	Add	Office	SUD Outpatie...	Medi-Cal DMC	Add Card ...
(0)	11:0...	<a href="#">[Client Name]</a>	i AS	Alcohol an...	Sched...	Clinician_S...	\$0.00	Add	Office	SUD Outpatie...	Medi-Cal MH	Add Card ...
(0)	11:0...	<a href="#">[Client Name]</a>	i	Alcohol an...	Sched...	Clinician_S...	\$0.00	Add	Office	SUD Outpatie...	Medi-Cal DMC	Add Card ...
(0)	11:0...	<a href="#">[Client Name]</a>	i	Alcohol an...	Sched...	Clinician_S...	\$0.00	Add	Office	SUD Outpatie...	Medi-Cal DMC	Add Card ...
(0)	2:00...	<a href="#">[Client Name]</a>	i ASAM	Group Pay...	Sched...	Clinician_B...	\$369.80	Add	Community ...	Outpatient M...		Add Card ...
(0)	2:00...	<a href="#">[Client Name]</a>	i i i	Group Pay...	Sched...	Clinician_B...	\$0.00	Add	Community ...	Outpatient M...	Medi-Cal MH	Add Card ...
(0)	2:00...	<a href="#">[Client Name]</a>	i	Group Pay...	Sched...	Clinician_B...	\$0.00	Add	Community ...	Outpatient M...	Medi-Cal MH	Add Card ...
(0)	2:00...	<a href="#">[Client Name]</a>	i i i	Group Pay...	Sched...	Clinician_B...	\$0.00	Add	Community ...	Outpatient M...	Medi-Cal MH	Add Card ...
(0)	2:00...	<a href="#">[Client Name]</a>	i AS	Group Pay...	Sched...	Clinician_B...	\$0.00	Add	Community ...	Outpatient M...	Medi-Cal MH	Add Card ...
(0)	2:00...	<a href="#">[Client Name]</a>	i i i	Group Pay...	Sched...	Supervisor...	\$0.00	Add	Community ...	Outpatient M...		Add Card ...
(0)	2:00...	<a href="#">[Client Name]</a>	i i i	Group Pay...	Sched...	Supervisor...	\$0.00	Add	Community ...	Outpatient M...	Medi-Cal DMC	Add Card ...
(0)	2:00...	<a href="#">[Client Name]</a>	i	Group Pay...	Sched...	Supervisor...	\$939.60	Add	Community ...	Outpatient M...		Add Card ...

4. Open the Client Programs list page.
- Click the Search icon.
  - Type “Client Program” in the search bar.
  - Select “Client Programs (Client)” from the search results.



5. Find your program on the list and click on the link in the Status column, which should be listed as “Requested.”

Client Programs (2)

All Programs All Statuses Other Apply Filter

Program Name	Status	Enrolled	Discharged	Assigned Staff	Primary	Last DOS	Next DOS
Outpatient MH Adult	Enrolled	01/13/2023			Yes		01/19/2023 08:00 AM
Outpatient MH Adoles...	Requested				No		

6. This takes you to the Client Program Details screen. **Change the Status to “Enrolled”**.
7. This unlocks the Enrollment Date field. **Enter today’s date in the Enrollment Date field.**
8. **Click Save.**

Program Assignment Details

Save

**Program Assignment**

**General**

Program Name: Outpatient MH Adult  Primary

Client...: Training, Manual

Assigned Staff: [Dropdown]

Comment: [Text Area]

Current Status: Enrolled

Requested Date: 01/05/2023

Enrolled Date: [Dropdown]

Discharged Date: [Dropdown]

Next Schedule Service: [Dropdown]

9. The next steps in the process are to complete the intake documentation packet, confirm the client’s information, and for the clinician to complete the clinical assessment. **Complete the documents you are responsible for.** Follow the steps in How do I complete Intake Documents?. If you have documents that were completed on paper that need to be scanned in to SmartCare, see How do I scan a document into the client’s record? If you need additional information on a specific form, see their respective section (e.g. Privacy and Consents; Clinical Documents; Intake and Other Forms; State Reporting).

## Front Desk: A person has walked in for an assessment at a walk-in clinic. What do I do?

1. Use the Client Search screen to determine if the person is a client already in the system.

01-21-2022

[User Icon]

Client Search [Input Field]

< Client Search >

- a. If they are already a client in the system, select them to open their record.

**Client Search** [?] [X]

Clear

**Name Search**  Include Client Contacts  Only Include Active Clients (Checking will not allow option to create new Client)

**Broad Search** **Narrow Search** Type of Client  Individual  Organization **All Client Search**

Last Name  First Name  Program

**Other Search Strategies**

**SSN Search**    **Phone # Search**

**DOB Search**  **Master Client ID Search**

**Primary Clinician Search**  **Client ID Search**

**Authorization ID / #**  **Insured ID Search**

**Records Found**

ID	Master ID	Client Name	Chosen Name	SSN/EIN	DOB	Status	City	Primary Clinician
1244	1244	Test, Problemlist		9684	06/19/20...	Active		

**Create New Potential Client** **Select** **Cancel**

**Registration** **Inquiry (Selected Client)** **Inquiry (New Client)**

- b. If they are not a client in the system, click "Create New Potential Client". You'll have to search individually by name, date of birth (DOB), and social security number (SSN) in order to create a new client.

**Client Search** [?] [X]

Clear

**Name Search**  Include Client Contacts  Only Include Active Clients (Checking will not allow option to create new Client)

**Broad Search** **Narrow Search** Type of Client  Individual  Organization

Last Name  First Name  Program

**Other Search Strategies**

**SSN Search**    **Phone # Search**

**DOB Search**  **Master Client ID Search**

**Primary Clinician Search**  **Client ID Search**

**Authorization ID / #**  **Insured ID Search**

**Records Found**

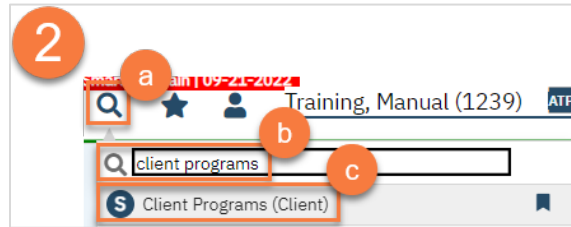
ID	Master ID	Client Name	Chosen Name	SSN/EIN	DOB	Status	City	Primary Clinician
No data to display								

**Create New Potential Client** **Select** **Cancel**

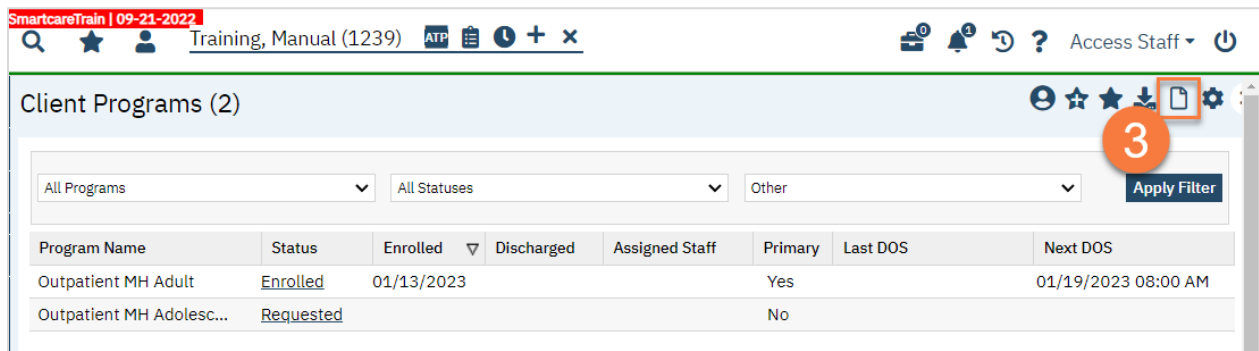
**Registration** **Inquiry (Selected Client)** **Inquiry (New Client)**



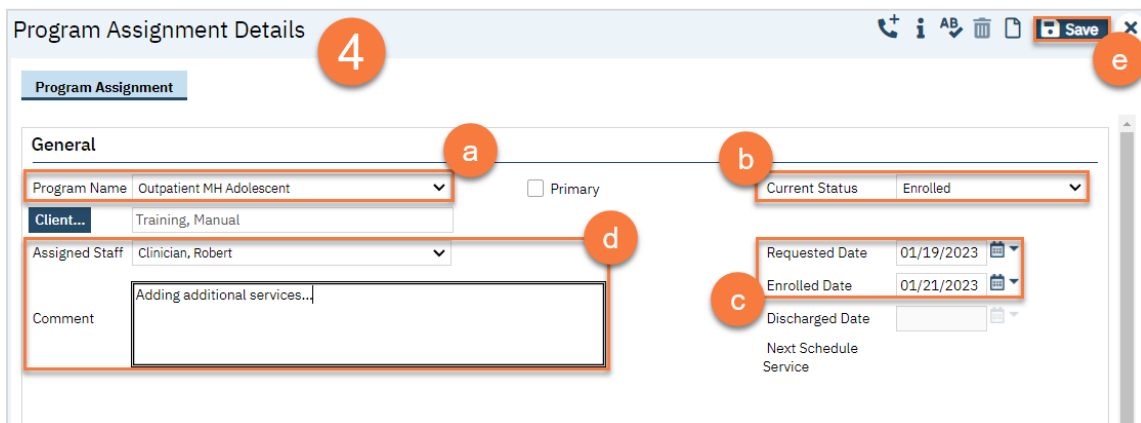
2. Open the Client Programs list page.
  - a. Click the search icon.
  - b. Type in “Client Programs”
  - c. Select “Client Programs (Client)” from the search results.



3. Confirm the client needs an assessment. If you just created a new client, obviously they’ll need an assessment. However, if the person was already a client in the system, you’ll want to check to see if they already are connected to services. Look at the Client Programs to see if the client is already open to a program that can share an assessment with your program. If the client does need an assessment, enroll them in your program by **clicking the New icon**.



4. Complete the Client Program Details screen.
  - a. Select your program from the dropdown menu.
  - b. Enter the status of the program as “enrolled”.
  - c. Enter the enrollment date. This will be today’s date. You may leave the requested date blank.
  - d. If known, enter the assigned staff. You can also enter any comments related to this program enrollment.
  - e. Click Save.

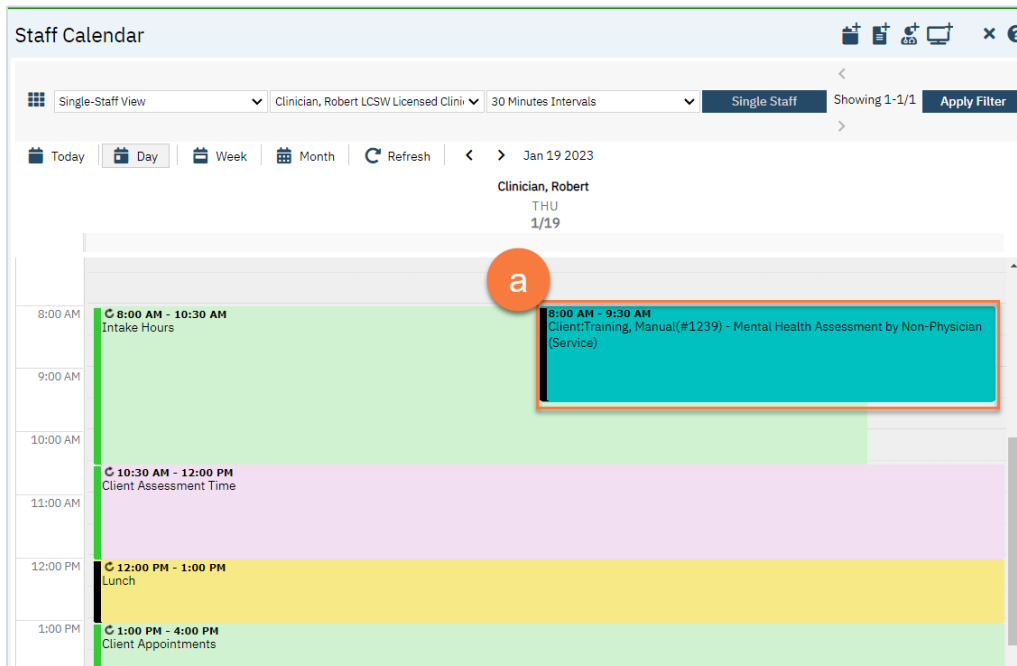


5. The next steps in the process are to complete the intake documentation packet, confirm the client’s information, and for the clinician to complete the clinical assessment. **Complete the documents you are responsible for.** Follow the steps in How do I complete Intake Documents?. If you have documents that were completed on paper that need to be scanned in to SmartCare, see How do I scan a document into the client’s record? If you need

additional information on a specific form, see their respective section (e.g. Privacy and Consents; Clinical Documents; Intake and Other Forms; State Reporting).

## Clinical: A client has arrived for their intake/assessment appointment at a program where we don't have a receptionist checking clients in. What do I do?

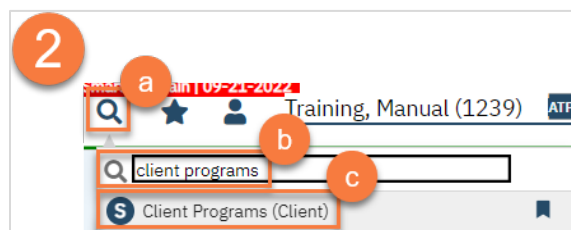
1. Open the client's record, if not already done so.
  - a. You can do this from your Staff Calendar by selecting their appointment on your calendar.



- b. You can also do this using the Client Search screen.



2. Open the Client Programs list page.
  - a. Click the Search icon.
  - b. Type "Client Program" in the search bar.
  - c. Select "Client Programs (Client)" from the search results.



3. Find your program on the list and click on the link in the Status column, which should be listed as "Requested."

Client Programs (2)

All Programs All Statuses Other Apply Filter

Program Name	Status	Enrolled	Discharged	Assigned Staff	Primary	Last DOS	Next DOS
Outpatient MH Adult	Enrolled	01/13/2023			Yes		01/19/2023 08:00 AM
Outpatient MH Adolesc...	Requested				No		

- This takes you to the Client Program Details screen. **Change the Status to “Enrolled”**.
- This unlocks the Enrollment Date field. **Enter today’s date in the Enrollment Date field**.
- Click Save**.

Program Assignment Details

Save

**6**

**Program Assignment**

**General**

Program Name: Outpatient MH Adolescent  Primary

Client...: Training, Manual

Assigned Staff: [Dropdown]

Comment: [Text Area]

**4** Current Status: Requested

**5** Requested Date: 01/05/2023

Enrolled Date: [Date Picker]

Discharged Date: [Date Picker]

Next Schedule Service: [Date Picker]

- Complete your required documents.** Depending on your program, this may include intake forms in addition to clinical assessment documents. Follow the steps in How do I complete Intake Documents?. If you have documents that were completed on paper that need to be scanned in to SmartCare, see How do I scan a document into the client’s record? If you need additional information on a specific form, see their respective section (e.g. Privacy and Consents; Clinical Documents; Intake and Other Forms; State Reporting).

**Clinical: A client has arrived for their intake/assessment appointment at a program where we have a receptionist checking clients in. What do I do?**

- The receptionist will have already checked in the client, which includes enrolling them in your program. You should be able to see this on your Appointments for Today widget. Make sure to click the refresh icon throughout the day for updates.

Appointments For Today 1 ↻

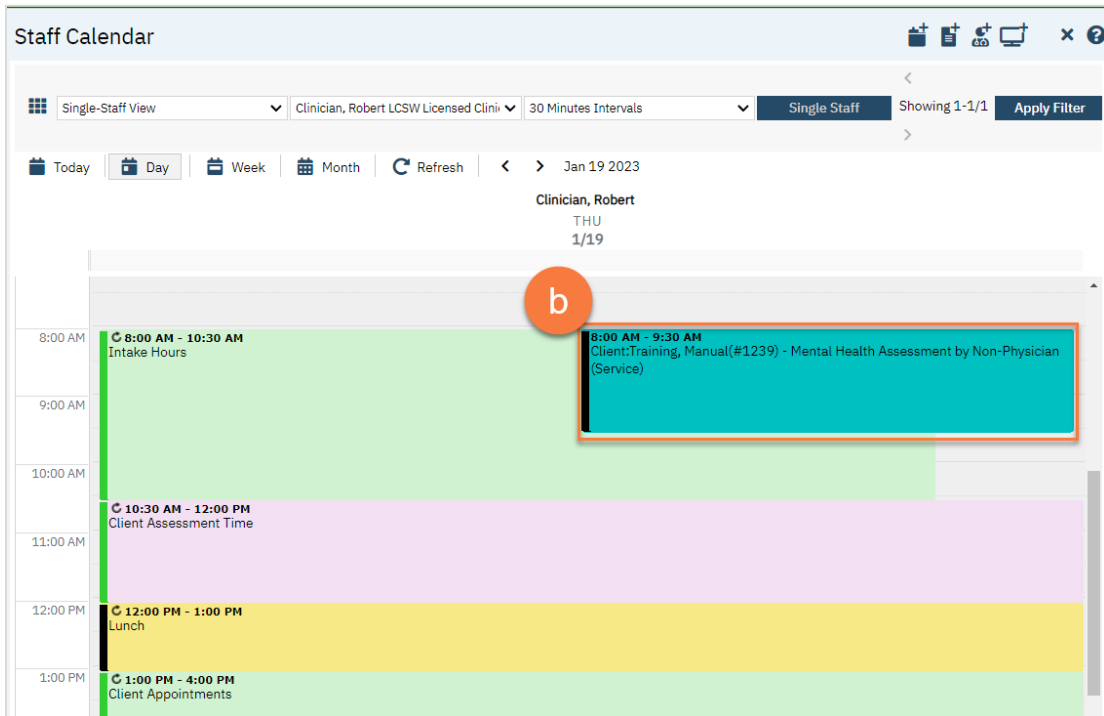
Client Name/Description	Time	Status	
<a href="#">Training, Manual(M...</a>	<a href="#">08:00 AM</a>	Show	ATP
<a href="#">Training, Manual(P...</a>	<a href="#">09:30 AM</a>	<span style="border: 1px solid orange; padding: 2px;">Show</span>	ATP
Lunch	<a href="#">12:00 PM</a>		
Paper Work	<a href="#">04:00 PM</a>		

2. Open the client's record, if not already done so.
  - a. You can do this from your Appointments for Today widget by clicking on the client's name.

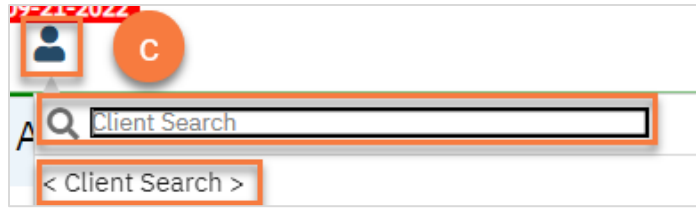
Appointments For Today a ↻

Client Name/Description	Time	Status	
<a href="#">Training, Manual(M...</a>	<a href="#">08:00 AM</a>	Show	ATP
<span style="border: 1px solid orange; padding: 2px;"><a href="#">Training, Manual(P...</a></span>	<a href="#">09:30 AM</a>	Show	ATP
Lunch	<a href="#">12:00 PM</a>		
Paper Work	<a href="#">04:00 PM</a>		

- b. You can do this from your Staff Calendar by selecting their appointment on your calendar.



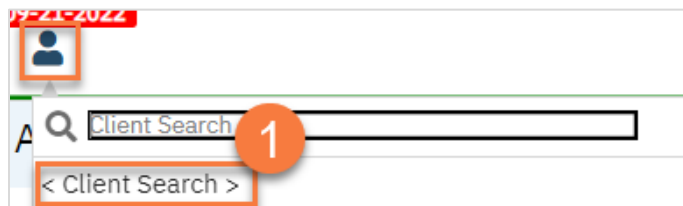
- c. You can also do this using the Client Search screen. This would be recommend for clients who have walked-in for an assessment.



3. **Complete your required documents.** Depending on your program, this may include intake forms in addition to clinical assessment documents. Follow the steps in How do I complete Intake Documents?. If you have documents that were completed on paper that need to be scanned in to SmartCare, see How do I scan a document into the client's record? If you need additional information on a specific form, see their respective section (e.g. Privacy and Consents; Clinical Documents; Intake and Other Forms; State Reporting).

### **Clinical: A person has walked in for an assessment at a walk-in clinic, and we don't have a receptionist to check clients in. What do I do?**

1. Use the Client Search screen to determine if the person is a client already in the system.



- c. If they are already a client in the system, select them to open their record.

**Client Search** [?] [x]

Clear

**Name Search**  Include Client Contacts  Only Include Active Clients (Checking will not allow option to create new Client)

Broad Search Narrow Search Type of Client  Individual  Organization All Client Search

Last Name Training First Name Manual Program [v]

**Other Search Strategies**

SSN Search 555 66 8453 Phone # Search [ ]

DOB Search 06/16/2000 [ ] Master Client ID Search [ ]

Primary Clinician Search [v] Client ID Search [ ]

Authorization ID / # [ ] Insured ID Search [ ]

**Records Found**

ID	Master ID	Client Name	Chosen Name	SSN/EIN	DOB	Status	City	Primary Clinician
1244	1244	Test, Problemlist		9684	06/19/20...	Active		

Create New Potential Client Select Cancel

Registration Inquiry (Selected Client) Inquiry (New Client)

- d. If they are not a client in the system, click "Create New Potential Client". You'll have to search by name, date of birth (DOB), and social security number (SSN) in order to create a new client.

**Client Search** [?] [x]

Clear ✖ No Search Records Found

**Name Search**  Include Client Contacts  Only Include Active Clients (Checking will not allow option to create new Client)

Broad Search Narrow Search Type of Client  Individual  Organization All Client Search

Last Name Training First Name Manual Program [v]

**Other Search Strategies**

SSN Search 555 66 8453 Phone # Search [ ]

DOB Search 06/16/2000 [ ] Master Client ID Search [ ]

Primary Clinician Search [v] Client ID Search [ ]

Authorization ID / # [ ] Insured ID Search [ ]

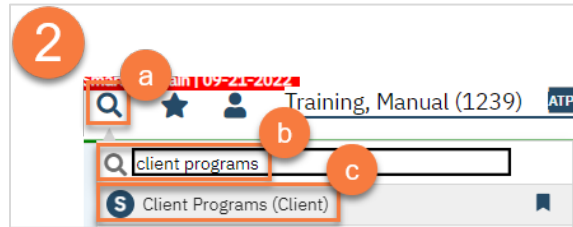
**Records Found**

ID	Master ID	Client Name	Chosen Name	SSN/EIN	DOB	Status	City	Primary Clinician
No data to display								

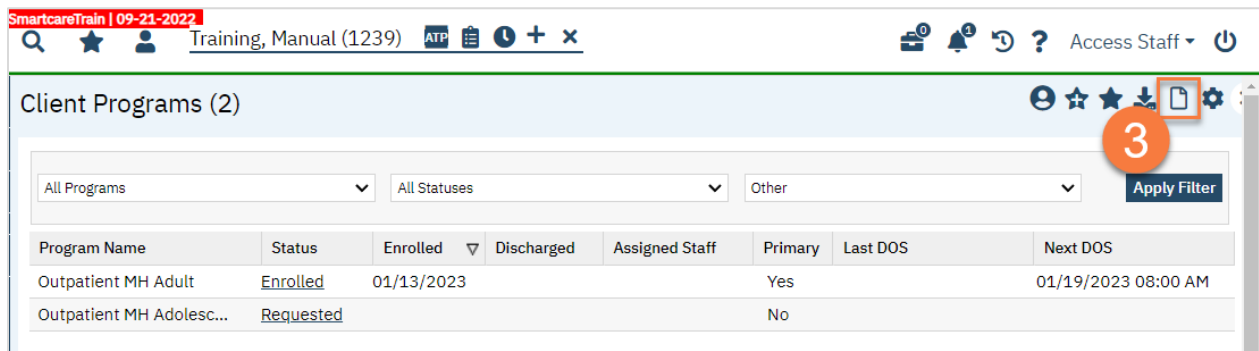
Create New Potential Client Select Cancel

Registration Inquiry (Selected Client) Inquiry (New Client)

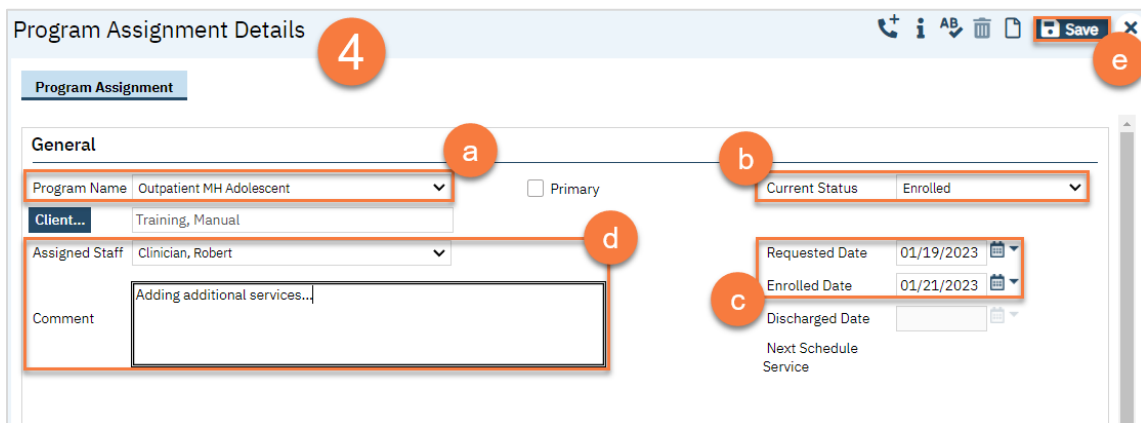
2. Open the Client Programs list page.
  - a. Click the search icon.
  - b. Type in “Client Programs”
  - c. Select “Client Programs (Client)” from the search results.



3. Confirm the client needs an assessment. If you just created a new client, obviously they’ll need an assessment. However, if the person was already a client in the system, you’ll want to check to see if they already are connected to services. Look at the Client Programs to see if the client is already open to a program that can share an assessment with your program. If the client does need an assessment, enroll them in your program by **clicking the New icon**.



4. Complete the Client Program Details screen.
  - a. Select your program from the dropdown menu.
  - b. Enter the status of the program as “enrolled”.
  - c. Enter the enrollment date. This will be today’s date. You may leave the requested date blank.
  - d. If known, enter the assigned staff. You can also enter any comments related to this program enrollment.
  - e. Click Save.

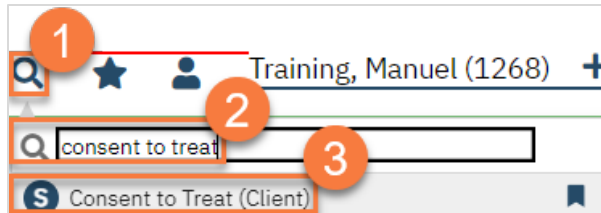


5. The next steps in the process are to complete the intake documentation packet, confirm the client’s information, and for the clinician to complete the clinical assessment. **Complete the documents you are responsible for.** Follow the steps in How do I complete Intake Documents?. If you have documents that were completed on paper that need to be scanned in to SmartCare, see How do I scan a document into the client’s record? If you need

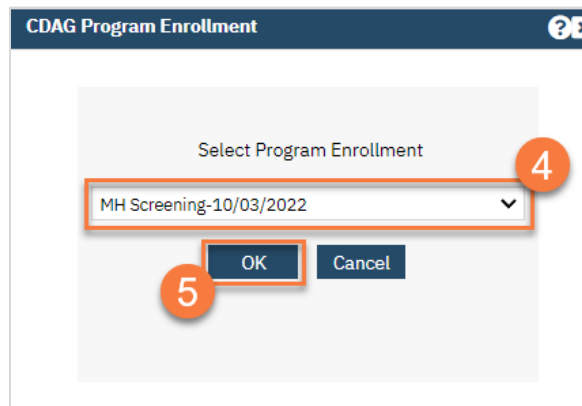
additional information on a specific form, see their respective section (e.g. Privacy and Consents; Clinical Documents; Intake and Other Forms; State Reporting).

## How do I complete Intake Documents?

1. You must first have the client open, then **click the Search icon**.
2. **Type the document's name** into the search bar.
3. **Click to select the document** from the search results.



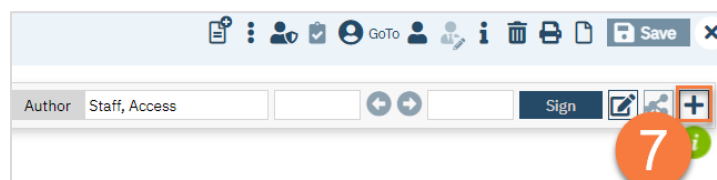
4. In the CDAG Program Enrollment window pop-up, **click the drop down** and **click to select** the appropriate program.
5. **Click OK** to continue.



6. The document will open. **Complete the document** based on the client's responses. Once completed, **click Sign**.

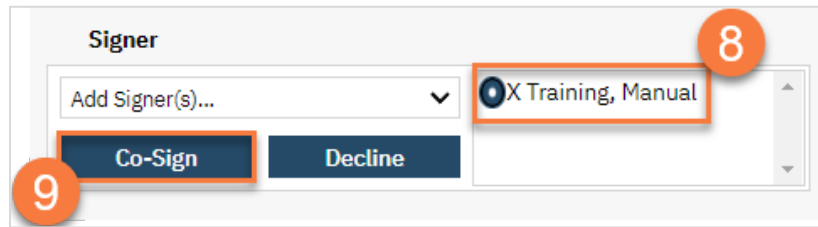


7. This will create the PDF version of the form. **Click the Plus icon** in the upper right corner of the PDF viewer.

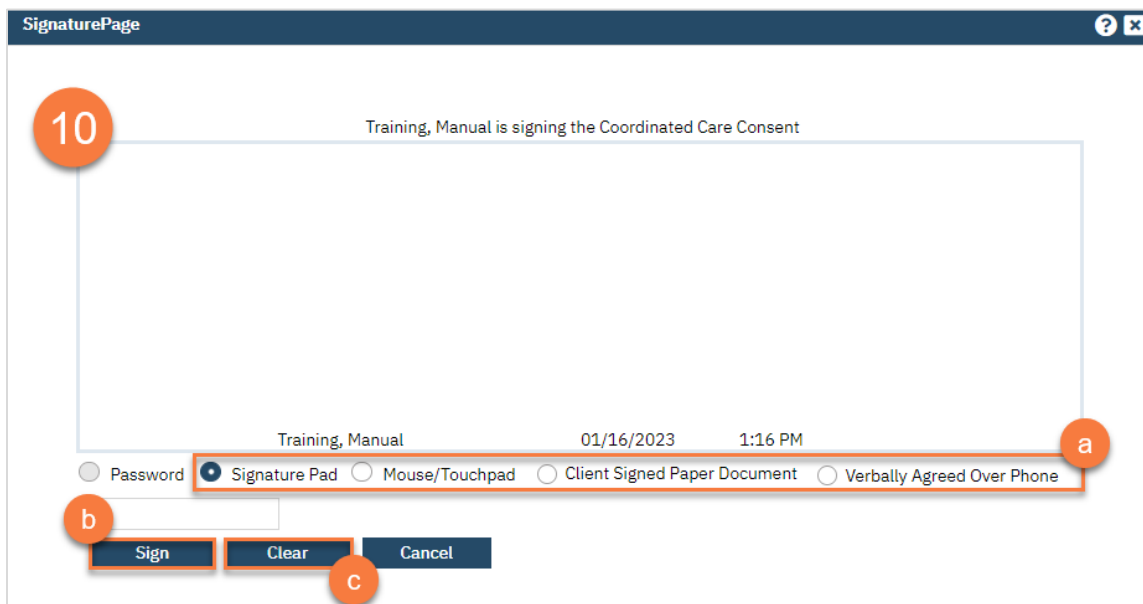




8. This opens the signature details. **Select the client and/or guardian from the Signer field.** You will need to select each cosigner one at a time, so repeat these steps as needed.
9. **Click Co-Sign.**



10. This brings up the Signature Page pop-up window. The co-signer can now sign using a signature pad, a mouse, or a touchpad to capture their signature. You can also designate that the client has signed on a paper version of the document or that they client verbally agreed and was unable to sign. If the client has signed a paper version of the form, that form should be scanned in. See How do I scan a document into the client’s record?
  - a. **Select the method of capturing the signature.**
  - b. Once the co-signer is happy with their signature, **click the Sign button.** If the client has signed a paper version of the form or has agreed verbally and is unable to sign electronically at this point, these are other options.
  - c. If the cosigner needs to start over, click the Clear button to erase the current signature.



Once signed by all required people, you are finished with this document and may move on to the next.

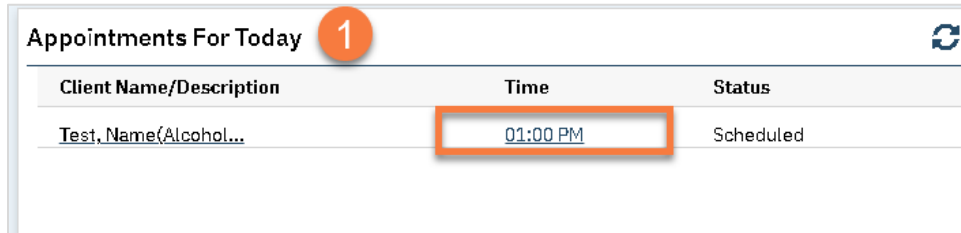
# Life Cycle of the Client: Services

Now that the Intake process is complete, you can begin providing services. This is the bulk of the life cycle of the client. This section includes documenting the services you provide to the client, making ongoing clinical decisions about what services the client needs, and transitioning the client through programs as they take steps toward recovery.

## How do I write a progress note for a scheduled service?

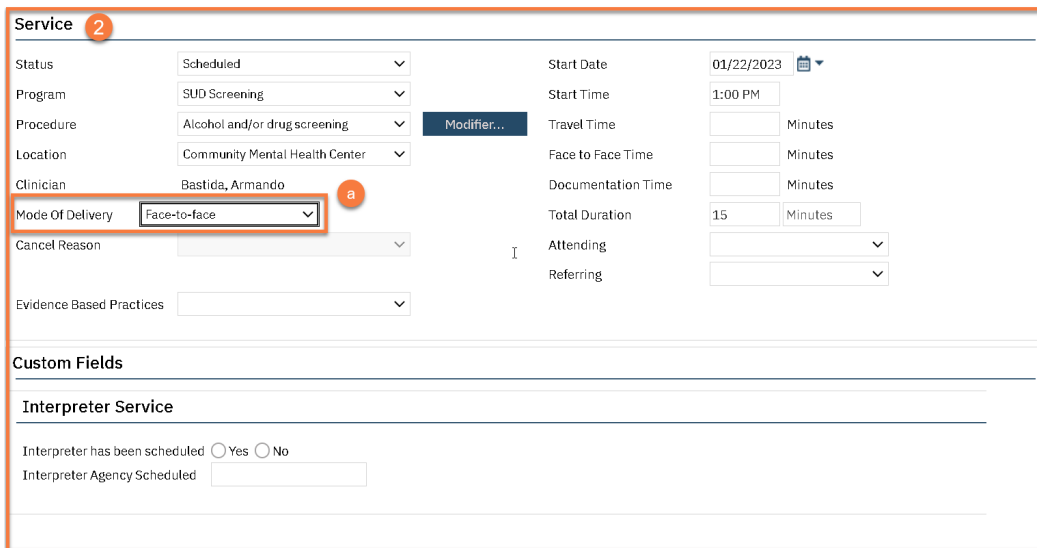
Note: to document a progress note for a group, see How do I write a group progress note?

1. On your Appointments for Today widget, click on the time link for the service you're documenting.



Client Name/Description	Time	Status
Test, Name (Alcohol...	<a href="#">01:00 PM</a>	Scheduled

2. This opens the service note. Complete the service details.
  - a. Confirm/Enter Mode of Delivery.
  - b. Enter Face to Face Time. Under CalAIM Payment Reform, this is what is used for billing. Enter Travel Time and Documentation Time if applicable.
  - c. Enter Evidenced-Based Practices if applicable.



**Service** 2

Status	Scheduled	Start Date	01/22/2023
Program	SUD Screening	Start Time	1:00 PM
Procedure	Alcohol and/or drug screening	Travel Time	Minutes
Location	Community Mental Health Center	Face to Face Time	Minutes
Clinician	Bastida, Armando	Documentation Time	Minutes
Mode Of Delivery	Face-to-face	Total Duration	15 Minutes
Cancel Reason		Attending	
Evidence Based Practices		Referring	

**Custom Fields**

**Interpreter Service**

Interpreter has been scheduled  Yes  No

Interpreter Agency Scheduled

- d. If this is a note for a crisis service, an Emergency Indicator field will appear. Enter whether this was an emergency or not.

Screenshot with crisis intervention selected

3. If the status is show, you may now click on the Note tab. Complete the progress note tab. This note type may look different depending on the procedure code you have chosen. Most will include 3 fields: the Problem List section, the Note section, and the Care Plan section.
  - a. If you want to add problems to the problem list, you can do so here. Follow the instructions in How do I add a problem to the Problem List?.

- b. **Select with problems you addressed** in today's session.

[screenshot]

- c. **Enter your note** in the Note section. This should include all your usual clinical information, such as your interventions and the client's response to the interventions.

[screenshot]

- d. **Enter your plan of care** in the Care Plan section. For services that require a treatment plan, this is where the treatment plan is entered. This information will pull forward from the most recent service note in the same program. There may be text templates available for specific treatment plan requirements.

[screenshot]

4. The Billing Diagnosis tab will show you which diagnoses will be pulled onto the billing. You should generally ignore this tab for ongoing services. However, if you need to change the billing order, for example you want this note to focus on the secondary diagnosis, you can re-order the diagnoses to match your service without changing the overarching diagnosis form.

[screenshot]

5. When you are complete, **click Sign**.

[screenshot]

## How do I write a progress note for an unscheduled service?

1. Click the search icon.
2. Type in "New Service Note" in the search bar.
3. Click on "New Service Note" in the search results.

[screenshot]

4. This opens the service note. **Complete the service details.**
  - a. **Select your program from the dropdown menu.** This will determine which procedure codes you can select.
  - b. **Select the procedure code** from the dropdown menu.

- c. **Select the location and mode of service.**
- d. **Enter the date of the service.**
- e. **Enter the time(s) of the service.** Face to face time is required, as this is used for billing. We recommend completing the travel and documentation as well, though these are not required for billing.

[screenshot]

5. **Click on the Note tab.** Complete the progress note section. This note type may look different depending on the procedure code you have chosen. Most will include 3 fields: the Note field, where you will enter the main part of your note, the Care Plan field, which will pull from the most recent note in you program and where you will make updates to any plan of care, and the Problem List section, where you can add problems directly from the note.
6. The Billing Diagnosis tab will show you which diagnoses will be pulled onto the billing. You should generally ignore this tab for ongoing services. However, if you need to change the billing order, for example you want this note to focus on the secondary diagnosis, you can re-order the diagnoses to match your service without changing the overarching diagnosis form.
7. When you are complete, click Sign.

## I need to amend a note. What do I do?

1. **Find and open the note you need to amend.**
  - a. Make sure you have the client open. **Click on the search icon and type “documents” in the search bar. Click on “Documents (Client)”** from the search results to open a list of documents that have been completed for the client.

[screenshot]

- b. **Use the list page filters** to find the note you’re looking for.
- c. **Click on the note you want to amend.** This should open the pdf.

[screenshot]

2. **Click the Edit icon** in the upper right corner of the PDF viewer.

[screenshot]

3. A pop-up will appear, letting you know that this will create a new version of this document. **Click OK.**

[screenshot]

4. The service note screen will now appear. Some pieces you may not be able to edit due to billing having already been completed for this service. However, you should be able to **navigate to the Note tab**. From here, feel free to **edit the note as necessary**. The older version will still remain in the system for audit purposes, meaning anything you write or delete here will not affect the original version.
5. Once you’re finished, **click Sign**.

[screenshot]

6. The new, corrected version will show in the PDF viewer. If needed, you can look at the previous version of this document by clicking on the version link in the upper left corner of the PDF viewer. When people open this document, the most recent (corrected) version will be what they are shown.

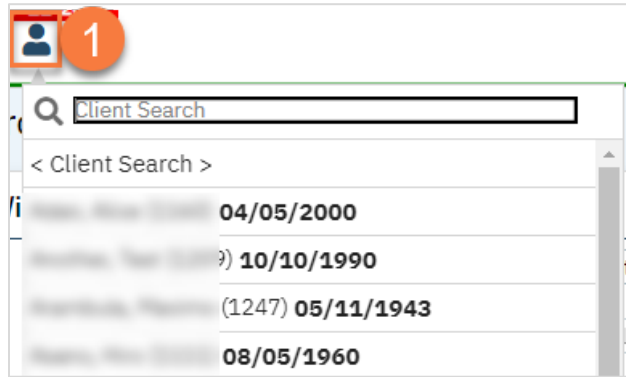
[screenshot]

## How do I refer to an additional program?

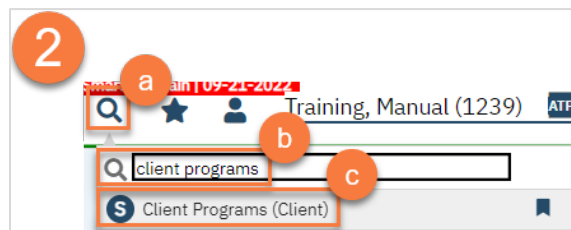


## How do I add the client to my program?

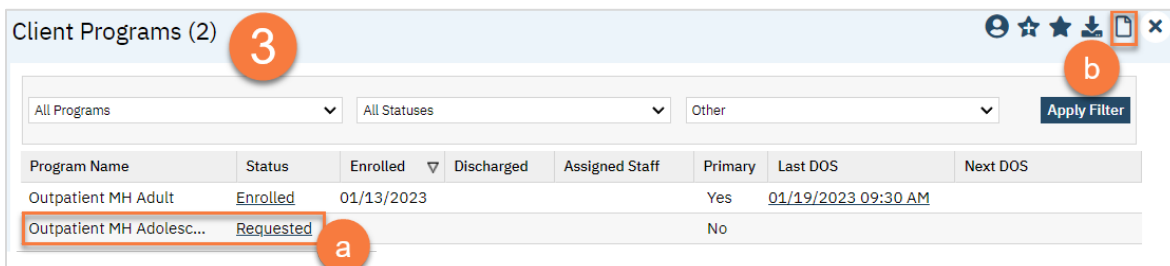
1. Open the client's record, if not already done so. You can do this using the Client Search screen.



2. Open the Client Programs list page.
  - a. Click the Search icon.
  - b. Type "Client Program" in the search bar.
  - c. Select "Client Programs (Client)" from the search results.



3. This opens the Client Programs list page.
  - a. If your program is on the list, **click on the link in the Status column**. The status is likely Requested, if the referral process has been started. If the status is Discharged, do not edit this enrollment and instead add your program as if it's a new program by clicking on the New icon.
  - b. If your program is not on the list, **click on the New icon**.



4. Complete the Client Program Details screen.
  - a. If not already done so, **select your program** from the dropdown menu.
  - b. **Enter the status of the program as "enrolled"**.
  - c. **Enter the enrollment date**. This will be today's date. You may leave the requested date blank, if it is not already entered.
  - d. **If known, enter the assigned staff**. You can also enter any comments related to this program enrollment.

e. Click Save.

The screenshot shows the 'Program Assignment Details' form. Callout 4 points to the title bar. Callout a points to the 'Program Name' dropdown menu. Callout b points to the 'Current Status' dropdown menu. Callout c points to the 'Enrolled Date' date field. Callout d points to the 'Assigned Staff' dropdown menu. Callout e points to the 'Save' button in the top right corner.

5. The next steps in the process are to **complete any documents needed** to enroll in your program. Follow the steps in How do I complete Intake Documents?. If you have documents that were completed on paper that need to be scanned in to SmartCare, see How do I scan a document into the client's record? If you need additional information on a specific form, see their respective section (e.g. Privacy and Consents; Clinical Documents; Intake and Other Forms; State Reporting).

## How do I view who's on the client's treatment team?

1. Make sure you have the client open. In the Treatment Team widget, click on the All link.

The screenshot shows the 'Treatment Team' widget. Callout 1 points to the 'All' link in the top right corner of the widget.

Role	Name
Program Assignment Staff: Outpatient MH Adult*	Clinician, Robert
<Unknown Team Role>	Staff, Psychiatrist

2. This takes you to the Treatment Team list page. To add a treatment team member, **click the New icon**. This takes you to the Treatment Team Details screen. Select what type of contact person this is.
3. **If the person you're adding is a SmartCare user, select Staff.**
- Enter the staff's name and select them from the search results. This will pull forward any information, such as phone number or address, that's tied to the staff in their staff set-up.
  - Enter the start date, which is when this person became a member of the treatment team.
  - Enter their role as well as what program they work in.
  - Add any comments.
  - Click Save.

Treatment Team Details

Treatment Team

Treatment Team Member

Contact  External  Staff  Active

Start Date: 01/17/2023 End Date: [ ]

Staff: Staff, Nurse

Role: Nurse Program: Outpatient MH Adult-12/30/2

Phone Numbers: Phone Number: 7605783774

Addresses: [ ]

Comments: [ ]

Save

4. If the person you're adding is a contact person that's already in the Client Information screen, select **Contact**.
  - a. Select the contact person from the dropdown list. This will pull forward any information, such as phone number or address that has been entered for them in the Client Information screen.
  - b. Enter the start date, which is when this person became a member of the treatment team.
  - c. Enter their role.
  - d. Add any comments.
  - e. Click Save.

Treatment Team Details

Treatment Team

Treatment Team Member

Contact  External  Staff  Active

Start Date: 01/17/2023 End Date: [ ]

Contact: Anderson, Bob

Role: Family/Friend Program: Outpatient MH Adult-12/30/2

Phone Numbers: [ ]

Addresses: Home: 123 Erhardt St heavyton, CA 90001

Comments: [ ]

Save

5. If the person you're adding is an external resource, that has not yet been added to the Client Information screen, select **External**.
  - a. Enter the information, including name, role, start date, organization, and contact information.
  - b. Click Save.

**Treatment Team Details**

**Treatment Team**

**Treatment Team Member**

Contact
  **External**
 Staff
  Active

Start Date: 01/17/2023
 End Date:

First Name:
 Last Name:
 Suffix:

Role:
 Program: Outpatient MH Adult-12/30/2

Email:
 Organization:

**Phone Numbers**  
 Business:
 Business 2:
 Fax:
 Home:

**Addresses**  
 Home:
 Mailing:
 Details...

**Comments**

6. To edit or remove a treatment team member, click on their name from the Treatment Team list page. This takes you to the Treatment Team Details page.

**Treatment Team (2)**

All Roles | Active | As of 01/21/2023 | Apply Filter

Treatment Team M	Role	Phone	Start Date	End Date	Status
<b>Staff, Psychiatrist</b>		(888) 123-4567,...	12/31/2022		Active
Clinician, Robert	Program Assignment Staff: O...	(760) 578-3774	12/30/2022		Active

- a. To remove a treatment team member, make sure to add an end date and de-select the “Active” checkbox.
- b. Once you’ve finished making your changes, click Save.

**Treatment Team Details**

**Treatment Team**

**Treatment Team Member**

Contact
  External
  **Staff**
 Active

Start Date: 12/31/2022
 End Date:

Staff: Staff, Psychiatrist

Role: Psychiatrist
 Program: Outpatient MH Adult-12/30/2

**Phone Numbers**  
 Phone Number: 8881234567  
 Phone Number: (760) 578-3774

**Addresses**  
 1610 Arden Way Suite 175

**Comments**



## How do I request authorization for services?



# Life Cycle of the Client: Discharge

As the client progresses through treatment, their services will begin to diminish. In this section, we will cover how discharge a client from a program, as well as how to transfer a client from one program to another.

## How do I close a client to a program?

1. Make sure you have the client open. Then **click the Search icon**.
2. **Type in “Client Programs” in the search bar**.
3. **Click on “Client Programs (Client)” in the search results**.

screenshot

4. This brings you to the Client Programs list page. **Select the program** you want to close to by clicking on the link in the Status column.

screenshot

5. This brings you to the Program Details screen.
  - a. **Change the status to “Discharged”**. This unlocks the Discharge Date field.
  - b. **Enter the Discharge Date**.
  - c. **Click Save**. You’re now finished.

screenshot

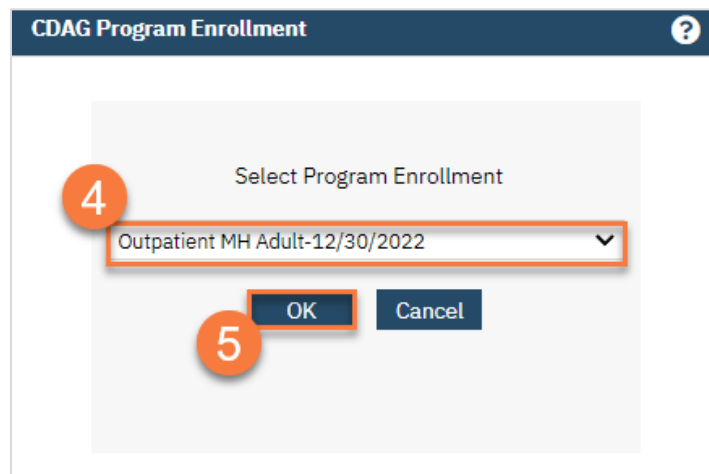
## How do I get a summary of care?

A Summary of Care is a document that pulls information from different places in the client’s chart.

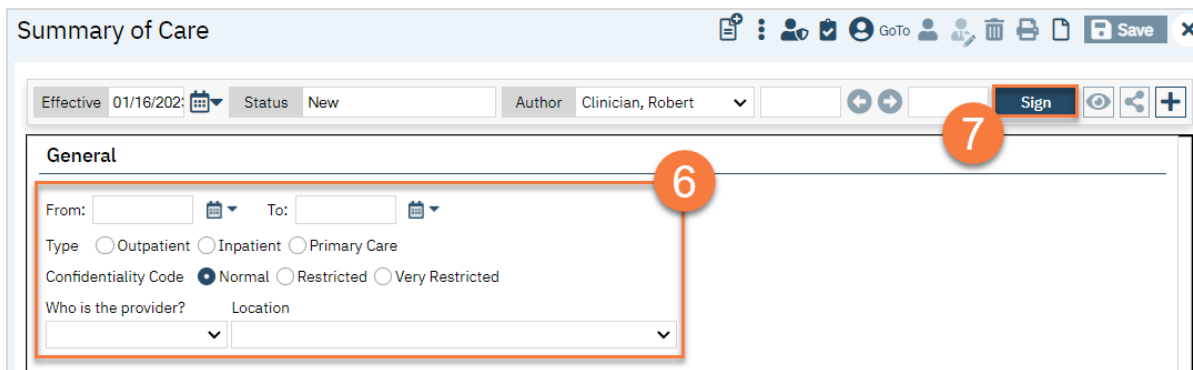
1. Make sure you have the client open. **Click the Search icon**.
2. **Type in “Summary of Care” in the search bar**.
3. **Click on “Summary of Care (Client)” in the search results**.

screenshot

4. **Select your program** from the dropdown menu.
5. **Click OK**.



6. This opens the Summary of Care document. **Enter the parameters for your summary of care**.
7. **Click Sign**. This produces a PDF, which includes information from the client’s chart.



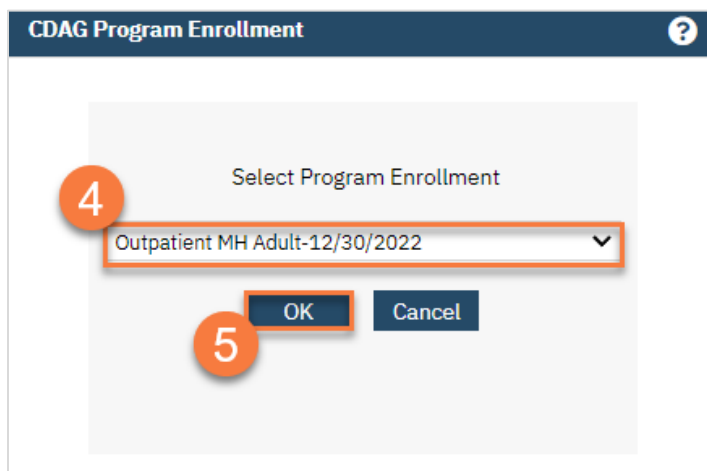
## How do I get a discharge summary?

A Discharge Summary is a document that pulls information from different places in the client's chart.

1. Make sure you have the client open. **Click the Search icon.**
2. **Type in "Discharge Summary" in the search bar.**
3. **Click on "Discharge Summary (Client)" in the search results.**

screenshot

4. **Select your program** from the dropdown menu.
5. **Click OK.**



6. This opens the Summary of Care document. **Enter the parameters for your summary of care.**
7. **Click Sign.** This produces a PDF, which includes information from the client's chart.

Discharge Summary

Effective 01/16/2022 Status New Author Clinician, Robert Sign

**General**

From: To:

Type  Outpatient  Inpatient  Primary Care

Confidentiality Code  Normal  Restricted  Very Restricted

Who is the provider? Location

6 7

# Privacy and Consents

Information in SmartCare is generally considered confidential. There are multiple laws and regulations that programs must follow, depending on their specific treatment services. However, the client can provide consent to share information. This section reviews these topics, as well as the documents utilized to record a client's consent.

## Clinical Access Data Group (CDAG)

SmartCare includes both mental health and substance use disorder treatment records. In order to abide by Title 42 of the Code of Federal Regulations, part 2 (42 CFR), SmartCare uses Clinical Access Data Groups, or CDAG, to limit what users can see. Your CDAG will be determined by the programs you work in and are set up by your system administrator.

Most of the time you are creating a document in the system, you'll have to select which program that document is associated with. This allows the system to limit viewability of client documents based on a user's CDAG.

You'll still be able to search for any client, as some may not be open to any programs yet, and some might be open to programs that you don't have access to. This minimizes the option of creating duplicate clients in SmartCare. However, once in a client's chart, you'll only be able to see information related to programs that are included in your CDAG.

### How do I know what CDAG I have?

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Your System Administrator will set up your CDAG and which programs you are able to see. CalMHSA recommends three basic CDAG options:

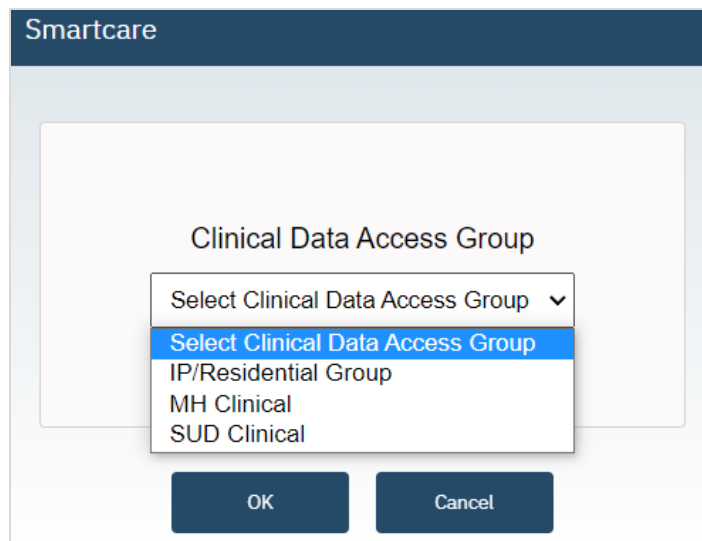
1. Mental Health CDAG – Includes all Mental Health programs; would be assigned to mental health staff.
2. Substance Use Disorder CDAG – Includes all Substance Use treatment programs; would be assigned to substance use treatment staff.
3. Administration CDAG – Includes all programs in SmartCare; would be assigned to any staff that provide administrative support, such as billing, medical records, quality improvement, and management.

Your county may employ additional groupings, based on how your county is set up. They may also limit which programs you are able to see, even if they're within the same CDAG.

### What happens if I work in both SUD and MH programs?

---

If you work in multiple programs, your system administrator will assign you multiple CDAGs. In this case, when you log in you'll select which CDAG you're logging in under. This will ensure that you're only able to see client information based on the role you're currently serving. This would also be the case if you work at two different agencies that have access to SmartCare.



### **What if the client wants me to be able to talk to other programs/people/agencies?**

Best practices mean coordinating care with all of a client’s providers, as well as other agencies and persons the client is working with. However, due to privacy rules, there are some limitations on what a provider can share with these entities. This is all based on the client’s preferences. The client can consent to you sharing treatment information. This is generally known as a Release of Information or an Authorization to Disclose Protected Health Information. Historically, each entity you want to exchange information with requires a separate Release of Information/Authorization to Disclose Information. This is still the case when you’re exchanging information with an agency or person that doesn’t have access to your county’s instance of SmartCare. However, CalMHSA has created a disclosure authorization that encompasses all persons and agencies who have access to your county’s instance of SmartCare. If signed, this allows county programs to better coordinate care for the client.

Note that this Coordinated Care Consent only authorizes the exchange of information within your county’s instance of SmartCare. Other counties using SmartCare are not included in this authorization, nor are agencies who also use their own instance of SmartCare. This consent also does not authorize the exchange of information with all providers or agencies the client is working with. Standard Releases of Information/Authorizations to Disclose Information are needed in these cases.

Redisclosure: Just because you have access to 42 CFR information because the client signed the Coordinated Care Consent does NOT give you permission to re-disclose information from SUD programs.

### **What happens when a client signs the Coordinated Care Consent?**

By default, SmartCare enforces privacy regulations, including HIPAA and 42 CFR. This means that people working in mental health programs are not able to see any of the client’s treatment information for substance use programs and vice versa. This limitation is enforced by each user’s CDAG. In essence, there is a wall between CDAGs.

When a client signs the Coordinated Care Consent, this wall is removed. Users will be able to see *all* the client’s treatment information, regardless of their CDAG. This includes historical information and future appointments. You’ll still be required to select your program when creating a new document. This is to ensure that all documents are appropriately sorted in case the client revokes their consent, as is their right.

## What happens when a client revokes their Coordinated Care Consent?

When a client has signed a Coordinated Care Consent, all SmartCare users can see all of the client's information. Basically, the CDAG rules drop, allowing users to view information regardless of their CDAG. When a client revokes their Coordinated Care Consent, the system will re-impose all CDAG rules. This means that information you previously were able to view will no longer be visible to you. You won't see any redaction marks; you simply won't be able to find any indication that the information was ever in the system.

## Will I be alerted if a client revokes a consent?

You will not be alerted if a client revokes a Coordinated Care Consent, as that would defeat the purpose of keeping information separate. However, you will no longer be able to see information outside of your CDAG.

If the client revokes a standard Release of Information/Authorization to Disclose Confidential Information (ROI/ADCI), you can create a flag to notify other treatment team members that the client no longer allows sharing with that entity. They will only be able to see information in their CDAG, which may not include your flag or the ROI/ADCI.

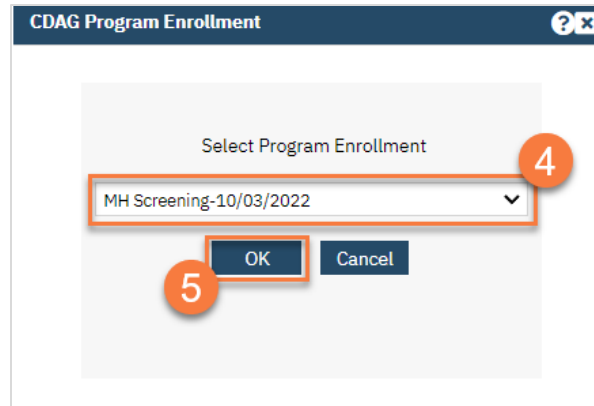
## Coordinated Care Consent & Authorizations to Disclose Information

### How do I complete a Coordinated Care Consent?

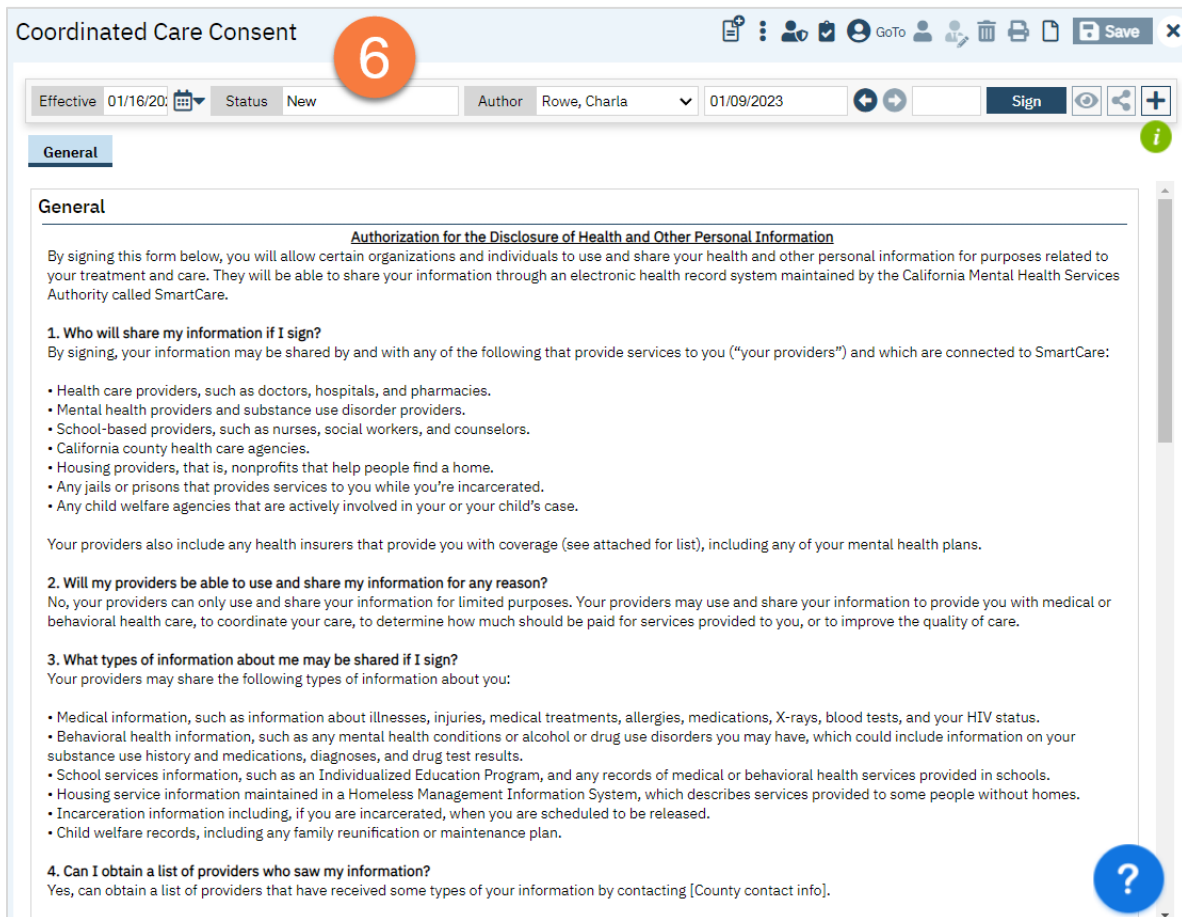
1. You must first have the client open, **click the Search icon**.
2. **Type Coordinated Care Consent** into the search bar.
3. **Click to select Coordinated Care Consent (Client)**.



4. In the CDAG Program Enrollment window pop-up, **click the drop down** and **click to select** the appropriate program.
5. **Click OK** to continue.



6. Most of the consent is wording. **Review this with the client.**



7. The Client Information section will pull information from the Client Information screen. You do not need to add any information here. If you need to update the information, we recommend doing that in the Client Information Screen.



8. In the Consent section, the client should indicate whether they want to consent to sharing information within SmartCare or not.
  - a. Selecting “Yes” will allow the sharing of information across SmartCare. Selecting “No” will keep the information users see limited to their CDAG.
  - b. The Start Date will automatically populate to today’s date. We recommend leaving the Expiration Date blank, unless the client explicitly indicates that they would like this consent to last for a short time.

9. If the client wants to keep their chart private from specific individuals, you can add them in Restricted Staff. You can enter more than one staff as needed.
  - a. Type the staff’s name in the Restricted Staff box. This will search for users. Select the appropriate staff from the search results.

- b. This will add the user to the form. If you selected the incorrect user, you can click on the Delete icon to remove them from the form.

**Client Identified Restrictions**

Restricted Staff

- Clinician, Robert
- Staff, Nurse

Details on any other restrictions of sharing my data. This will prompt a review by the CalMHSA SmartCare Train | 09-21-2022 Privacy Officer. This does not guarantee the restriction of this data as specified in the text.

10. There is also a text box if the client wants additional restrictions. This will send a notification to the Privacy Officer, as denoted in SmartCare, to contact the client to discuss the limitations the client is requesting.

**Client Identified Restrictions**

Restricted Staff

- Clinician, Robert
- Staff, Nurse

Details on any other restrictions of sharing my data. This will prompt a review by the CalMHSA SmartCare Train | 09-21-2022 Privacy Officer. This does not guarantee the restriction of this data as specified in the text.

11. Click Sign.

01/09/2023

12. This will create the PDF version of the form. Click the Plus icon in the upper right corner of the PDF viewer.

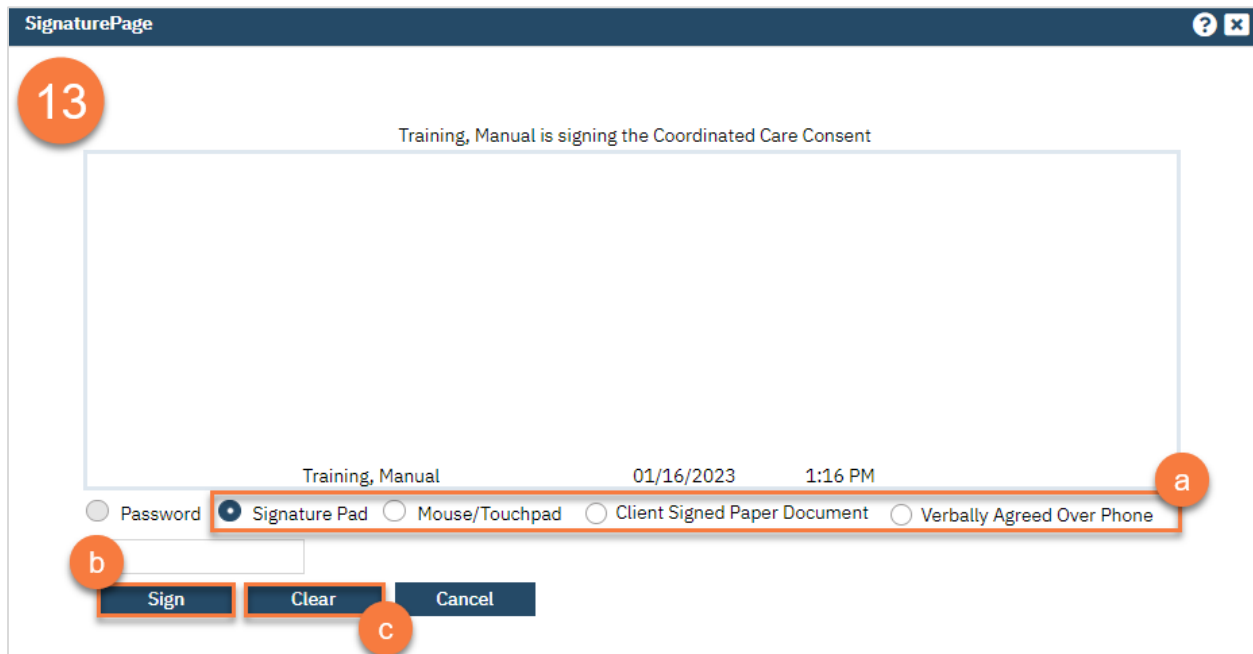
01/09/2023

13. This opens the signature details. Select the client and/or guardian from the Signer field. You will need to select each cosigner one at a time, so repeat these steps as needed.

14. Click Co-Sign.



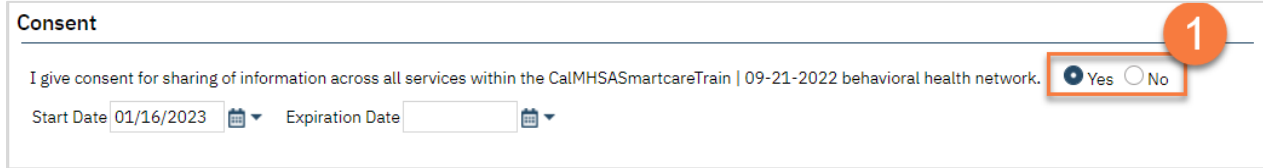
15. This brings up the Signature Page pop-up window. The co-signer can now sign using a signature pad, a mouse, or a touchpad to capture their signature. You can also designate that the client has signed on a paper version of the document or that they client verbally agreed and was unable to sign. If the client has signed a paper version of the form, that form should be scanned in. See How do I scan a document into the client’s record?
- Select the method of capturing the signature.**
  - Once the co-signer is happy with their signature, **click the Sign button**. If the client has signed a paper version of the form or has agreed verbally and is unable to sign electronically at this point, these are other options.
  - If the cosigner needs to start over, click the Clear button to erase the current signature.



Once signed by all required people, you are finished.

## What do I do if the client wants to revoke their Coordinated Care Consent?

1. To revoke a Coordinated Care Consent, simply create a new Coordinated Care Consent but mark “No” in the Consent section. This will automatically add an end date to the previous Coordinated Care Consent.



**Consent**

I give consent for sharing of information across all services within the CalMHSA SmartcareTrain | 09-21-2022 behavioral health network.  Yes  No

Start Date 01/16/2023 Expiration Date

## Where can I find out if the client has signed a Coordinated Care Consent?

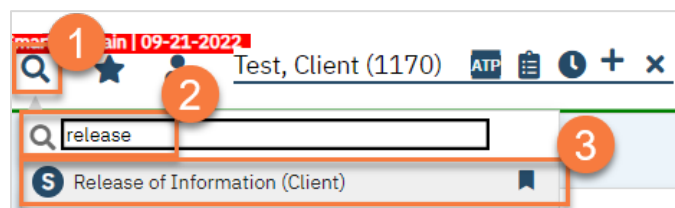
The easiest way to find out if the client has a Coordinated Care Consent is to search for the document using the Search icon. If there is a Coordinated Care Consent already signed in a CDAG that you can view, the PDF will pull up. If not, it will take you to a blank new Coordinated Care Consent.

1. You must first have the client open, **click the Search icon**.
2. **Type Coordinated Care Consent** into the search bar.
3. **Click to select Coordinated Care Consent (Client)**.

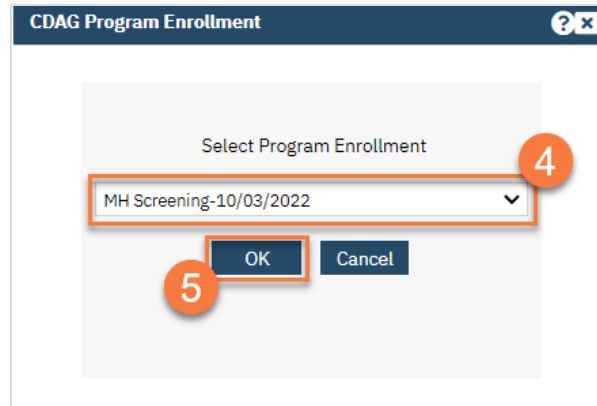


## How do I complete a Release of Information (Authorization to Disclose Confidential Information)?

1. You must first have the client open, **click the Search icon**.
2. **Type Release of Information** into the search bar.
3. **Click to select Release of Information (Client)**.



4. In the CDAG Program Enrollment window pop-up, **click the drop down** and **click to select** the appropriate program.
5. **Click OK** to continue.



6. **Complete the Release To/Release From section.** Make sure to select whether this authorization is to allow you to release information to this entity and/or obtain information from this entity.

**Release To/Release From**

Name or Other Specific Identification of Person(s) authorized to receive/ make the requested use or disclosure:

Organization/Provider
  Contact
 

 Release To
  Obtain From

Release To/From: Training, Spouse  
 Contact Type:   
 Organization:   
 Name: Training, Spouse  
 Address: 123 Oak Street  
 City: Sacramento State: California Zip: 95555  
 Phone: (916) 555-9999 Fax Number:

- a. If the person you’re completing this release for is already entered as a contact in the Client Information Screen, select “Contact” and then select the person from the drop down list “Release To/From”. This will bring in the contact person’s information.

**Release To/Release From**

Name or Other Specific Identification of Person(s) authorized to receive/ make the requested use or disclosure:

Organization/Provider
  Contact

Release To/From:   
 Contact Type:   
 Organization:   
 Name:   
 Address:   
 City: State: Zip:   
 Phone: Fax:

**Release To/Release From**

Name or Other Specific Identification of Person(s) authorized to receive/ make the requested use or disclosure:

Organization/Provider
  Contact

Release To/From: Training, Spouse  
 Contact Type:   
 Organization:   
 Name: Training, Spouse  
 Address: 123 Oak Street  
 City: Sacramento State: California Zip: 95555  
 Phone: (916) 555-9999 Fax Number:

- b. If you’re completing a release for an organization, such as Social Services or a school, select “Organization/Provider”. This opens a button next to the Release To/From field. Clicking this brings up a pop-up window where you can enter the organization’s information. Click save. This will push this information to the ROI and save this information for future ROIs. Enter the organization’s information.

**Release To/Release From**

Name or Other Specific Identification of Person(s) authorized to receive/ make the requested use or disclosure:

Organization/Provider  Contact **Open Contacts** Type  Release To  Obtain From

Release To/From  ...

Contact Type

Organization  Local Recovery Clinic

Name

Address  321 Sycamore Road ,

City  Sacramento State  California Zip  95555

Phone  (916) 555-3333 Fax Number  (916) 555-2222

- c. If you're completing a release for a contact person that is not currently entered as a contact in the Client Information Screen, selecting "Contact" will create an opportunity to select the button "Open Contacts". This will take you to the Client Information Screen, where you can add additional contact.

**Release To/Release From**

Name or Other Specific Identification of Person(s) authorized to receive/ make the requested use or disclosure:

Organization/Provider  Contact **Open Contacts** Type  Release To  Obtain From

Release To/From

Contact Type

Organization

Name

Address

City  State  Zip

Phone  Fax Number

7. **Complete the Purpose of Disclosure section.** Most authorizations to disclose information are for treatment and/or care coordination, but others may apply. Select the appropriate boxes. If you select "Other", make sure to clarify.
8. **Complete the Expiration section.** The start date automatically fills with today's date. If you don't change anything in this section, the document will automatically expire 1 year from today's date.
9. **Complete the Information to be Used or Disclosed section.** Select all records that are authorized for disclosure per the client's request.
  - a. If the client requests that only records from a certain time frame be shared, include the start and end dates.

**Purpose of Disclosure** 7

Quality Improvement
  Health insurance reimbursement  
 Treatment/Care Coordination
  Other

---

**Expiration** 8

If nothing marked - one(1) year from date signed

1 time disclosure
  6 months
  End of Agency Treatment

Start Date  End Date

---

**Information to be Used or Disclosed** 9

The information that can be disclosed under this authorization includes the following, if available

ROI Type

All records
  Acknowledgement of Treatment
  Billing &/OR Insurance Information  
 Intake/Admission Information
  Psychological Evaluation(s) Reports
  Medical History, Lab Results, Immunizations Records  
 Medications Prescribed
  Discharge Summary/Plan
  Progress Review/Summary  
 Screening Assessment(s)
  School Records/Reports/IEPs
  Treatment Plan(s)  
 Progress Notes
  Legal Documents (specify)

Other

Records Start Date  Records End Date  a

10. If the client wishes to put any restrictions on this authorization, enter those in the Restrictions section.
11. The terms section provides the client with information about the authorization they're signing. Make sure to **check both boxes** to demonstrate you've reviewed this information with the client.

**Restrictions** 10

---

**Terms**

**Terms. I understand:**

- The recipient(s) of my confidential information may share it with others if they are permitted to do so under federal and state law. I understand that in some cases my information may no longer be subject to privacy laws once it is shared.
- I have a right to revoke this form at any time by contacting the source of my confidential information. I understand that if I revoke, the recipient(s) of my information may keep the information that they received about me prior to the date I revoked.
- Signing this form is voluntary, and that declining to sign this form will not impact my ability to get medical care, health insurance, or any government benefits.
- Even if I don't sign this form, the recipient(s) may have a right to obtain my confidential information under applicable law.

**Signing for a Child.** I understand that if I am signing this form on behalf of a minor, I should include my name as the "Legal Representative" of my child, and that I should sign this form on the last line. If my child is 12 or older, my child should also sign on the first line.

**By checking these boxes, I agree that I have read, understand and agree to these terms.** 11

**NOTICE TO CLIENT:** By signing below, I consent to the disclosure of my information as described in this form. Further, by including my phone number below, I consent to the receipt of texts or calls to communicate with me about my consent and how my information may be shared (standard message and data rates may apply).

**ACCESS TO MY RECORD:** I have a right to obtain a copy of this form. I understand I should ask the person who presented this form to me for a copy.

12. Enter your agency's information in the Agency Contact Information section.
13. The Other section allows you to document if the client received or declined a copy of the document. It also allows you to document how you verified the client's identity as the appropriate person to sign this document.
14. **The Additional information section must be completed** to document the disclosure of certain types of information. The client must opt to either authorize or prohibit each of these specialty types of information.

**Agency Contact Information** 12

Program  Attention

Address

City  State  Zip

Phone

---

**Other** 13

Copy Given to Client  Yes  Declined a copy Agency Staff

ID Verified By  Driver's License  Other Picture ID  Known to Agency

---

**Additional information** 14

**Please note** – The records released may contain alcohol and drug abuse information and/or information about Human Immunodeficiency Virus (HIV), Acquired Immunodeficiency Syndrome (AIDS), and AIDS Related Complex (ARC).

**Alcohol/Drug Abuse:**

I authorize the release of information relating to referral and/or treatment for alcohol and drug abuse.

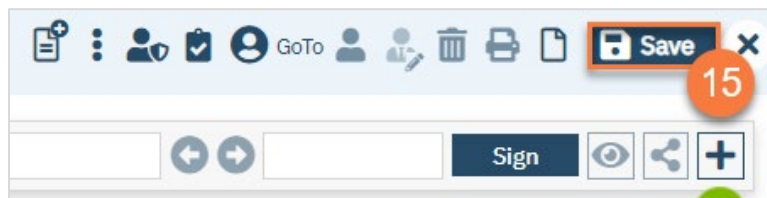
I **PROHIBIT** the release of information relating to referral and/or treatment for alcohol and drug abuse.

**HIV/AIDS/Sexually Transmitted Disease/Communicable Disease**

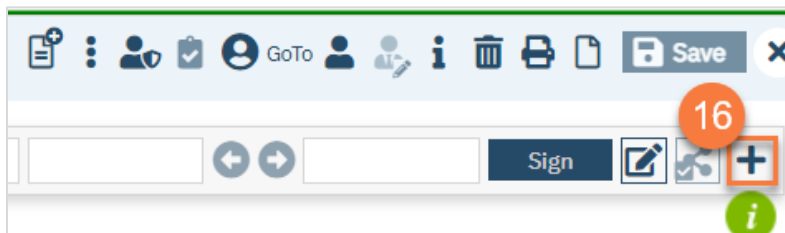
I authorize the release of information relating to HIV/AIDS/sexually transmitted disease/communicable disease.

I **PROHIBIT** the release of information relating to HIV/AIDS/sexually transmitted disease/communicable disease.

15. Click **Sign** to complete and generate the document.

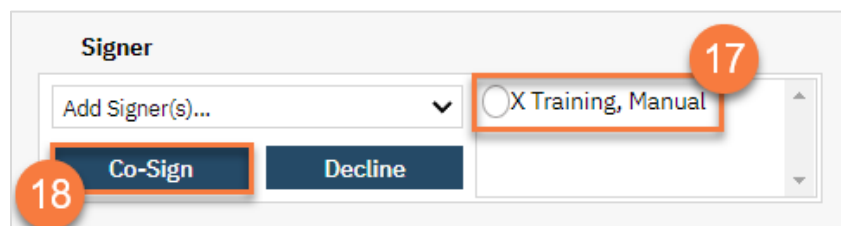


16. This will create the PDF version of the form. Click the **Plus icon** in the upper right corner of the PDF viewer.



17. This opens the signature details. **Select the client and/or guardian from the Signer field.** You will need to select each cosigner one at a time, so repeat these steps as needed.

18. Click **Co-Sign**.

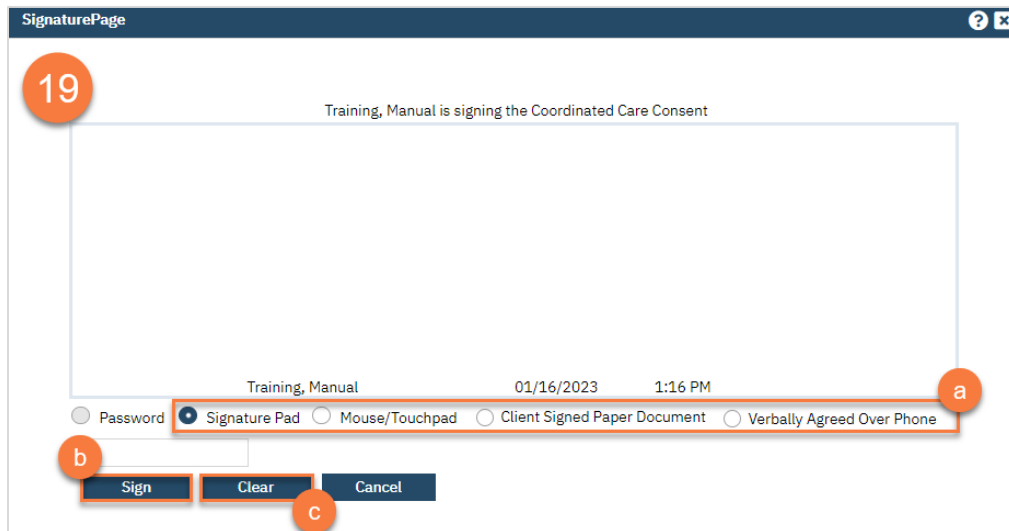


19. This brings up the Signature Page pop-up window. The co-signer can now sign using a signature pad, a mouse, or a touchpad to capture their signature. You can also designate that the client has signed on a paper version of the



document or that they client verbally agreed and was unable to sign. If the client has signed a paper version of the form, that form should be scanned in. See How do I scan a document into the client’s record?

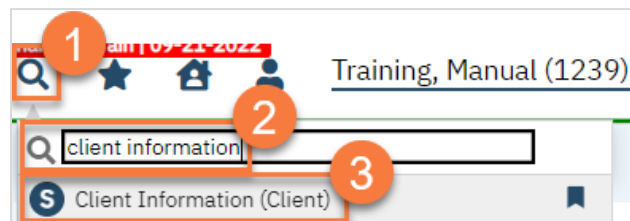
- a. **Select the method of capturing the signature.**
- b. Once the co-signer is happy with their signature, **click the Save button**. If the client has signed a paper version of the form or has agreed verbally and is unable to sign electronically at this point, these are other options.
- c. If the cosigner needs to start over, click the Clear button to erase the current signature.



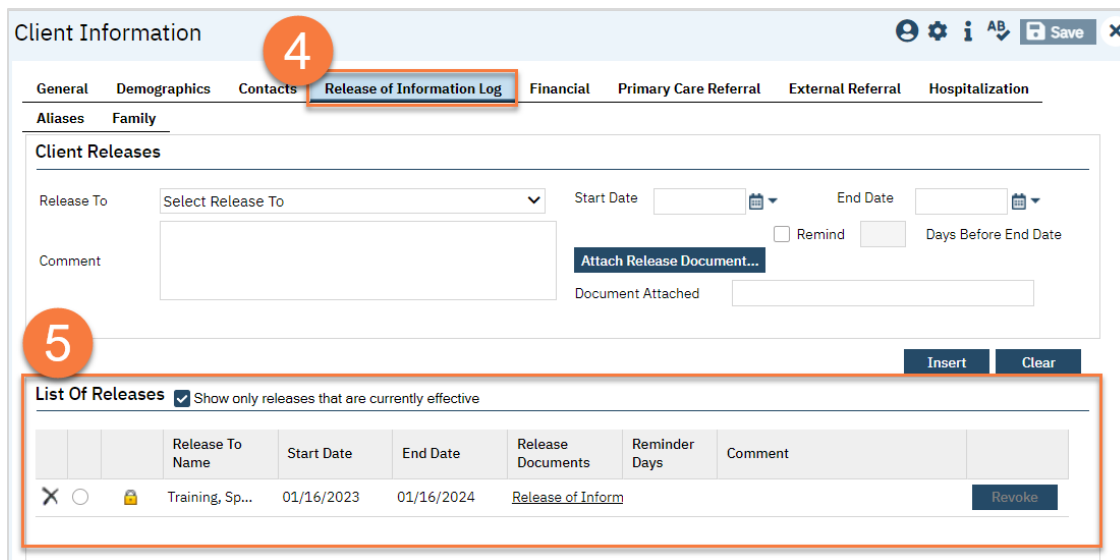
Once signed by all required people, you are finished.

## What do I do if the client wants to revoke a Standard Release of Information/Authorization to Disclose Information?

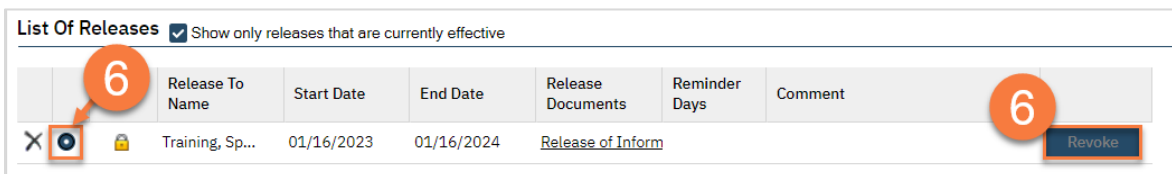
1. With the client open, **click the Search icon**.
2. **Type in “Client Information”** in the search bar.
3. **Select “Client Information (Client)”** from the search results.



4. **Navigate to the Release of Information Log tab.**
5. You can view the current releases on file in the List of Releases section.



6. To revoke an authorization, select it from the List of Releases section, then click the Revoke button.

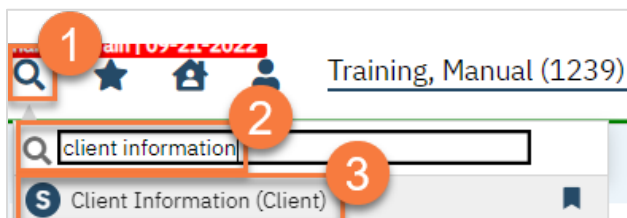


7. BUG – button is currently locked.

## How can I find out what disclosure authorizations the client has signed?

To view the client’s list of current disclosure authorizations on file, open the Client information screen and navigate to the Release of Information Log tab.

1. With the client open, click the Search icon.
2. Type in “Client Information” in the search bar.
3. Select “Client Information (Client)” from the search results.



4. Navigate to the Release of Information Log tab.
5. You can view the current releases on file in the List of Releases section.

Client Information

General Demographics Contacts **Release of Information Log** Financial Primary Care Referral External Referral Hospitalization

Aliases Family

Client Releases

Release To: Select Release To Start Date: End Date:  Remind Days Before End Date

Comment:  Attach Release Document... Document Attached:

Insert Clear

List Of Releases  Show only releases that are currently effective

	Release To Name	Start Date	End Date	Release Documents	Reminder Days	Comment	
X	Training, Sp...	01/16/2023	01/16/2024	Release of Inform			Revoke

## Other Consents

There are multiple types of consents that a client may complete as part of their treatment. SmartCare currently includes the following consent forms:

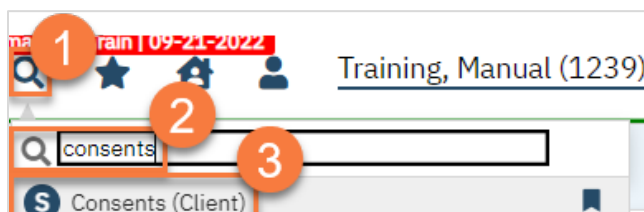
1. Consent to Treat (*sometimes called "Informed Consent"*)
2. Consent to Telehealth
3. Consent to Email Communication
4. Consent to Text Communication

The Consent to Treat includes information about limits of confidentiality, working as a registered associate, privacy practices, and about processes such as the grievance and appeal process.

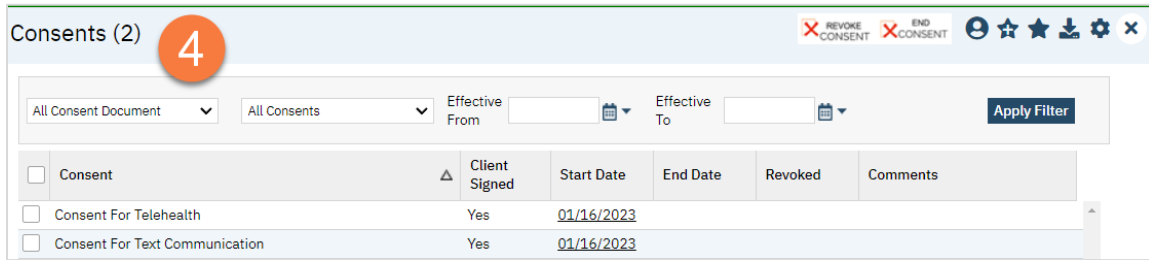
Other consent-like documents, such as Admission Agreements or Advisements are custom for each program. For this reason, these documents are currently done on paper and scanned into the client's chart.

### Where can I see what consents a client has signed?

1. You must first have the client open, **click the Search icon**.
2. **Type "Consents"** into the search bar.
3. **Click to select "Consents (Client)"** from the search results.

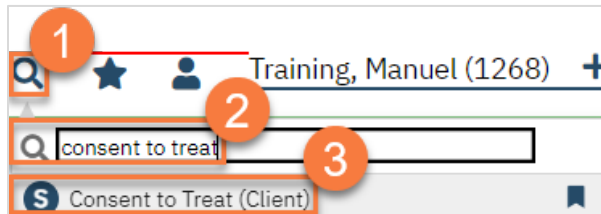


- This brings you to the Consents list page, where you can see what consents the client has on file. To view the document itself, simply click on the document's name to view the PDF version of it. Note: you'll only be able to view consents that are in your CDAG.

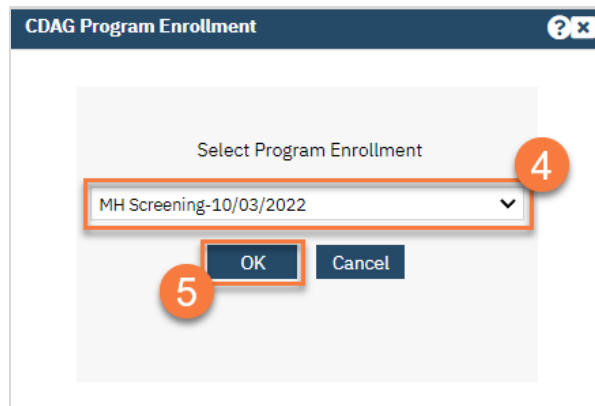


## How do I complete a consent form?

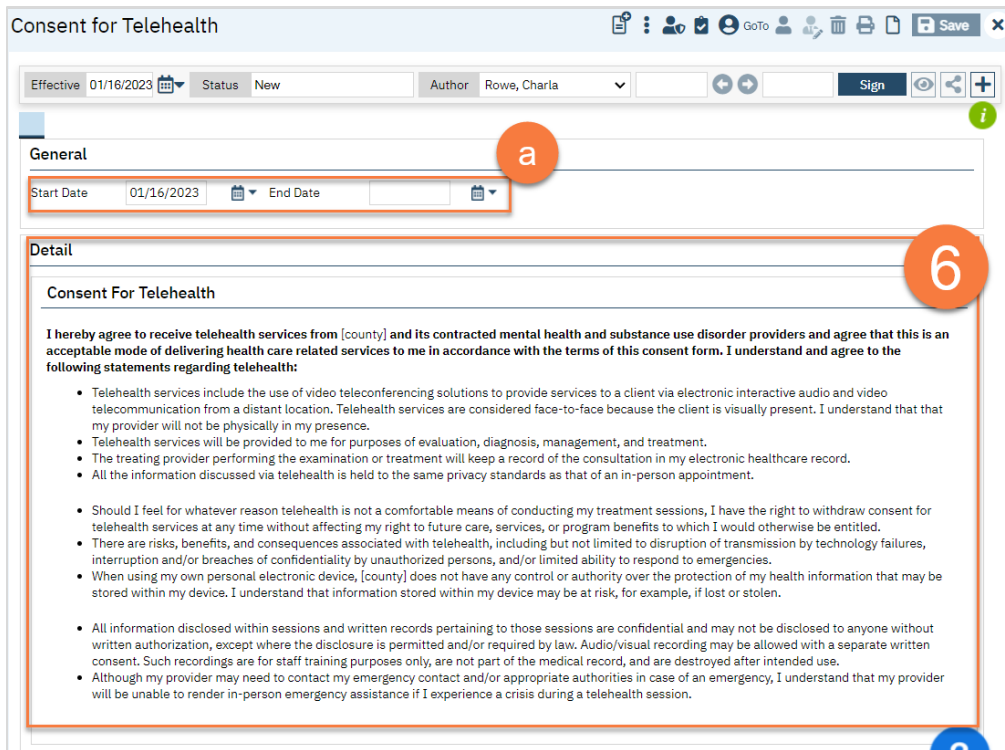
- You must first have the client open, click the Search icon.
- Type the name of the consent into the search bar.
- Click to select the appropriate consent from the search results.



- In the CDAG Program Enrollment window pop-up, click the drop down and click to select the appropriate program.
- Click OK to continue.



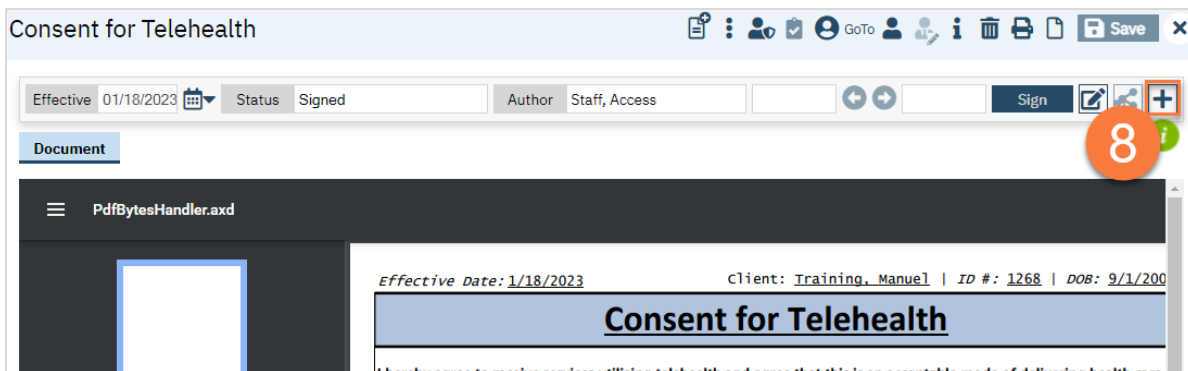
- The consent document will open. **Review the consent with the client.** The example used below is the Consent for Telehealth.
  - There will be a start date and end date field, if needed. The start date will automatically populate with today's date. We recommend leaving the end date blank.



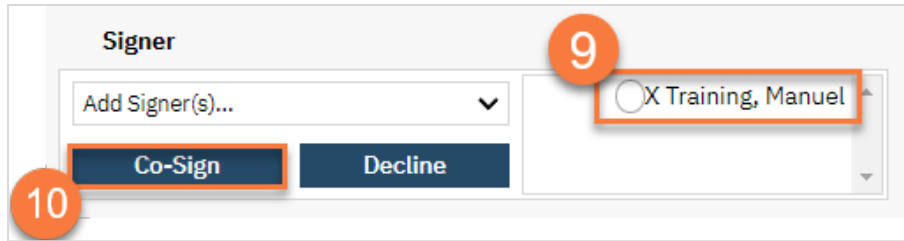
7. Once ready, click Sign.



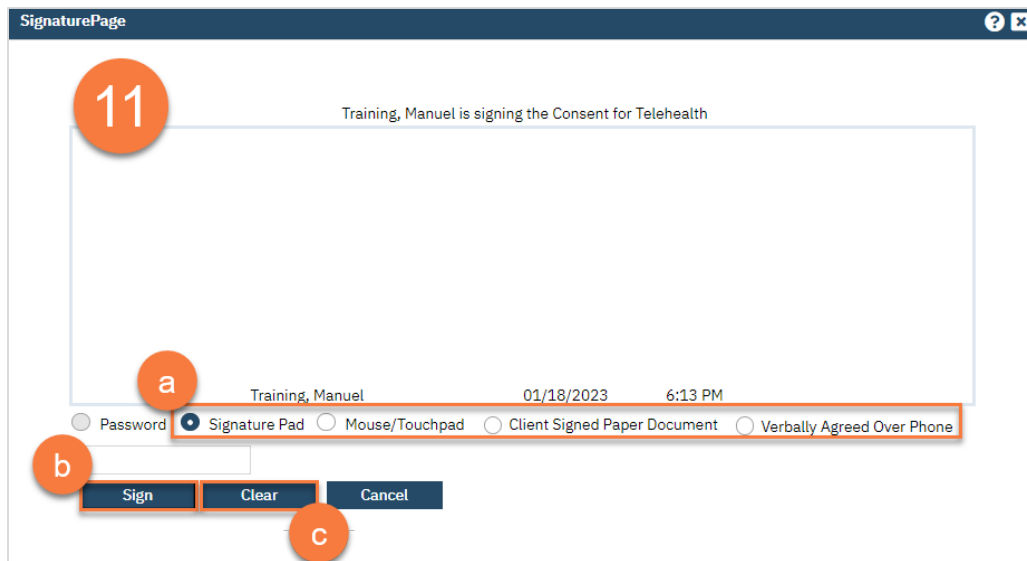
8. This will create the PDF version of the form. Click the Plus icon in the upper right corner of the PDF viewer.



9. This opens the signature details. Select the client and/or guardian from the Signer field. You will need to select each cosigner one at a time, so repeat these steps as needed.
10. Click Co-Sign.



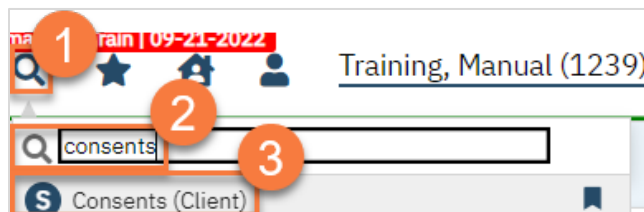
11. This brings up the Signature Page pop-up window. The co-signer can now sign using a signature pad, a mouse, or a touchpad to capture their signature. You can also designate that the client has signed on a paper version of the document or that they client verbally agreed and was unable to sign. If the client has signed a paper version of the form, that form should be scanned in. See How do I scan a document into the client’s record?
  - a. **Select the method of capturing the signature.**
  - b. Once the co-signer is happy with their signature, **click the Sign button**. If the client has signed a paper version of the form or has agreed verbally and is unable to sign electronically at this point, these are other options.
  - c. If the cosigner needs to start over, click the Clear button to erase the current signature.



Once signed by all required people, you are finished.

### **A client wants to revoke a consent. What do I do?**

1. You must first have the client open, **click the Search icon**.
2. **Type “Consents”** into the search bar.
3. **Click to select “Consents (Client)”** from the search results.



4. This brings you to the Consents list page, where you can see what consents the client has on file. To view the document itself, simply click on the document’s name to view the PDF version of it. Note: you’ll only be able to view consents that are in your CDAG.

Consents (2) REVOKE CONSENT END CONSENT

All Consent Document All Consents Effective From Effective To Apply Filter

<input type="checkbox"/>	Consent	Client Signed	Start Date	End Date	Revoked	Comments
<input type="checkbox"/>	Consent For Telehealth	Yes	01/16/2023			
<input type="checkbox"/>	Consent For Text Communication	Yes	01/16/2023			

5. Select the consent you want to revoke.
6. Click the “Revoke Consent” or “End Consent” button.
  - a. Revoking a Consent removes the consent.
  - b. Ending the consent adds an end date to the consent.

Consents (2) REVOKE CONSENT END CONSENT

All Consent Document All Consents Effective From Effective To Apply Filter

<input type="checkbox"/>	Consent	Client Signed	Start Date	End Date	Revoked	Comments
<input type="checkbox"/>	Consent For Telehealth	Yes	01/16/2023			
<input checked="" type="checkbox"/>	Consent For Text Communication	Yes	01/16/2023			

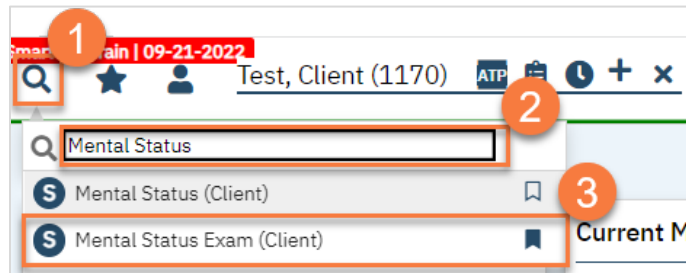
# Clinical Documents

In this section, we'll review the documents that are clinical in nature.

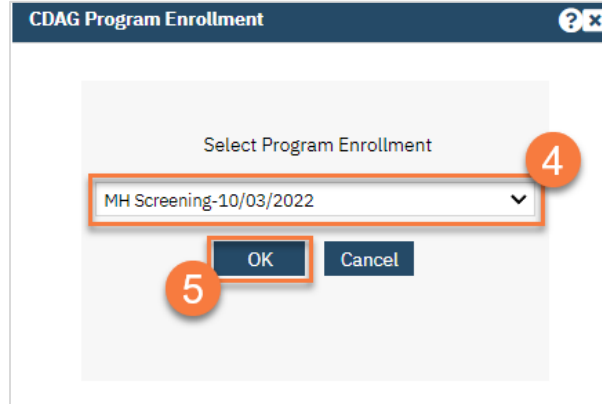
## Mental Status Exam (MSE)

The Mental Status Exam, or MSE, is a document that's often included in other clinical documents as a tab, but the standalone form is also available.

1. You must first have the client open, **click the Search icon**.
2. **Type Mental Status Exam** into the search bar.
3. **Click to select Mental Status Exam (Client)**.



4. In the CDAG Program Enrollment window pop-up, **click the drop down** and **click to select** the appropriate program.
5. **Click OK** to continue.



6. The Mental Status Exam document will open. **Complete the document**. If a previous MSE was completed, it will pull forward the most recent information. Otherwise, all sections will default to "Not Assessed."
  - a. If you did not assess that section, select "Not Assessed." This will lock your ability to check any of the boxes.
  - b. If you find that the person is within normal limits (WNL) for a section, you can simply check the "WNL" radio button at the top of the section. This will lock your ability to check any of the boxes, as this designation covers the requirements.
  - c. Helpful Tip: If the person is within normal limits for all sections, you can select "All Within Normal Limits (WNL)"
  - d. If you assessed a section, select all options that apply. If you select "Other", make sure to complete the text field.



Mental Status Exam 6

Effective 01/20/2023 Status New Author Rowe, Charla Sign Save

**Exam**

**Mental Status Exam** c

All Within Normal Limits (WNL)

---

**Attitude**  Assessed  Not Assessed  Within Normal Limits  Not Clinically Indicated a

Attentive  Evasive  Guarded  Ingratiating  
 Cooperative  Apathetic  Friendly  Hostile  
 Uncooperative  Interested  Indifferent  Belligerent  
 Other

---

**Behaviors**  Assessed  Not Assessed  Within Normal Limits  Not Clinically Indicated b

Appropriate for age  Poor Eye Contact  Hypermotoric  Fidgety  
 Restless  Psychomotor agitation  Psychomotor retardation  Inappropriate mannerisms  
 Inappropriate gestures  Tremor  Tics  Stereotypies  
 Other

---

**General Appearance**  Assessed  Not Assessed  WNL – Appropriately dressed and groomed for the occasion  Not Clinically Indicated d

Poorly dressed  Poorly groomed  Disheveled  Odiferous  Deformities  
 Poor nutrition  Restless  Psychomotor retardation  Hyperactive/intrusive  
 Evasive/distant  Inattentive  Poor eye contact  Hostile  Other

?

- e. Some sections, such as Suicide/Homicide, are single select and must be completed. However, if clicking “None” then the options will mark all as “No” or grey out, depending on the section.
- f. Some sections, including the Suicide/Homicide section, also have a Comments section for you to add more detail.
- g. Some sections, such as orientation, request evidence of the clinician’s determination.

Mental Status Exam

Effective 01/20/2023 Status New Author Rowe, Charla Sign Save

**Exam**

**Abnormal/Psychotic Thoughts**  Assessed  Not Assessed  Not Clinically Indicated

Psychosis/Disturbance of Perception  None  Present (leave items below unchecked if not present)

Auditory hallucinations  Visual hallucinations  Command hallucinations  Delusions  
 Preoccupation w/violence  Olfactory hallucinations  Gustatory hallucinations  
 Tactile hallucinations  Somatic hallucinations  Illusions  Other

---

**Suicide/Homicide**  None  Present e

Current suicide ideation  Yes  No  
 Current suicidal intent  Yes  No  
 Current homicidal ideation  Yes  No  
 Current homicidal intent  Yes  No

Current suicidal plan  Yes  No  
 Means to carry out attempt  Yes  No  
 Current homicidal plans  Yes  No  
 Means to carry out attempt  Yes  No f

Comments

---

**Orientation**  Assessed  Not Assessed  WNL – Oriented to person, place, time, situation  Not Clinically Indicated g

Disoriented to  Person  Place  Time  Situation  Other

---

**As Evidenced by confusion in responses**

How would you describe the situation we are in?  What is your full name?  
 Where are we right now? (city, state, building)  What is the full date today?(date, month, year) and season of the year

- h. There is a section at the very end for additional comments. You can also use this box to summarize the MSE results.
  - i. There is also a Review section. This is for MSEs that are completed frequently. This allows you review the most recent MSE and make minor changes without having to re-enter all the sections. You can select N/A if you started over.
  - j. You can use “Not Clinically Indicated” when you’re completing frequent MSEs and a section does not need to be completed every time.
7. Once completed, **click Sign** to complete and generate the document.

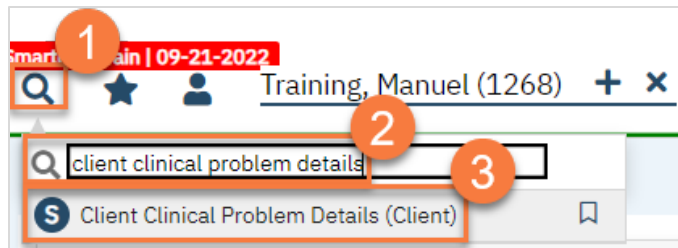
The screenshot shows the 'Mental Status Exam' form. At the top, there is a header with 'Effective' date (01/20/2023), 'Status' (New), and 'Author' (Rowe, Charla). A 'Sign' button is highlighted with a red box and a callout '7'. Below the header, there are three main sections: 'Muscle Strength/Tone', 'Gait and Station', and 'Mental status exam additional comments, Descriptions'. The 'Muscle Strength/Tone' section has radio buttons for 'Assessed', 'Not Assessed' (selected), 'WNL', and 'Not Clinically Indicated', with checkboxes for 'Atrophy', 'Abnormal Movements', and 'Other'. The 'Gait and Station' section has radio buttons for 'Assessed', 'Not Assessed' (selected), 'WNL', and 'Not Clinically Indicated' (highlighted with a red box and callout 'j'), with checkboxes for 'Restlessness', 'Staggered', 'Shuffling', 'Unstable', and 'Other'. The 'Mental status exam additional comments, Descriptions' section is a large text area with a callout 'h'. At the bottom, there is a 'Review' section with radio buttons for 'Review with changes', 'Review with no changes', and 'N/A' (callout 'i'). A blue question mark icon is in the bottom right corner.

## Problem List

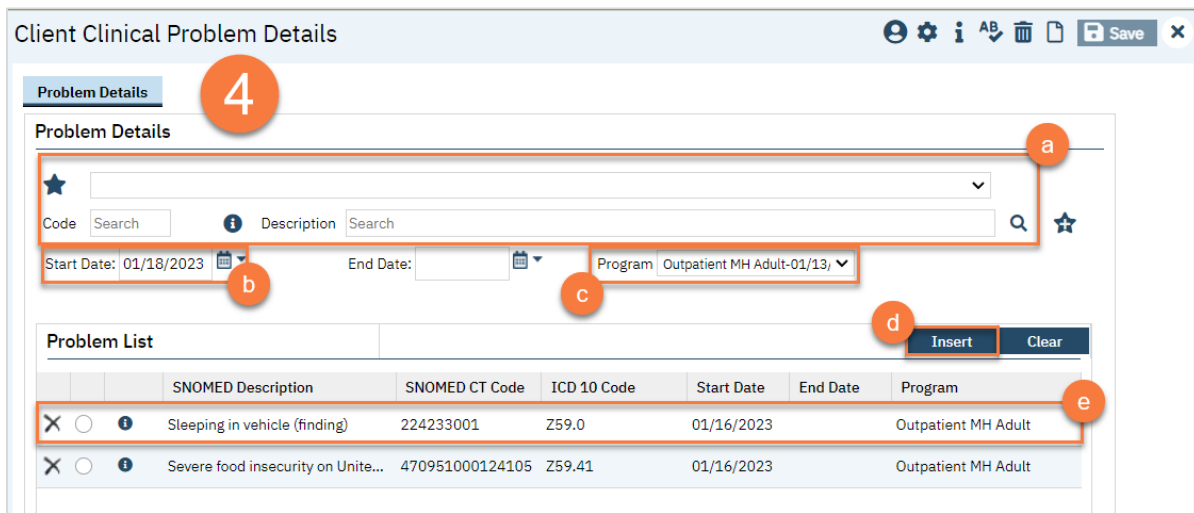
The Problem List is a module that is embedded in multiple documents in the system. For example, it’s included in the CalAIM Assessment and most progress notes. These are all connected, so if you add a problem from one document, it will add it to the overarching Problem List and will therefore be available when you open a different document. You can also open the Problem List in a standalone manner. The Problem List is a living document, so information should not be deleted unless entered in error. You will only be able to see problems within your CDAG if the client has not signed a Coordinated Care Consent.

### How do I add a problem to the Problem List?

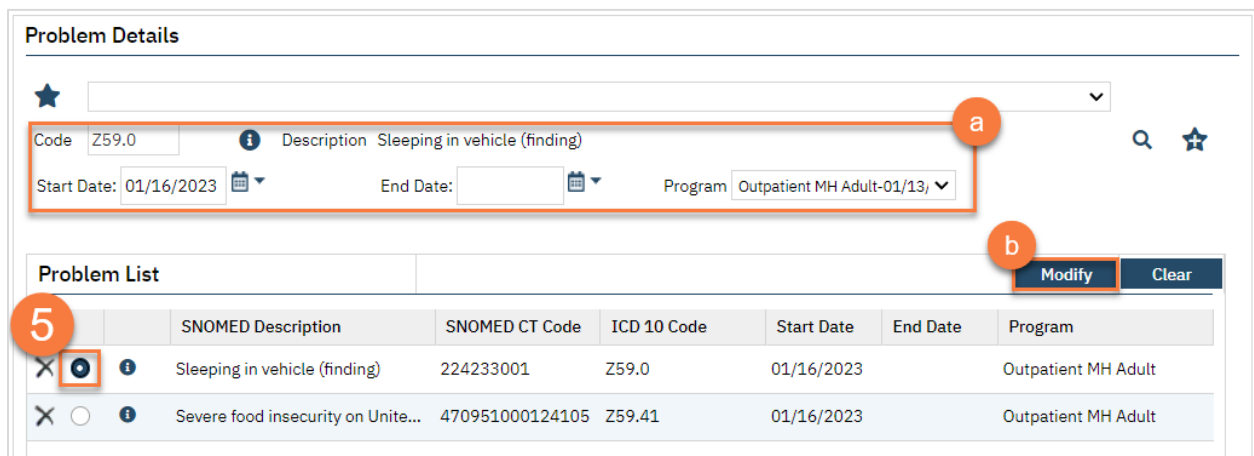
1. You must first have the client open, then **click the Search icon**.
2. **Type Problem** into the search bar.
3. **Click to select Client Clinical Problem Details (Client)**.



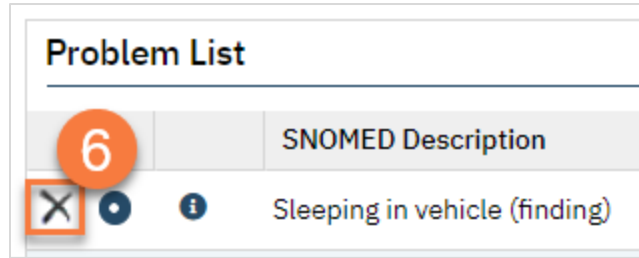
4. This brings you to the Client Clinical Problem Details screen. Add a problem using the steps below. You can enter as many problems as you need to.
  - a. **Search for the problem** using the ICD-10 code, or the DSM-5 code. You can also search by typing in the Description field. You can also select from your favorites by clicking on the dropdown.
  - b. **Enter the start date** of the problem. This is the date the problem started, not the date you were made aware of the problem.
  - c. **Select your program** from the dropdown menu.
  - d. **Click Insert.**
  - e. This will add it to the Problem List section.



5. If you made a mistake, you can select an item from the Problem List.
  - a. This brings the information to the top part of the screen. **Make your edits.**
  - b. When finished, **click Modify.**



- If you need to simply delete a problem that was added in error, click the Delete icon next to the appropriate problem in the Problem List section.

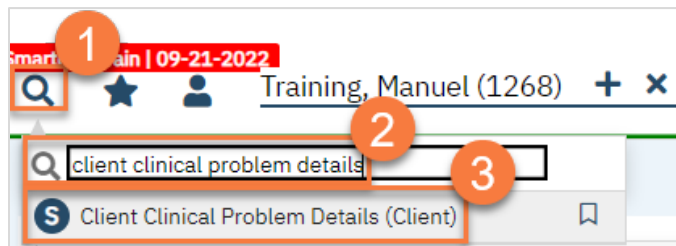


- When you're finished, Click Save.

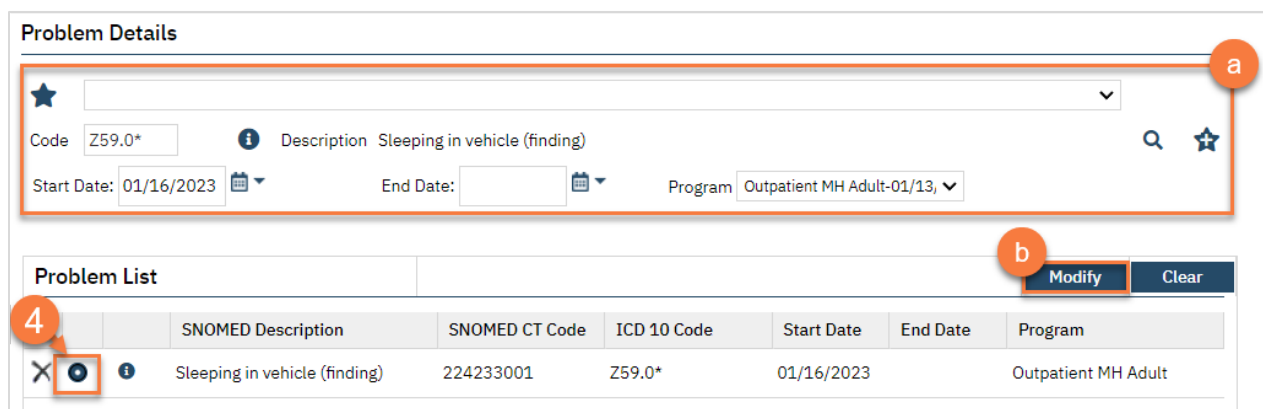


## How do I remove a problem that's been resolved?

- You must first have the client open, then click the Search icon.
- Type **Problem** into the search bar.
- Click to select **Client Clinical Problem Details (Client)**.



- This brings you to the Client Clinical Problem Details screen. To remove a problem that's been resolved, **select the item from the Problem List section**.
  - This brings the information to the top part of the screen. **Add an end date**. The end date should be when the problem was resolved, not the date you learned the problem was resolved.
  - When finished, **click Modify**.

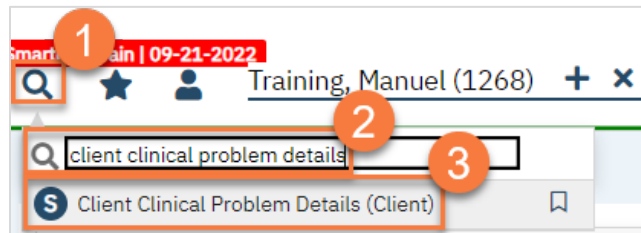


12. When you're finished, Click Save.

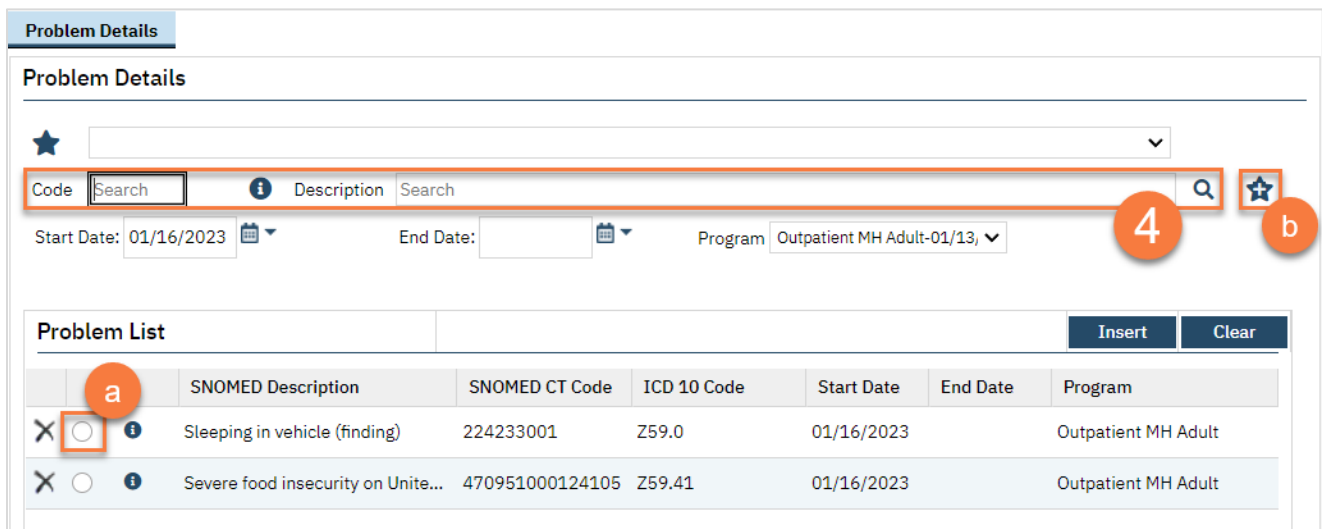


## How do I add favorites to my Problem List screen?

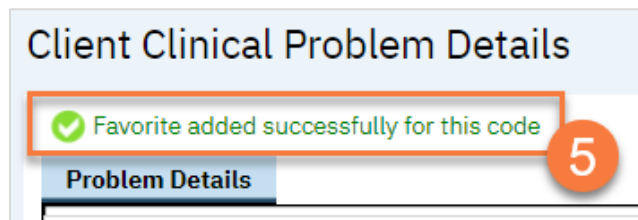
1. You must first have the client open, then click the Search icon.
2. Type Problem into the search bar.
3. Click to select Client Clinical Problem Details (Client).



4. This brings you to the Client Clinical Problem Details screen. Search for the problem you want to add.
  - a. If it's already in the problem list, you can also select it from the Problem List section.
  - b. Click the Add Favorite icon.

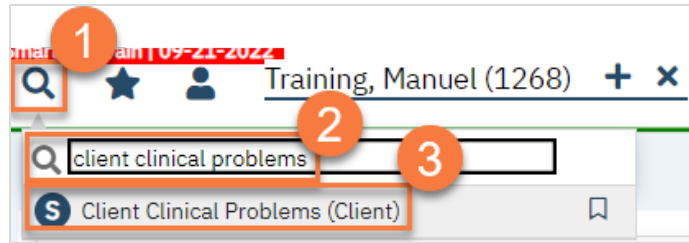


5. You'll see a notification at the top of the screen letting you know it's been added to your favorites.

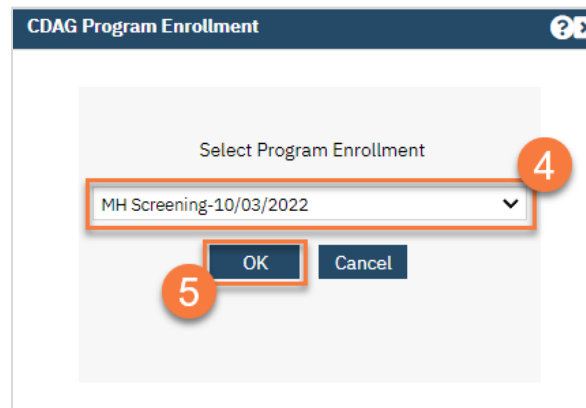


## I want to be able to sort through the client's problem list, rather than seeing just the current information. How do I do that?

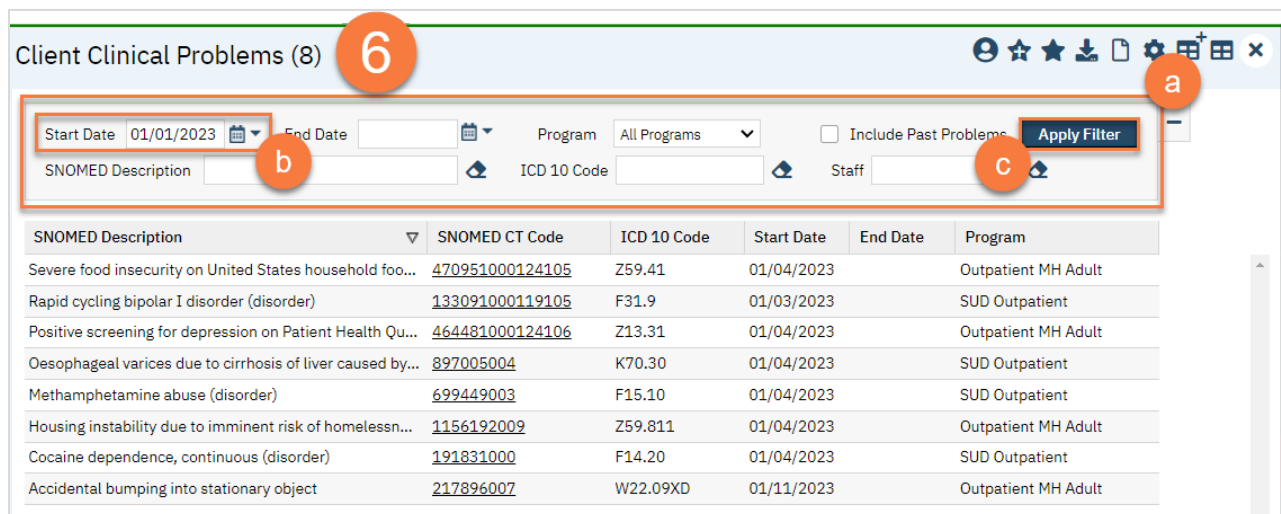
1. You must first have the client open, then click the Search icon.
2. Type Problem into the search bar.
3. Click to select Client Clinical Problems (Client).



4. In the CDAG Program Enrollment window pop-up, click the drop down and click to select the appropriate program.
5. Click OK to continue.



6. This takes you to the Client Clinical Problems list page.
  - a. Use the filters at the top to find what you're looking for.
  - b. Start Date is required.
  - c. After entering in your filters, you'll need to click "Apply Filter".

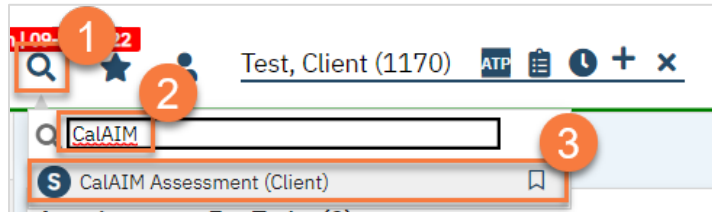


## CalAIM Assessment

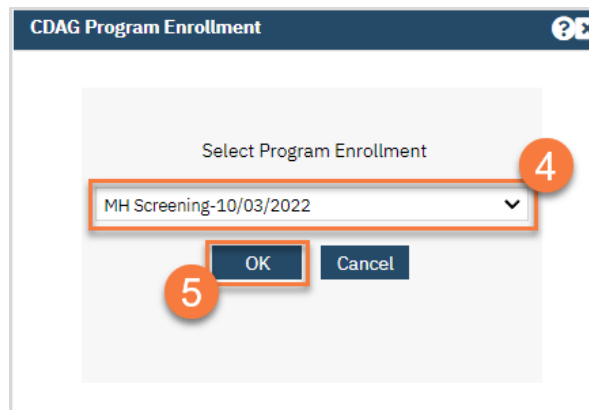
The CalAIM Assessment is the new 7-domain assessment that DHCS initialized in July 2022. Please reference the CalMHSA [Documentation Guides](#) for more details on what clinical information should be included. In SmartCare, it also includes the Problem List module, allowing you to add problems directly from the assessment.

How to complete a CalAIM Assessment:

1. You must first have the client open, **click the Search icon**.
2. **Type CalAIM Assessment** into the search bar.
3. **Click to select CalAIM Assessment (Client)**.



4. In the CDAG Program Enrollment window pop-up, **click the drop down** and **click to select** the appropriate program.
5. **Click OK** to continue.



6. The CalAIM Assessment document will open. **Complete the document**. All 7 domains are required.

CalAIM Assessment

Effective 12/22/2022 Status New Author Clinician, Robert Sign

**General**

6

Domain 1: List/Describe Presenting Problem(s), Current Mental Status, History of Presenting Problem(s) and Client-Identified Impairment(s)

Domain 2: List/Describe Trauma - Indicate N/A if not applicable.

Domain 3: List/Describe Behavioral Health History and Comorbidity

Domain 4: List/Describe Medical History, Current Medications, Medication History, and Comorbidity with Behavioral Health.

Domain 5: List/Describe Social and Life Circumstances and Culture/Religion/Spirituality

Domain 6: List/Describe Strengths, Risk Behaviors, and Safety Factors

Domain 7: List/Describe Clinical Summary and Recommendations, Diagnostic Impression, and Medical Necessity Determination/Level of Care/Access Criteria.

7. **Add problems to the Problem List as desired.** See Problem List section for more information on how to complete the Problem List in SmartCare.
8. **Click Sign** to complete and generate the document.

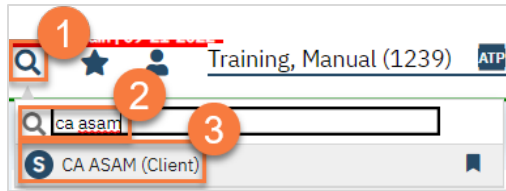


## ASAM Assessment

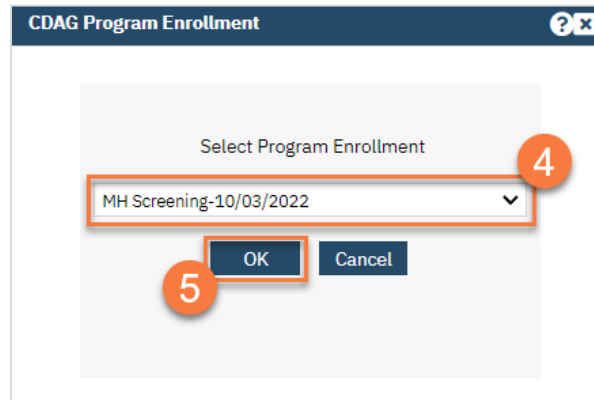
The American Society of Addiction Medicine (ASAM) has created an assessment that they simply call the ASAM Criteria. Generally, this assessment is usually just shortened to “ASAM” in the substance use treatment world. In SmartCare, the form is called “CA ASAM” to represent that this is the form the California SmartCare customers are using.

There are many different interview questions that providers use to determine the ASAM Criteria results. CalMHSA is not currently including interview questions in the EHR, as many are cumbersome and lengthy. If your county has a recommended ASAM Interview Tool, feel free to use it. DHCS also has a free ASAM Interview Tool that’s available on their website. To complete the CA ASAM, follow the steps below.

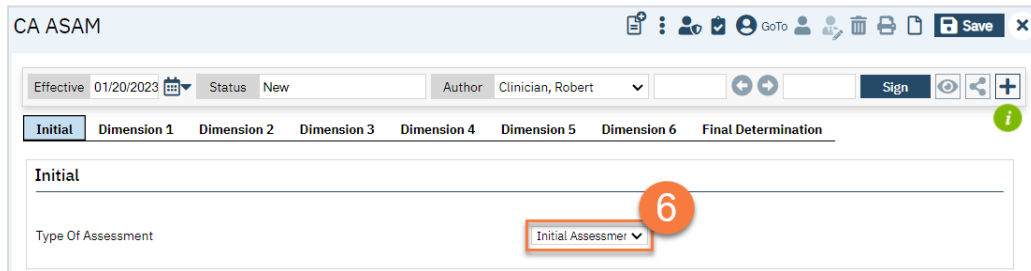
1. You must first have the client open, **click the Search icon**.
2. **Type “CA ASAM”** into the search bar.
3. **Click to select CA ASAM (Client)** from the search results.



4. In the CDAG Program Enrollment window pop-up, **click the drop down** and **click to select** the appropriate program.
5. **Click OK** to continue.



6. The ASAM document will open. In the Initial tab, **enter the type of assessment** this is.



7. **Complete each Dimension tab.**
  - a. Each will have a section for you to **enter the risk level**.
  - b. This will auto-populate the level in the General section of the tab.
  - c. **Enter the documented risk** (low, moderate, or high).
  - d. **Enter your comments**.

8. **Navigate to the Final Determination tab.** This will pull in the information you entered in all the dimension tabs, including your comments. **Enter the Final Placement Determination.**

- a. **Enter the Indicated/Referred Level.** This is the level you think the client needs, based on ASAM criteria.
  - b. **Enter the Provided Level.** This is the level you actually referred the client to.
  - c. **Enter your comments,** including a justification if there is a discrepancy between the indicated level and the provided level.
9. **Click Sign** to complete and generate the document.

CA ASAM

Effective 01/20/2023 Status New Author Clinician, Robert Sign

Initial Dimension 1 Dimension 2 Dimension 3 Dimension 4 Dimension 5 Dimension 6 **Final Determination**

**Final Determination**

**Dimension 1** Level 0.5 Risk: Low  
some risk

**Dimension 2** Level 2.5 Risk: Moderate  
some risk

**Dimension 3** Level 3.3 Risk: Moderate  
some

**Dimension 4** Level 1 Risk: Moderate  
low

**Dimension 5** Level 2.5 Risk: Low  
dimension 5

**Dimension 6** Level 3.1 Risk: Moderate  
dimension 6

**Final Placement Determination**

Indicated/Referred Level  
Provided Level  
Comments

a b c ?

## Child and Adolescent Needs and Strengths (CANS) Tool

The Child and Adolescent Needs and Strengths tool, or CANS, is required for youth mental health clients ages 6-20.

10. You must first have the client open, **click the Search icon**.
11. **Type CANS** into the search bar.
12. **Click to select California CANS (Client)**.

109 22

Test, Client (1170) ATP

Search icon 1

Search bar: cans 2

Search results: 3

- CANS Reporting Record Summary List Page (My Office)
- California CANS (Client)

13. In the CDAG Program Enrollment window pop-up, **click the drop down** and **click to select the appropriate program**.
14. **Click OK** to continue.

CDAG Program Enrollment

Select Program Enrollment

MH Screening-10/03/2022

OK Cancel

4 5

15. The CANS document will open. **Complete the general information** about the CANS in the Initial tab.
  - a. **Enter the date of the assessment.** This auto-populates to today's date, but may be changed as necessary.
  - b. **Select the Assessment type.**
  - c. **Enter your program.**
  - d. If you're entering the CANS as a proxy for someone else, you may also change the Assessor field.
  - e. Enter the client's grade.
  - f. If the client does not have a caregiver, check the box. This will hide the Caregiver Resources tab.

California CANS

Effective: 01/18/2023 | Status: New | Author: Staff, Access | Sign

**6** Initial | General Domains (6-24) | Trauma/Transition | Caregiver Resources

**General**

Date of Assessment: 1/18/2023 **a** | DOB: 09/01/2002 **b** | Age: 20

Assessment Type:  Initial  Reassessment  Discharge  Administrative Close  Urgent

Assessor: Staff, Access **d** | Program: **c** | Grade: **e**

Youth has no known caregiver. Skip Caregiver Resources and Needs Domain. **f**

16. **Navigate to the General Domains** tab and complete the CANS tool.
  - a. If this is not an initial assessment, the most recent CANS scores will show to provide you with additional information.

California CANS

Effective: 1/18/2023 | Status: New | Author: Staff, Access | Sign

Initial | **7** General Domains (6-24) | Trauma/Transition | Caregiver Resources

**Life Functioning Domain**

0 = No evidence  
1 = History or suspicion; monitor  
2 = Interferes with functioning; action needed  
3 = Disabling, dangerous; immediate or intensive action needed

Item	0	1	2	3	Previous Rating
Family Functioning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Living Situation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Social Functioning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Developmental/Intellectual	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Decision Making	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
School Behavior	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
School Achievement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
School Attendance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Medical/Physical	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Sexual Development	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Sleep	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Legal	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Recreational	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Independent Living Skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	

**a** (points to Previous Rating column)

- b. At the end of each section is a comment box for your clinical notes.

Legal	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Recreational	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Independent Living Skills	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**b**

**Life Functioning Domain Description**

Please write a rationale for any item in the above domain or module

17. Navigate to the Trauma/Transition and complete this section.

California CANS GoTo  Save

Effective: 01/18/2023 **8** Progress  Author: Staff, Access

**Initial**   **General Domains (6-24)**   **Trauma/Transition**   **Caregiver Resources**

**Potentially Traumatic/Adverse Childhood Experiences - Lifetime Exposure.**

NO = No evidence of any trauma of this type      YES = Exposure/experienced a trauma of this type

Item	No	Yes
Sexual Abuse	<input type="radio"/>	<input type="radio"/>
Physical Abuse	<input type="radio"/>	<input type="radio"/>
Neglect	<input type="radio"/>	<input type="radio"/>
Emotional Abuse	<input type="radio"/>	<input type="radio"/>
Medical Trauma	<input type="radio"/>	<input type="radio"/>
Natural or Manmade Disaster	<input type="radio"/>	<input type="radio"/>
Witness to Family Violence	<input type="radio"/>	<input type="radio"/>
Witness to Community/School Violence	<input type="radio"/>	<input type="radio"/>
War/Terrorism Affected	<input type="radio"/>	<input type="radio"/>
Witness/Victim of Criminal Acts	<input type="radio"/>	<input type="radio"/>
Parental Criminal Behavior	<input type="radio"/>	<input type="radio"/>
Disruption in Caregiving/Attachment Losses	<input type="radio"/>	<input type="radio"/>

Please write a rationale for any item in the above domain rated 'Yes'

18. If available, navigate to the Caregiver Resources tab and complete this section.

California CANS

Effective 01/18/2023 Status In Progress Author Staff, Access Sign

Initial General Domains (6-24) Trauma/Transition **Caregiver Resources**

**Caregiver Resources**

0 = No evidence; this could be a strength  
 1 = History or suspicion; monitor; may be an opportunity to build  
 2 = Interferes with functioning; action needed  
 3 = Disabling, dangerous; immediate or intensive action needed

**Caregiver Resources and Needs**

**Caregiver 1**

Caregiver Name Last Name, First Name Relationship

Item	0	1	2	3	Previous Rating
Supervision	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Involvement with Care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Knowledge	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Social Resources	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Residential Stability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Medical/Physical	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Mental Health	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Substance Use	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Developmental	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	

- a. You can add multiple caregivers by clicking on the “Add Caregiver” link at the bottom of the page.

**Family Stress**

Please write a rationale for any item in the above domain or module

[Add Caregiver](#)

19. Click **Sign** to complete and generate the document.

Save

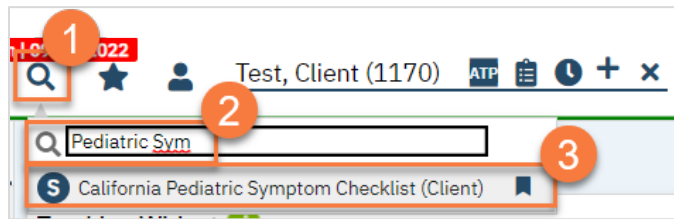
Sign

## Pediatric Symptom Checklist (PSC)

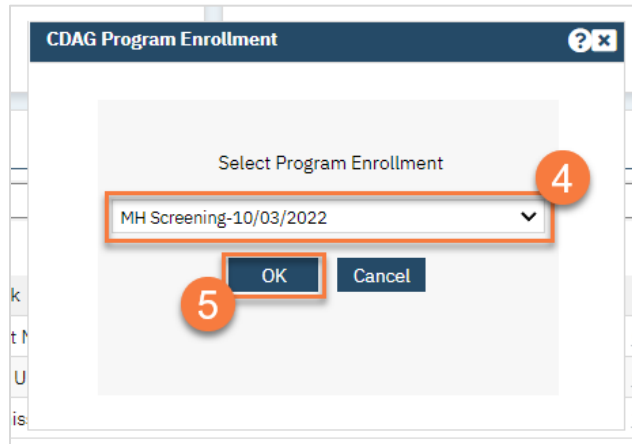
The Pediatric Symptom Checklist, or PSC or PSC-35, is required for youth mental health clients ages 0-18.

1. You must first have the client open, **click the Search icon**.
2. **Type Pediatric Symptom Checklist** into the search bar.

3. Click to select California Pediatric Symptom Checklist (Client).



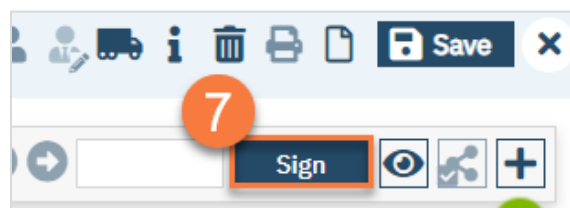
4. In the CDAG Program Enrollment window pop-up, click the drop down and click to select the appropriate program.
5. Click OK to continue.



6. The PSC document will open. **Complete the document.** The PSC-35 is a form that is completed by the youth's caregiver. This may be done on paper and entered into this document for better tracking. You may also want to scan in the paper version the guardian completed. If so, see How do I scan a document into the client's record?

[screenshot]

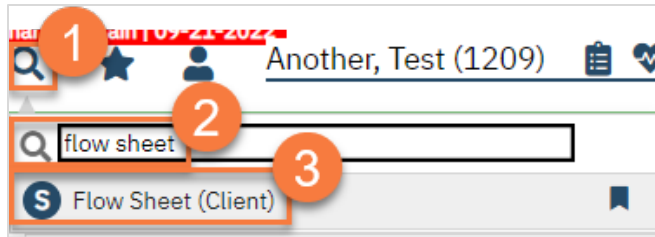
7. Click **Sign** to complete and generate the document.



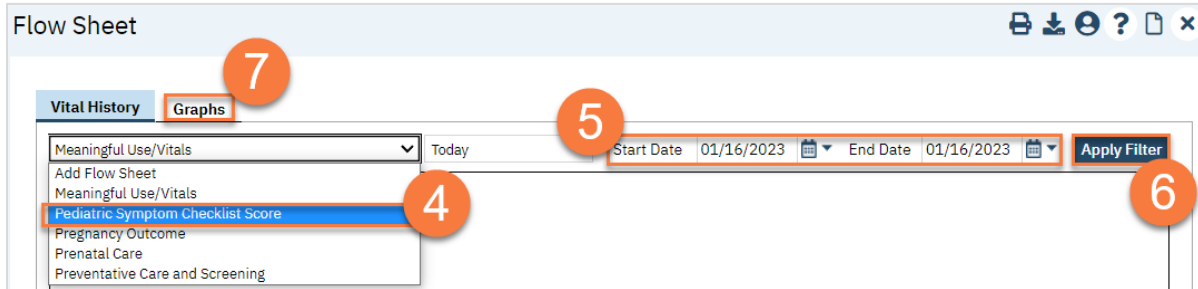
### **How do I view the PSC scores over time?**

1. Have the client open. Click on the Search icon.
2. Type "Flow Sheet" in the search bar.
3. Select "Flow Sheet (Client)" from the search results.





4. This takes you to the Flow Sheets page. **Select the Pediatric Symptom Checklist Score** from the dropdown menu.
5. **Select your start and end dates** that you'd like to see.
6. **Click Apply Filter.**
7. You can also view this information in graphical form by clicking on the Graphs tab.



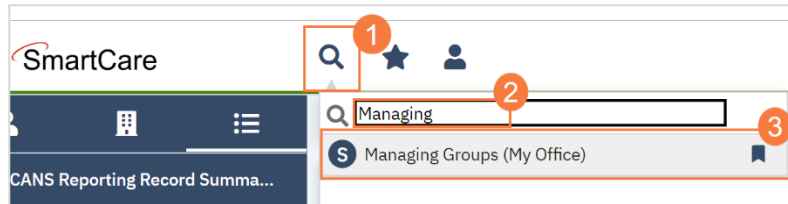
# Group Documentation

Introduction to group documentation will go here...

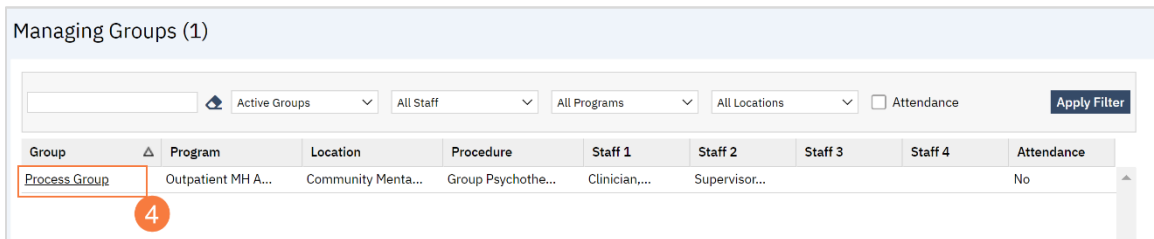
## How to Add a New Client to a Group

To add a new client to a Group, follow the steps below:

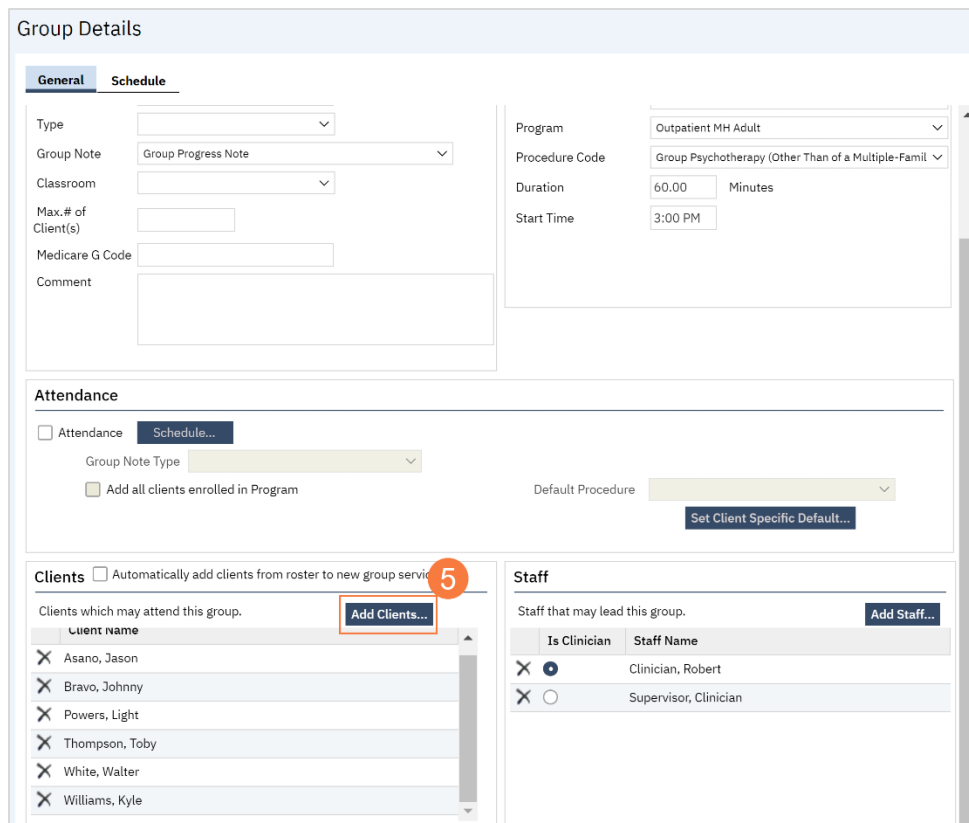
1. Click the Search icon.
2. Type **Managing** into the search bar.
3. Click to select **Managing Groups (My Office)**.



4. Click to select the **Process Group** you will be adding the client to.



5. Locate the Client section towards the bottom of the Group Details screen. Click **Add Clients**.



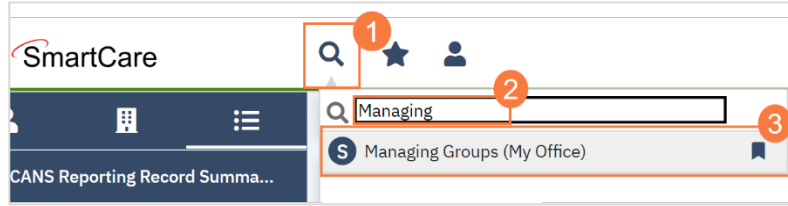
6. The Client Search window will open, **click in the Last Name and First Name fields** to enter the corresponding information. **Select Enter** on your Keyboard to populate search results.
  - a. You can also use the Other Search Strategies fields to search by SSN, DOB, etc.
7. **Click the radio button** to left of the client you want to select.
8. **Click Select and Close.** This client will be added to the group.

9. **Click Save.** Click the X to close the screen.

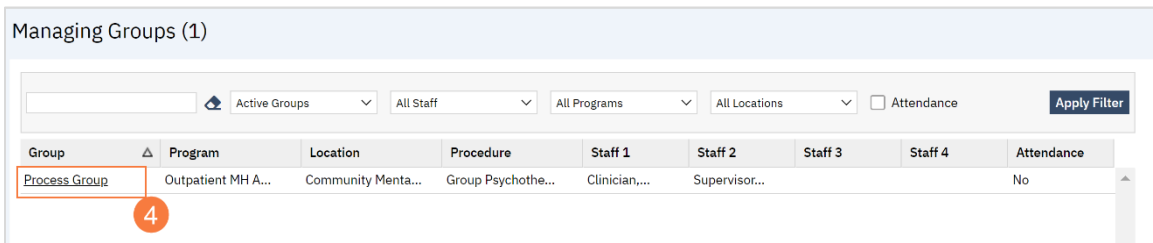
# How to Add or Change a Staff Member in a Group

To add or change a staff member in a group, follow the steps below:

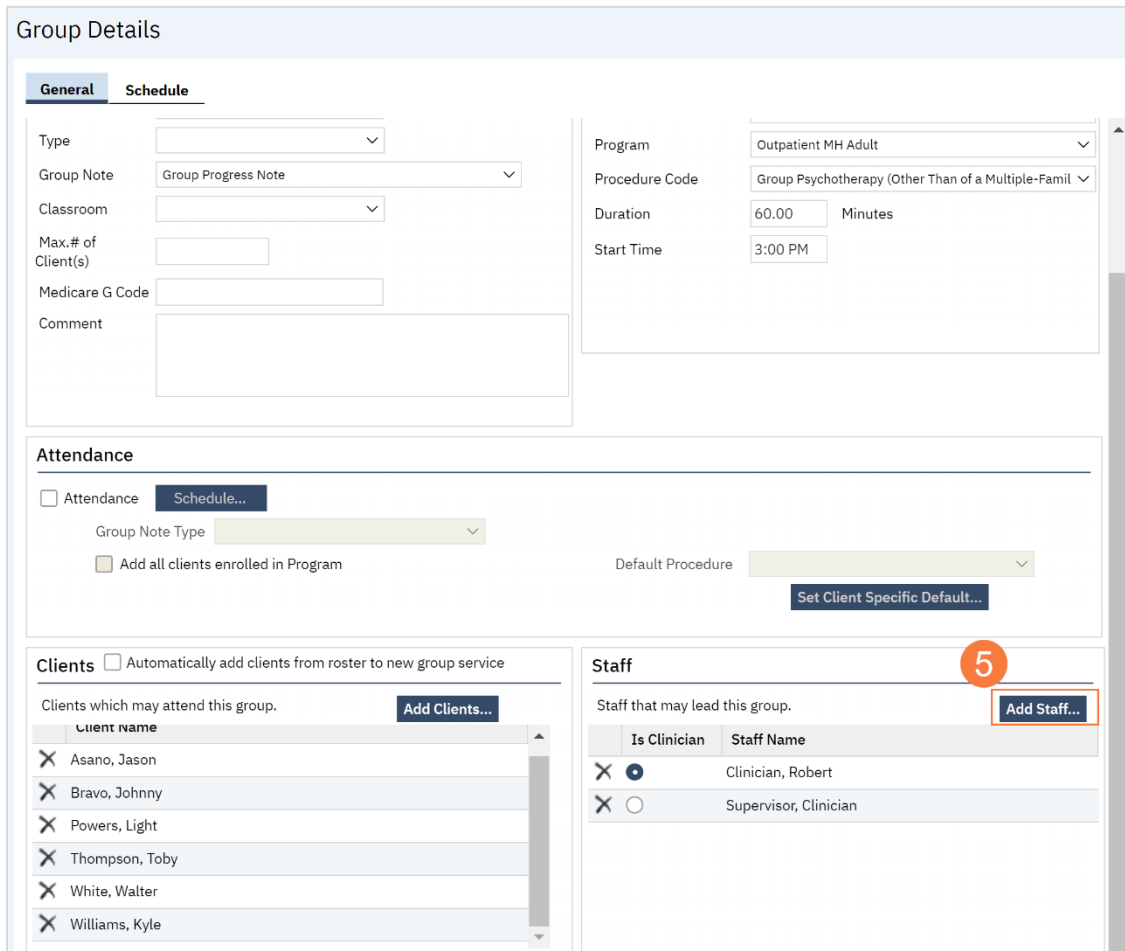
1. Click the Search icon.
2. Type **Managing** into the search bar.
3. Click to select **Managing Groups (My Office)**.



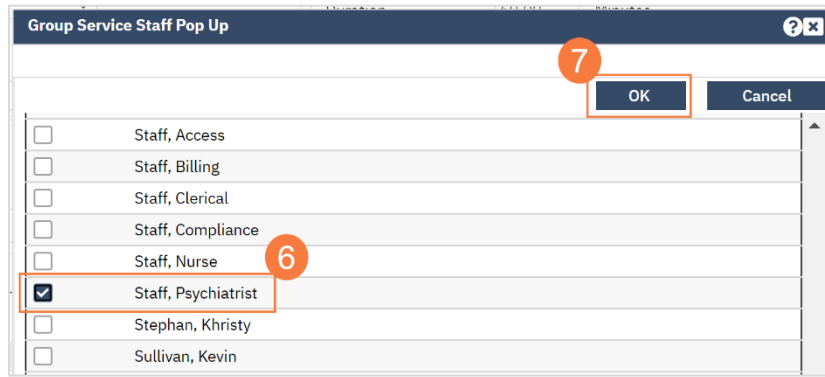
4. Click to select the **Process Group** you will be adding the client to.



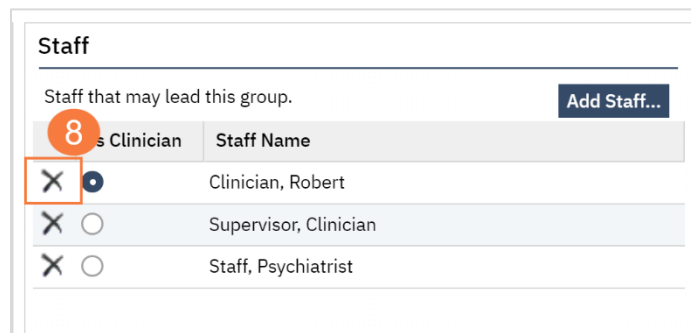
5. Locate the Staff section towards the bottom of the Group Details screen. Click **Add Staff**.



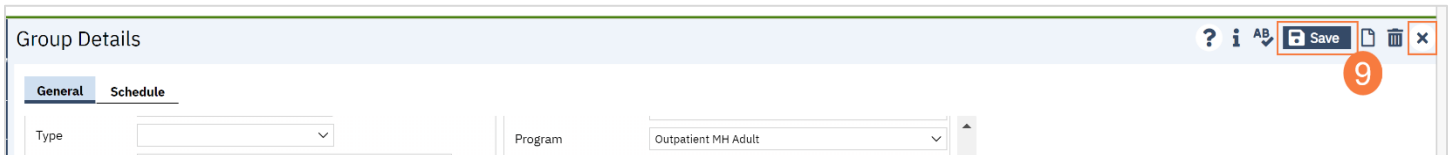
6. Click to select the correct staff member to add.
7. Click OK.



8. And/or, if you need to remove a staff member, click the X to the left of the staff member you want to remove.



9. Click Save. Click the X to close the screen.



## How do I write a group progress note?

6. On your Appointments for Today widget, click on the link for the time of the group you're documenting.

screenshot

7. This opens the Group Services Detail screen. In the upper left, you'll see the group information. Confirm the information and **add any additional information regarding the entire group.**

Group Service Detail

Service Note

Group

Group Process Group Group Comment

Date 01/19/2023

Location Community Mental Health ( ) Specific Location

Status Show

Evidence Based Practices

Staff

Staff Name	Unit	Type	Start	End
X Clinician, Ro..	60	Minutes	2:00 PM	3:00 PM
X Supervisor, C..	60	Minutes	2:00 PM	3:00 PM

Clients

Asano, Jason

Bravo, Johnny

Childers, Cindy

Powers, Light

Test, Patient

Tommy, Max

White, Walter

Williams, Kyle

Service Information

Procedure Group Psychotherapy (Other Than of a t) Set All Set Some

Start 2:00 PM Total Duration 60.00 Minutes Set All Set Some

Status Show Set All Set Some

Cancel Reason Set All Set Some

Program Outpatient MH Adult Set All Set Some

Clinician Clinician, Robert Set All Set Some

Attending Set All Set Some

Mode Of Delivery Set All Set Some

Billable  Set All Set Some

Transportation Service No Set All Set Some

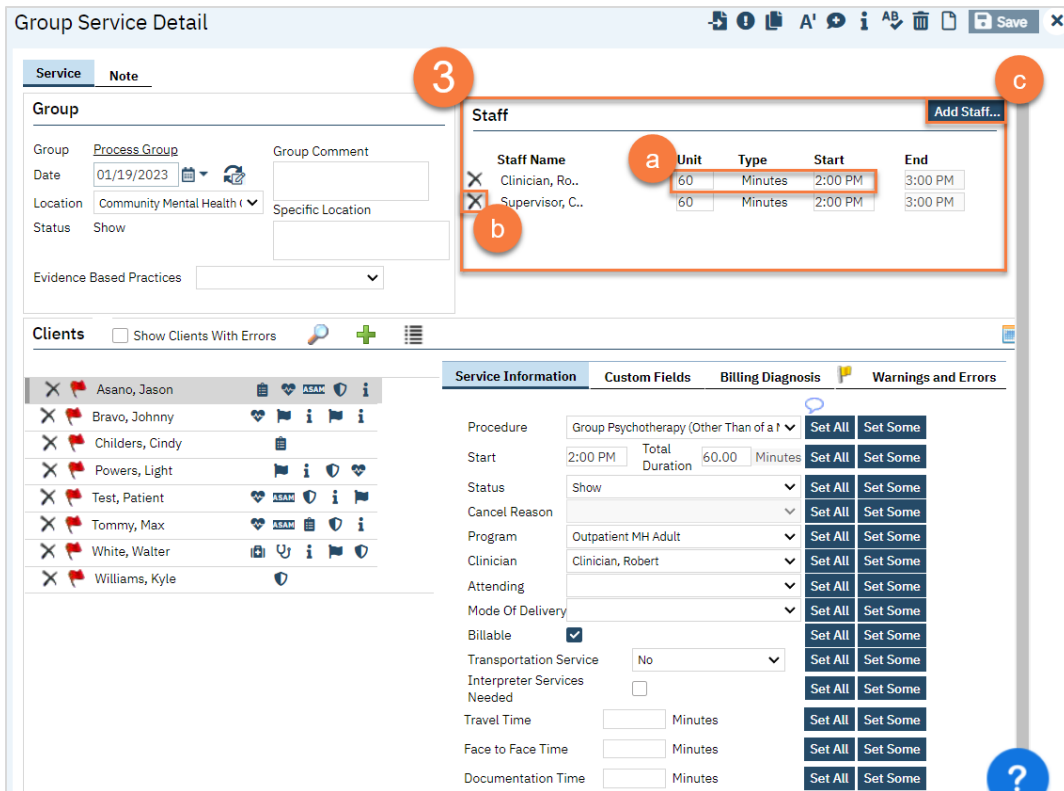
Interpreter Services Needed  Set All Set Some

Travel Time Minutes Set All Set Some

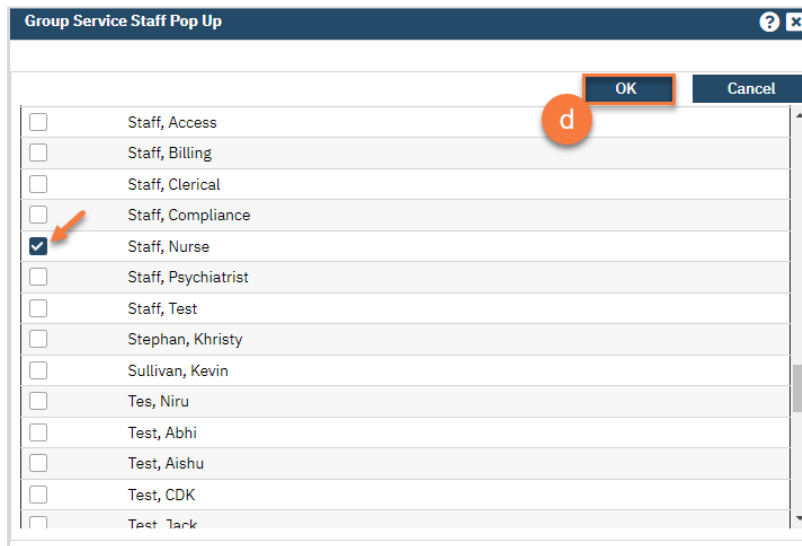
Face to Face Time Minutes Set All Set Some

Documentation Time Minutes Set All Set Some

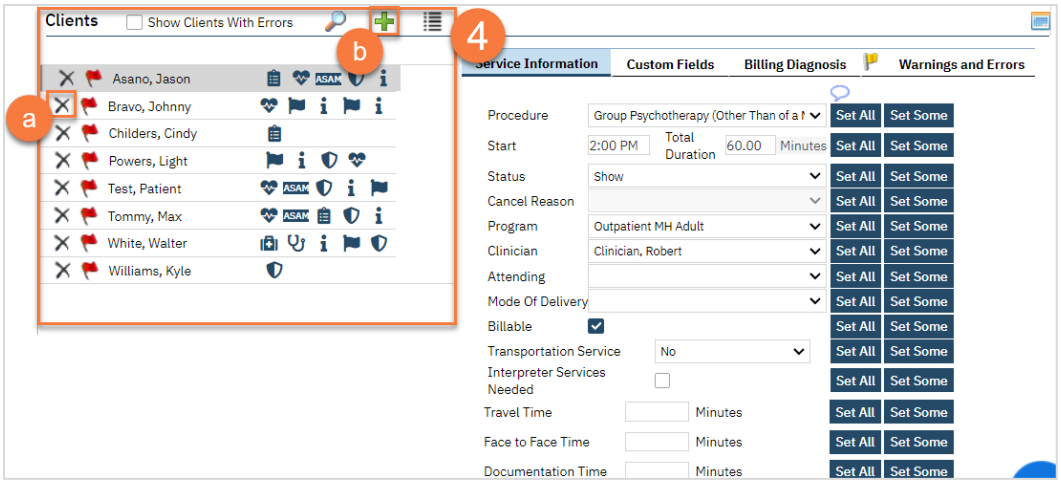
8. In the upper right, you'll see the staff members that are set as facilitators for this group.
  - a. **Make edits to which staff members were present.** For example, if a staff was only present for half of the group time, indicate this by editing the Unit (how many minutes they were present) and the Start Time to match what actually happened.
  - b. **If a staff member was not present, click the Delete icon** next to their name to remove them from this service.
  - c. **If an additional staff member was present who is not listed, click the Add Staff button.**



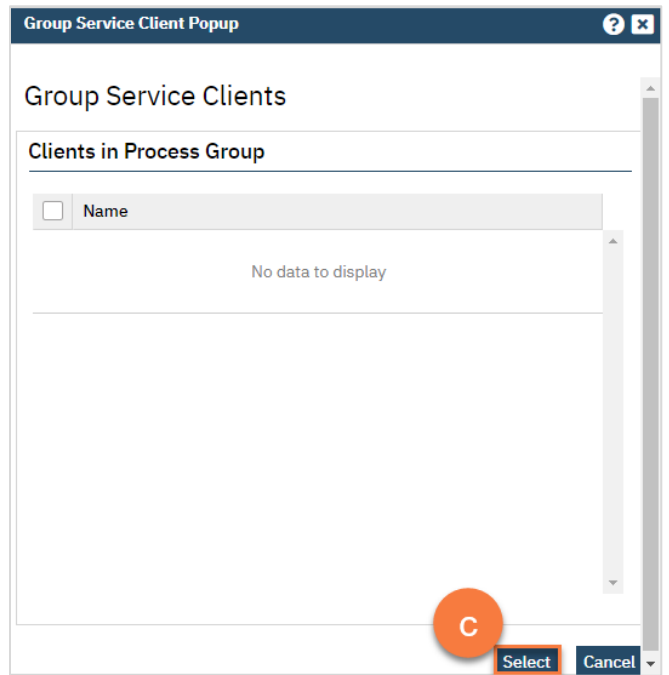
d. This brings up the Group Service Staff Pop Up. Select the staff member(s) you want to add and click OK.



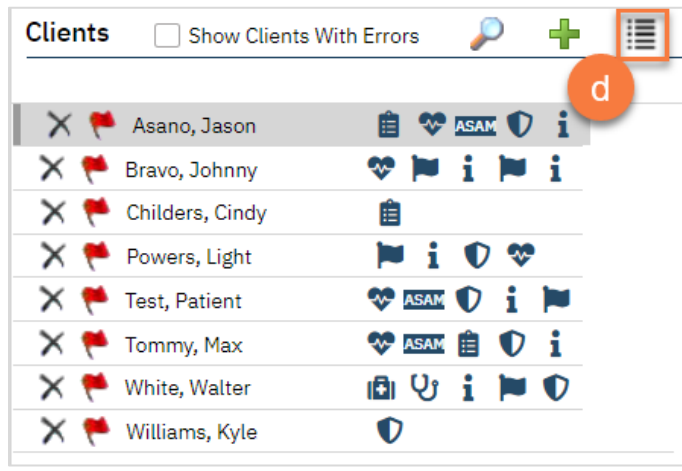
9. On the middle left side of the screen, you'll see the list of clients enrolled in this group. Make edits to this list to confirm the group roster.
  - a. To remove a client from the roster, click the Delete Service icon. DO NOT do this if they are simply a no-show. Only do this to remove them from this service's roster entirely.
  - b. To add a client who has already been enrolled in this group, click the Plus icon.



- c. This will open up the Group Service Client Popup, which will list any additional clients that are enrolled in this group. **Select the client and then click Select** to add them to this service.

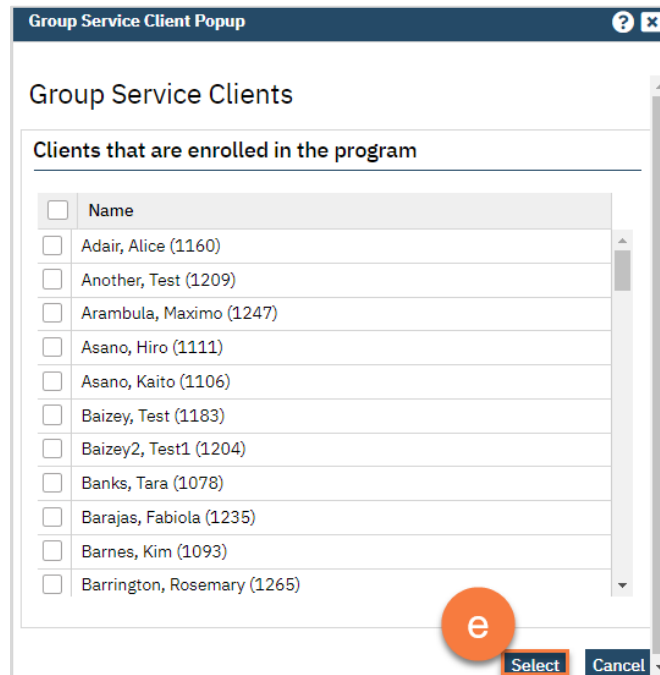


- d. To add a client who is enrolled in this program but not yet enrolled in this group, click the List icon.

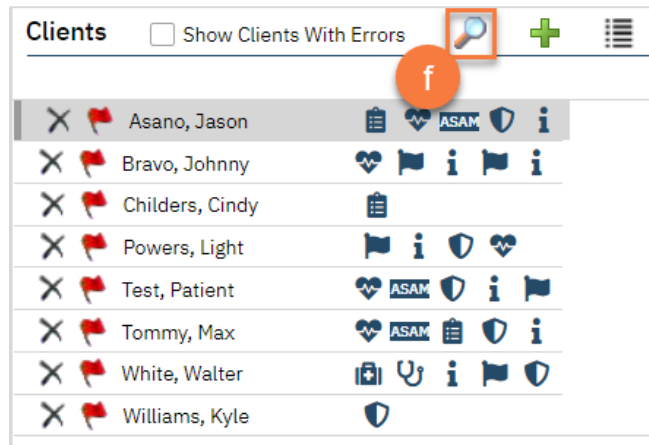




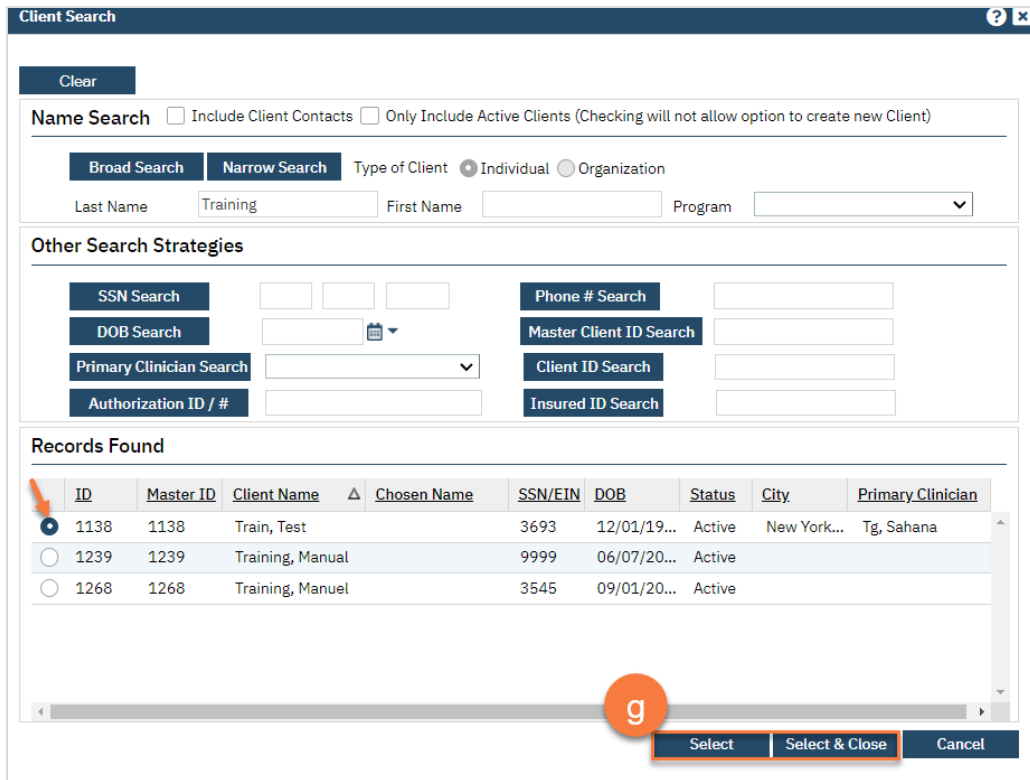
- e. This will open up the Group Service Client Popup, which will list any clients that are enrolled in this program but are not yet enrolled in this group. **Select the client(s) you want to add and click Select** to add them to this service.



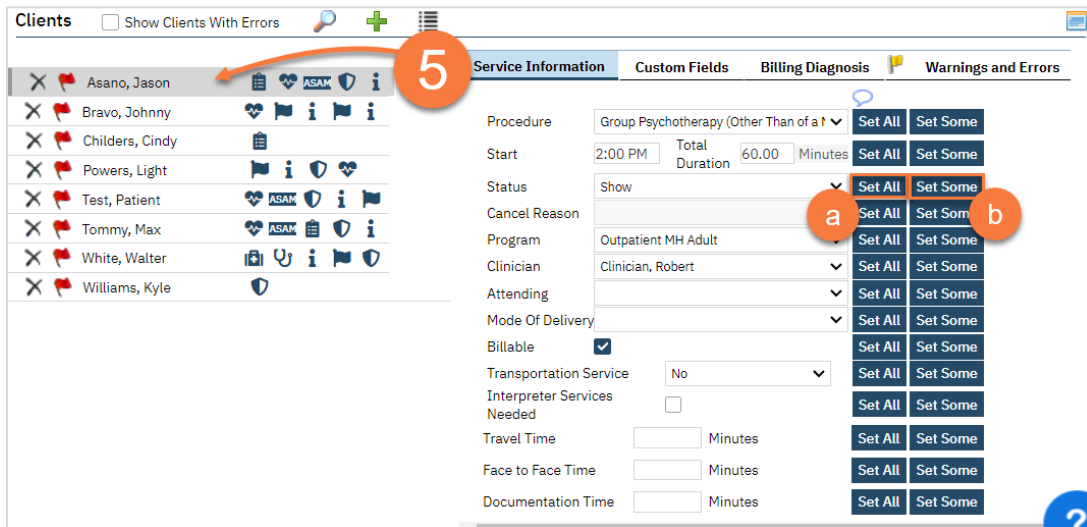
- f. To add a client from another program, click on the Magnifying Glass icon.



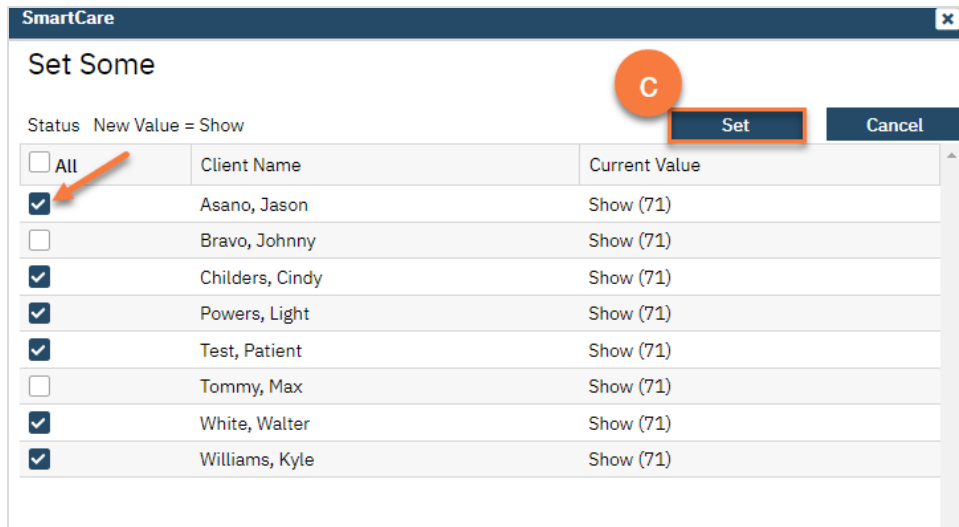
- g. This will bring up the client search function. **Search for the client you want to add and click Select & Close.** If you want to add more than 1 client, you can simply click Select and then search for the next client you want to add.



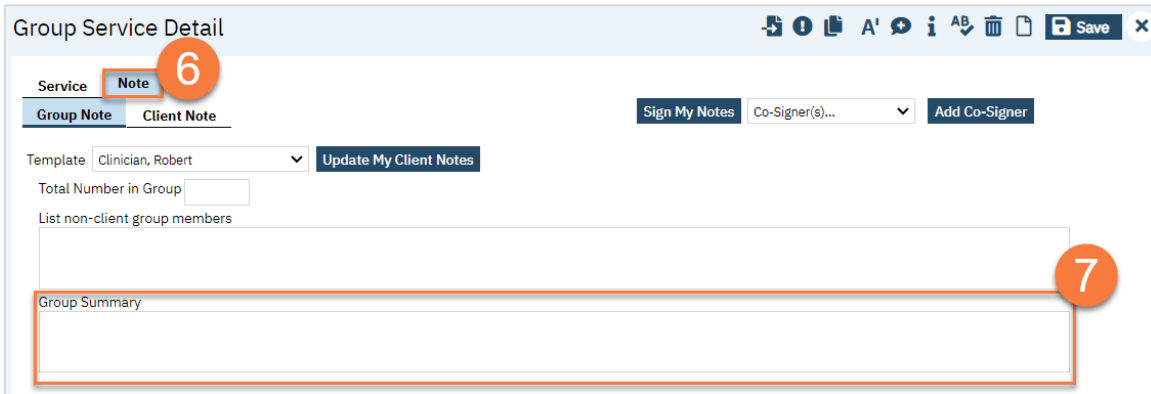
10. Once you have your group roster set up, move to the service information section. The first client will be highlighted. As you make changes, this will update this particular client. This is where you mark whether clients who were a no-show for the group, or who canceled.
- If you want to set this information for all of the clients, click the “Set All” button. You can do this for each item in the service information section.
  - If you want to set this information for more than one client, but not all of them, click the “Set Some” button.



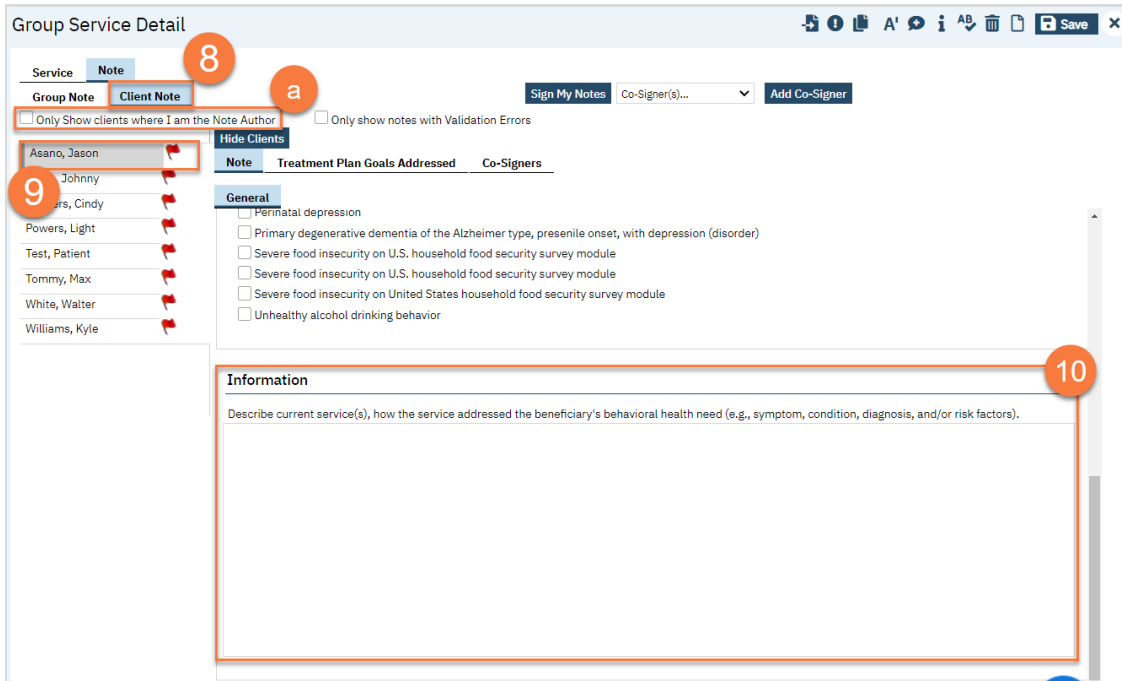
- This will bring up the Set Some pop-up window. Select the clients you want to include in this change (e.g. all the clients who you want to mark as “show”). Then click Set.



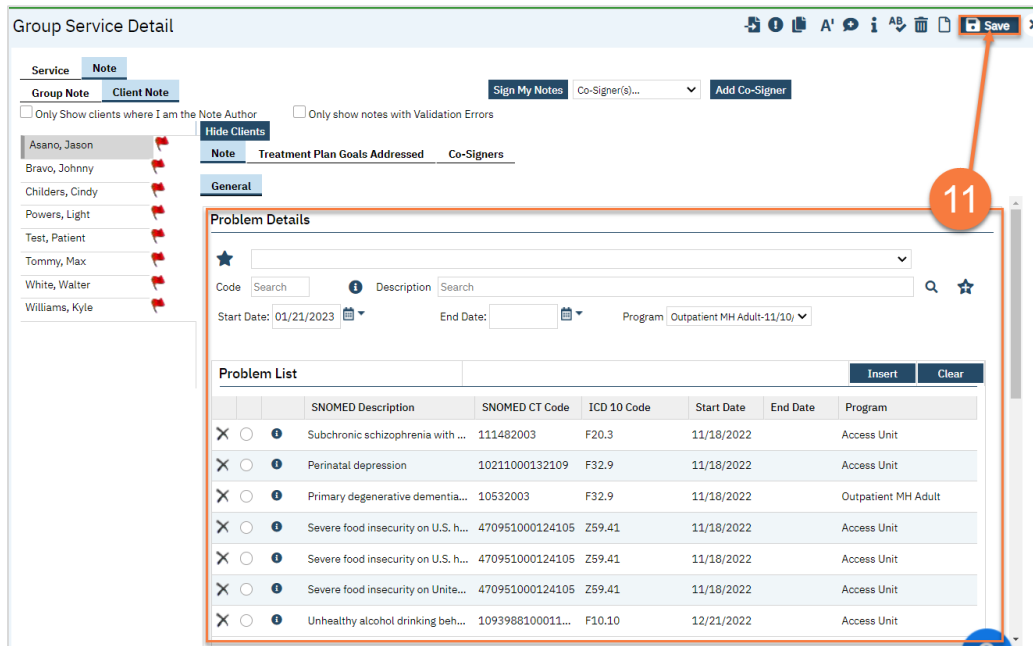
11. Once you've completed the service information, **navigate to the Note tab.**
12. **Enter the group note summary.** This will be pushed to all of the group member's notes.



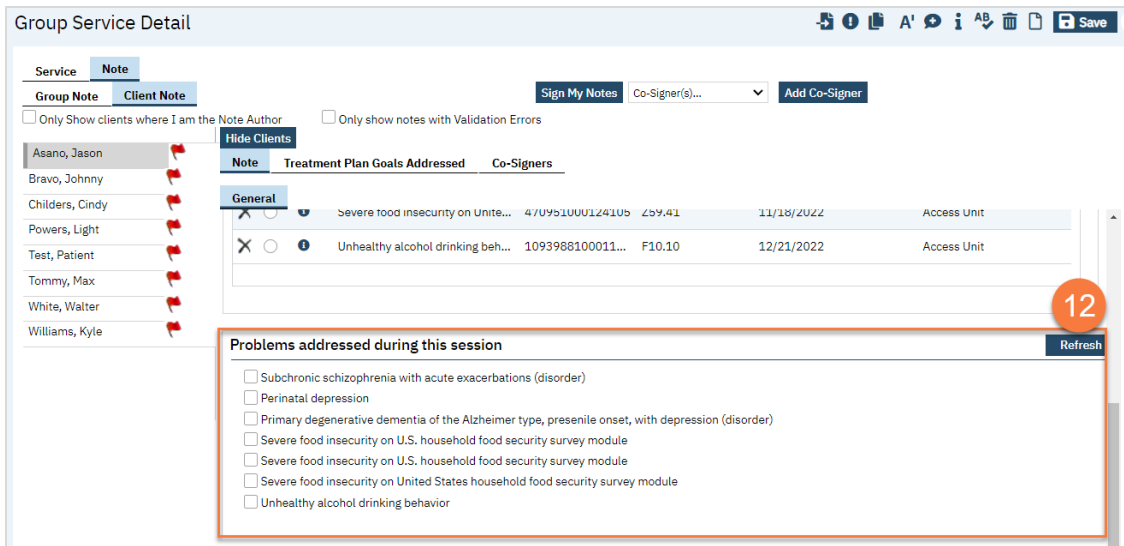
13. **Navigate to the Client Note tab.**
14. On the left side of the screen, **select the client** you're writing the note for.
  - a. You can **click on the checkbox "Only Show clients where I am the Note Author"** to limit the clients on the list.
15. On the right side of the screen, **enter the individual client's note** for this group service.



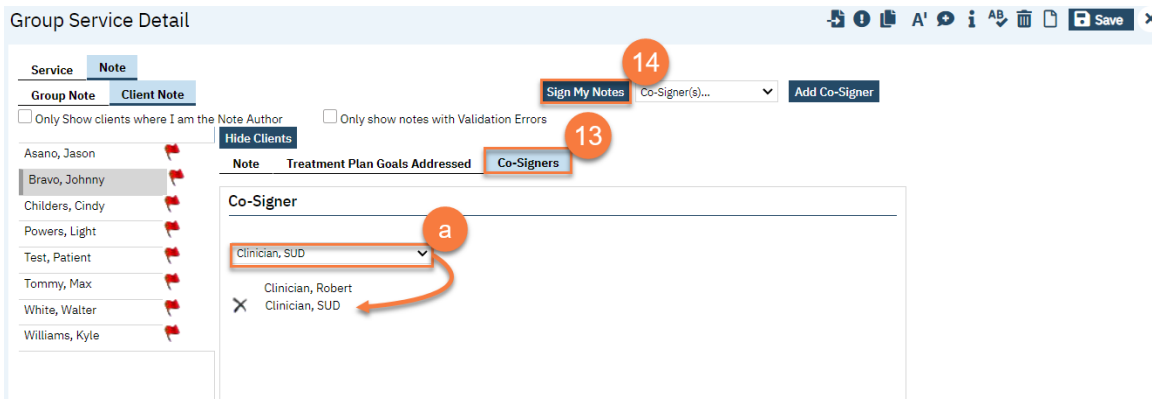
16. Add problems to the problem list as necessary. See Problem List for more information. After adding any problems, make sure to click Save.



17. Select problems that were addressed in today's session. If you've added any problems to the problem list during this note writing, click Refresh to update this list.



18. To add Co-Signers as necessary, **navigate to the Co-Signers tab.**
  - a. **Select the staff from the dropdown menu.** This will add them to the list of people who will be asked to co-sign the note.
19. Once you're finished with all of your notes, click **"Sign My Notes."**



## Referrals and Transfers

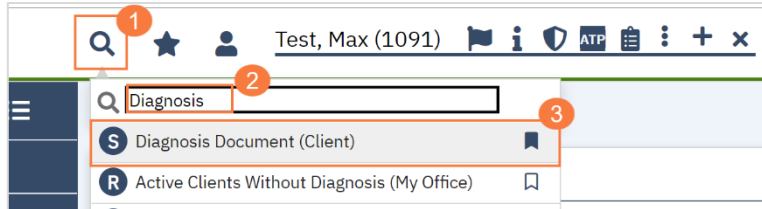
# Diagnosis Entry

In this section, you will learn how to add a diagnosis, update a diagnosis, deleted a diagnosis, and how to favorite a diagnosis.

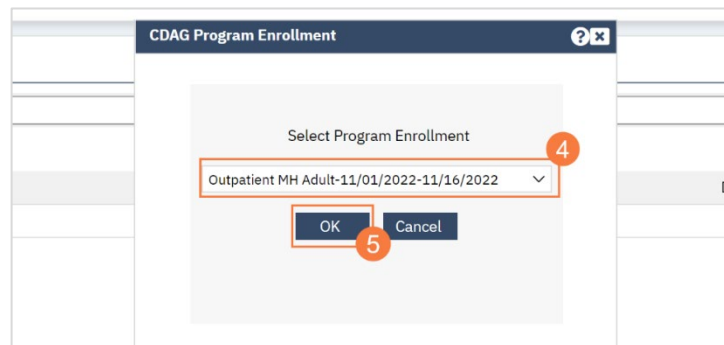
## How to Add a Diagnosis

To add a diagnosis, follow the steps below:

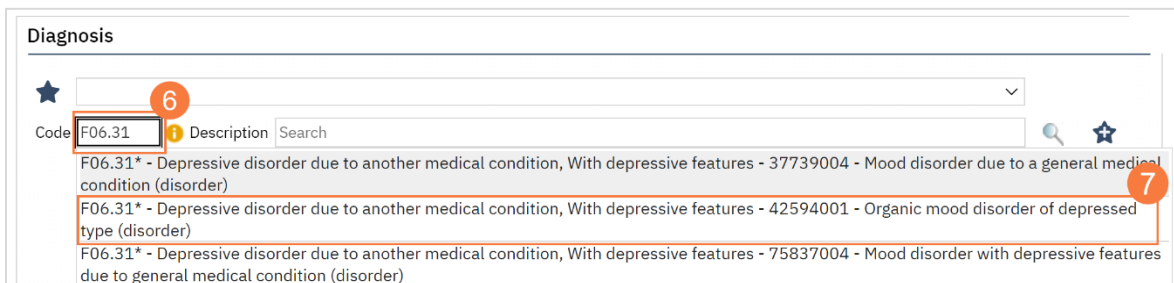
1. You must first have the client open, **click the Search icon**.
2. **Type Diagnosis** into the search bar.
3. **Click to select Diagnosis Document (Client)**.



4. In the CDAG Program Enrollment window pop-up, **click the drop down** and **click to select** the appropriate program.
5. **Click OK** to continue.



6. The Diagnosis Document screen will open, **click in the code field** and **enter the diagnosis code**.
7. A list of matching diagnoses will populate, **click to select** the appropriate diagnosis



- a) Alternatively, you can **click in the Description field** and **enter the diagnosis description**.
- b) A list of matching diagnoses will populate, **click to select** the appropriate diagnosis

The screenshot shows the 'Diagnosis' form with the 'Code' field set to 'F06.31' and the 'Description' field containing 'depr'. A search results list is displayed below, with three entries highlighted by a red box and labeled 'a' and 'b'. Entry 'a' is the first result: 'F06.31\* - Depressive disorder due to another medical condition, With depressive features - 37739004 - Mood disorder due to a general medical condition (disorder)'. Entry 'b' is the second result: 'F06.31\* - Depressive disorder due to another medical condition, With depressive features - 42594001 - Organic mood disorder of depressed type (disorder)'.

- 8. You must document if the diagnosis is Primary, Additional, or Provisional. **Click the drop-down menu in the Type field** and **select** the appropriate option.

The screenshot shows the 'Diagnosis' form with the 'Code' field set to 'F06.31' and the 'Description' field containing 'Depressive disorder due to another medical condition, With depressive features'. The 'Type' dropdown menu is open, showing three options: 'Primary', 'Additional', and 'Provisional'. A red box highlights the dropdown menu and is labeled with the number '8'.

- 9. If a severity level is appropriate, **click the drop-down menu in the Severity field** and **select** the appropriate option, mild, moderate, or severe.

The screenshot shows the 'Diagnosis' form with the 'Code' field set to 'F06.31' and the 'Description' field containing 'Depressive disorder due to another medical condition, With depressive features'. The 'Type' field is set to 'Primary'. The 'Severity' dropdown menu is open, showing three options: 'Mild', 'Moderate', and 'Severe'. A red box highlights the dropdown menu and is labeled with the number '9'.

- 10. To document that the client is in remission, **click the drop-down menu in the Remission field** and **select** the appropriate option.

The screenshot shows the 'Diagnosis' form with the 'Code' field set to 'F06.31' and the 'Description' field containing 'Depressive disorder due to another medical condition, With depressive features'. The 'Type' field is set to 'Primary' and the 'Severity' field is set to 'Moderate'. The 'Remission' dropdown menu is open, showing three options: 'Early Remission', 'Sustained Remission', and 'Remission in a controlled environment'. A red box highlights the dropdown menu and is labeled with the number '10'.

- a. If this diagnosis is informational only and not a billable diagnosis, click the **No** radio button in the **Billable** field.

Specifier

Source

Order  Billable  Yes  No

11. Click the **Insert** button to add the diagnosis. It will appear in the Diagnosis List grid below

Remission  Order  Billable  Yes  No

Comments

**Diagnosis List** **Insert** **Clear**

	Order	DSM 5/ ICD 10	SNOMED	R/O	ICD/ DSM Description	SNOMED Description	Type	Severity	Source	Comments
<input checked="" type="checkbox"/> <input type="radio"/> <input type="radio"/>	1	F06.31	37739004		Depressive disorder...	Mood disorder due ...	Primary	Moderate		

- a) Repeat steps 1-12 for remaining diagnoses.

12. Click **Sign** to complete and generate the document.

Diagnosis Document

Effective 11/16/2022 Status New Author Clinician, Robert **Sign**

**Diagnosis**

No Diagnosis

**Note:** If you need to review the programs the patient is enrolled in, click the **More Detail** icon at the top of the window.

Diagnosis Document

Effective 11/16/2022 Status New Author Clinician, Robert **Sign**

**Diagnosis**

Other Versions Signed By Signer Program

Add Signer(s)...



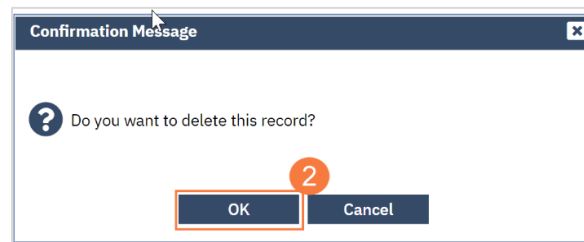
## How to Delete a Diagnosis

To delete a diagnosis, follow the steps below:

1. Click the X icon to left of the diagnosis you want to delete.

Diagnosis List												Insert	Clear
		Order	DSM 5/ ICD 10	SNOMED	R/O	ICD/ DSM Description	SNOMED Description	Type	Severity	Source	Comments		
X	1	1	F06.31	37739004		Depressive disorde...	Mood disorder due ...	Primary	Moderate				
X	2	2	F31.9	133091...		Bipolar I disorder, ...	Rapid cycling bipol...	Additional	Moderate				
X	3	3	F41.1	21897009		Generalized anxiet...	Generalized anxiet...	Additional	Moderate				

2. A prompt will appear and confirm you want to delete, click OK.



## How to Modify and/or Re-Order a Diagnosis

To modify or re-order a diagnosis, follow the steps below:

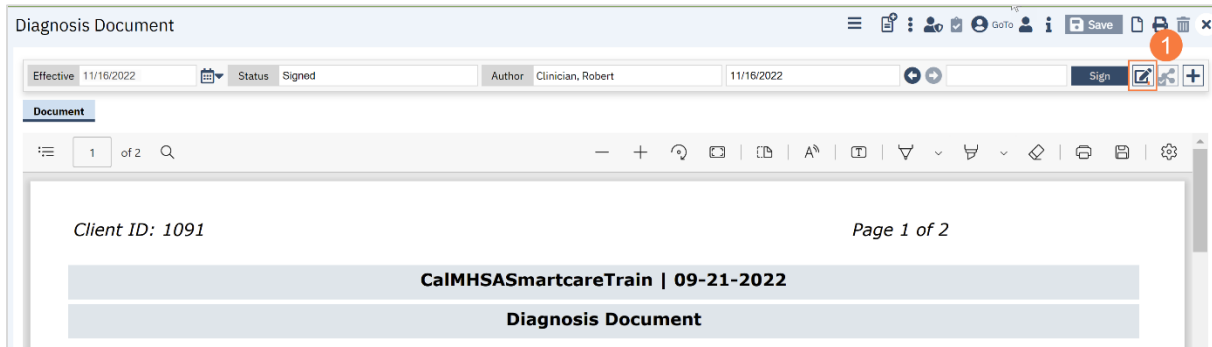
1. Click the radio button to the left of the diagnosis you need to update.
2. Make updates to the appropriate fields above.
  - a. If you need to re-order your diagnosis, click in the Order field and enter the number you would like the diagnosis to appear in.
3. Click Modify to save your changes.

Diagnosis List												Modify	Clear
		Order	DSM 5/ ICD 10	SNOMED	R/O	ICD/ DSM Description	SNOMED Description	Type	Severity	Source	Comments		
X	1	1	F06.31	37739004		Depressive disorde...	Mood disorder due ...	Additional	Moderate				
X	2	2	F31.9	133091...		Bipolar I disorder, ...	Rapid cycling bipol...	Additional	Mild				
X	3	3	F41.1	300895...		Generalized anxiet...	Anxiety attack (find...	Primary	Moderate				

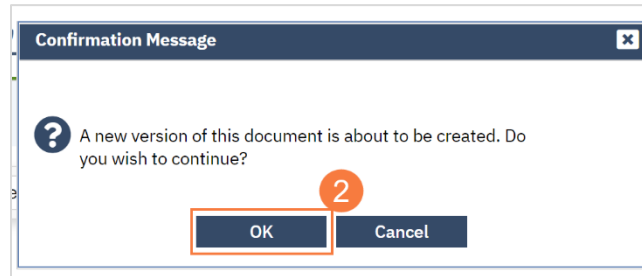
## How to Modify a Diagnosis After the Document is Generated

To modify a diagnosis after the Diagnosis Document has been generated, follow the steps below:

1. Navigate to the Diagnosis Document, **click the Edit icon** at the top of the screen.



2. A confirmation window will open, asking if you want to proceed with making changes to the document. **Click OK.**

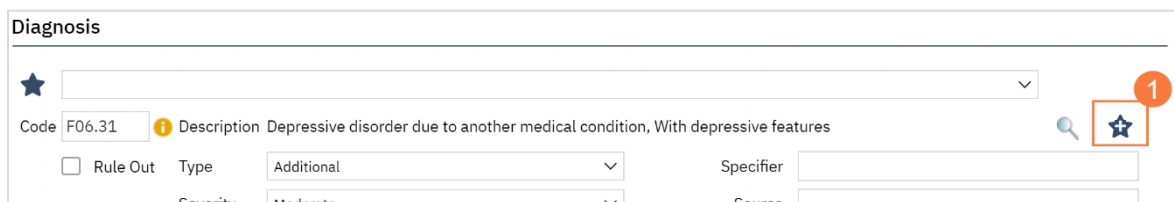


3. Make the necessary changes and click the Sign button when you are finished to regenerate the document.

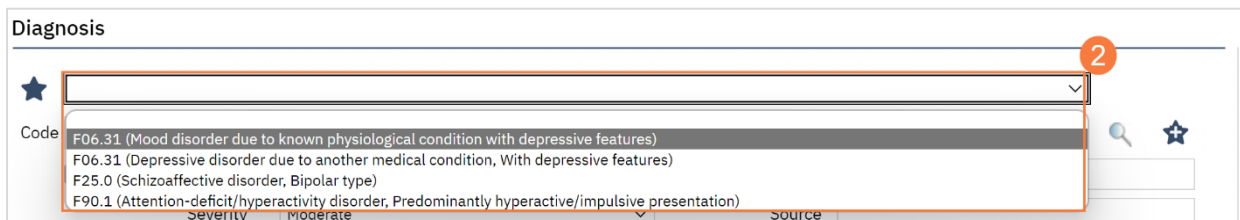
## How to Save a Favorite Diagnosis

To add a diagnosis as a favorite, follow the steps below:

1. **Click the Add Favorite icon**, to right of the diagnosis.



2. To use the favorite diagnosis in the future, **click the drop-down menu** next to the favorite icon and select it.



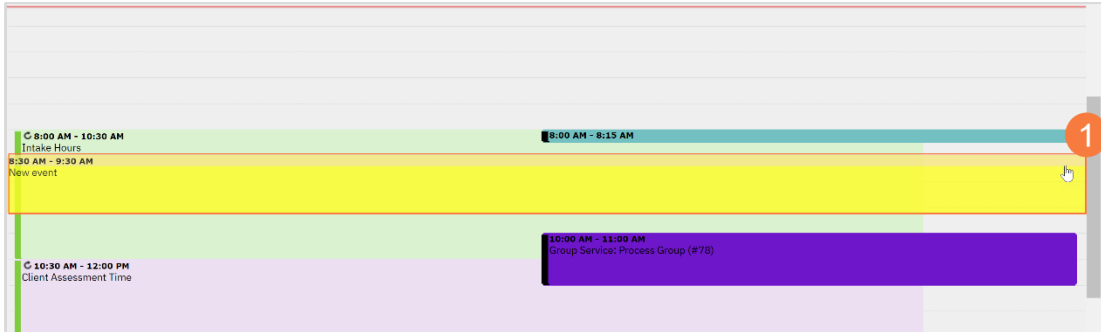
# My Calendar Management

In this section you will learn how to create a client appointment, reschedule an appointment, and create non-client facing time on your schedule for paperwork, training, etc.

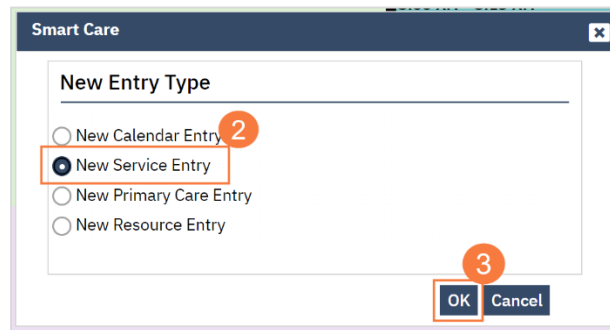
## How to Create an Appointment from Your Calendar

To create an appointment from your schedule, follow the steps below,

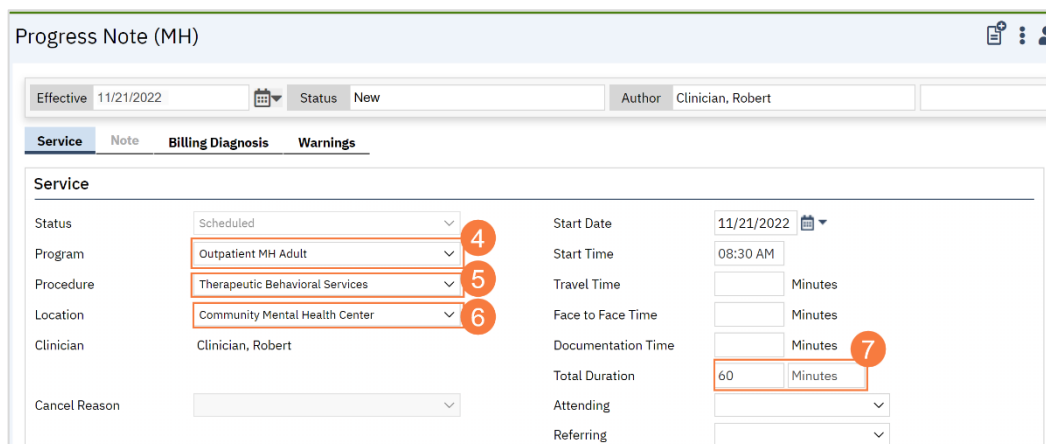
1. From the Staff Calendar screen, **click and drag your mouse on the calendar timeslot** you want to book.



2. In the New Entry Type pop-up, **select the New Service Entry radio button.**
3. **Click OK.**

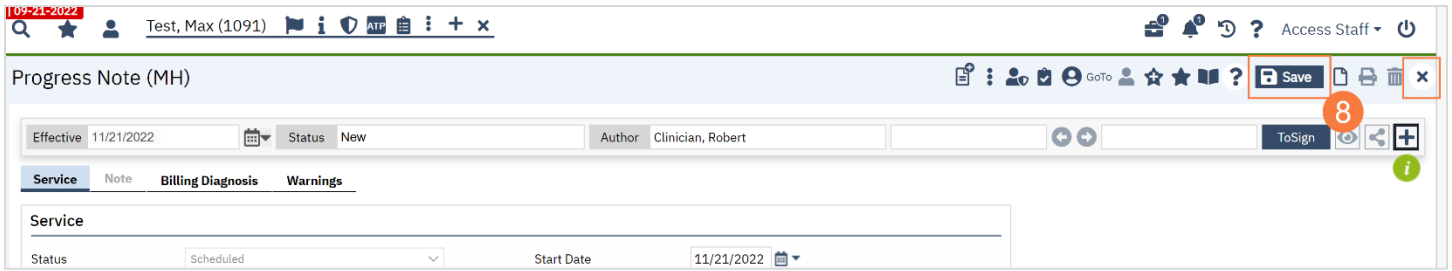


4. In the Service Notes screen, **click the drop-down menu in the program field and select the appropriate program**
5. **Click the drop-down menu in the Procedure field and select the appropriate procedure.**
6. **Click the drop-down menu in the Location field and select the appropriate location.**
7. **Click in the Total Duration field and enter the duration of the appointment.**



Service	Note	Billing	Diagnosis	Warnings
Status	Scheduled			
Program	Outpatient MH Adult			
Procedure	Therapeutic Behavioral Services			
Location	Community Mental Health Center			
Clinician	Clinician, Robert			
Cancel Reason				
Start Date	11/21/2022			
Start Time	08:30 AM			
Travel Time		Minutes		
Face to Face Time		Minutes		
Documentation Time		Minutes		
Total Duration	60	Minutes		
Attending				
Referring				

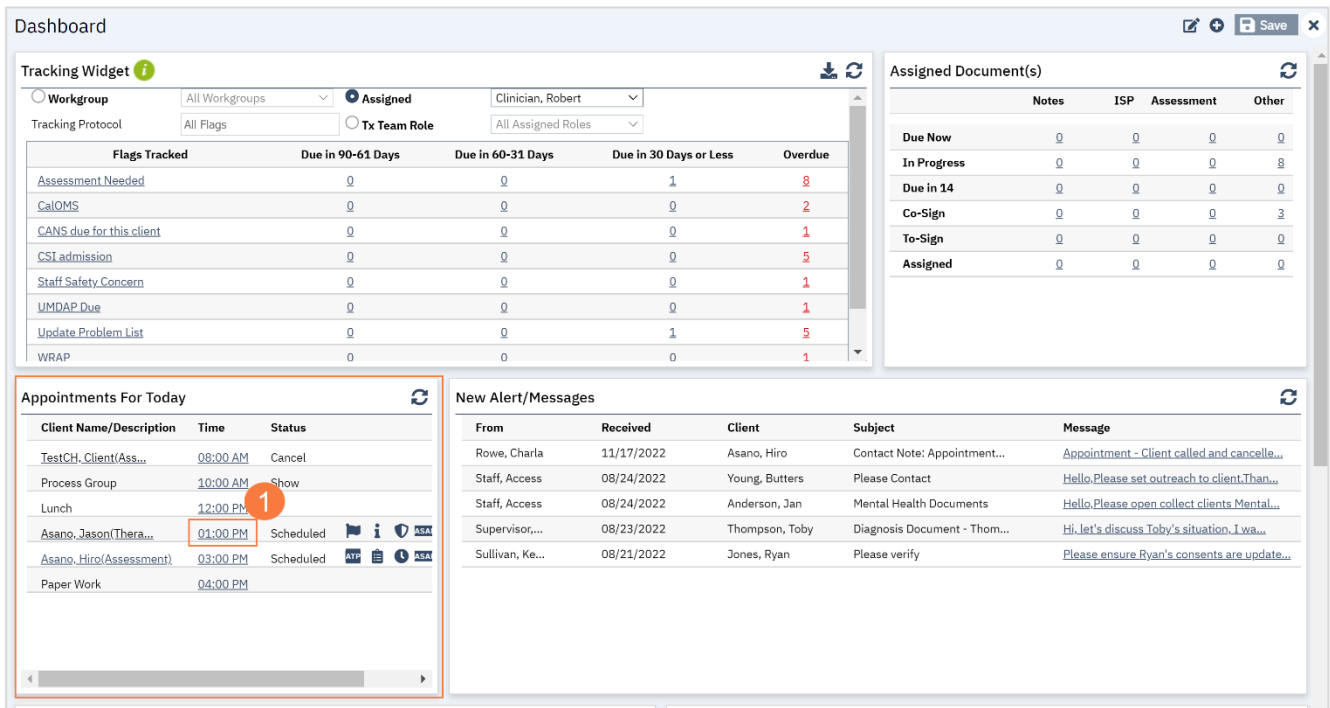
8. Click the Save icon. Click the X icon to close the screen.



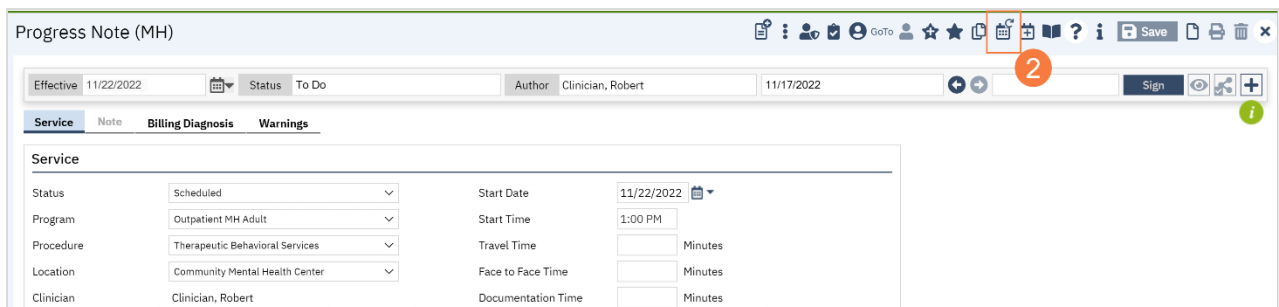
## How to Reschedule a Client's Appointment

To reschedule a client's appointment from your calendar, follow the steps below:

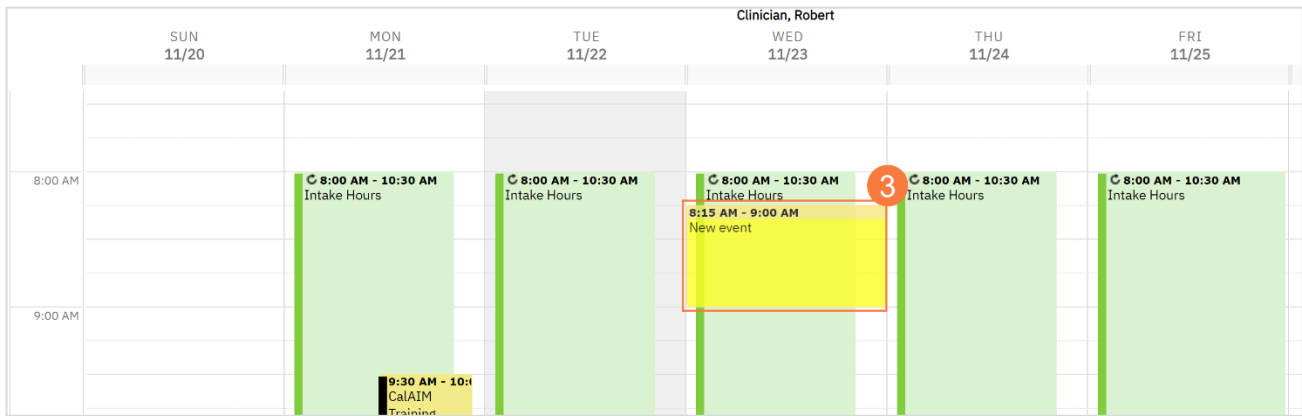
1. From your SmartCare home page, locate the Appointments for Today widget. Click the appointment time to the right of the patient you need to reschedule.



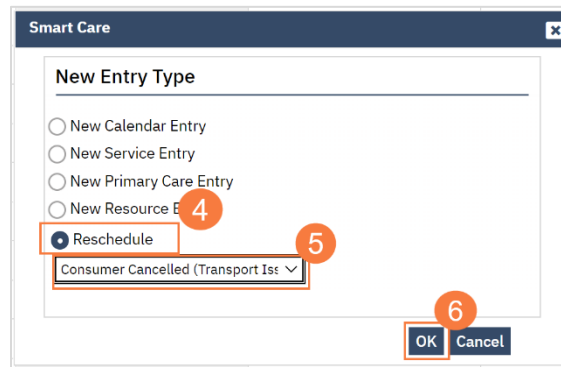
2. In the Progress Note screen, click the Reschedule icon.



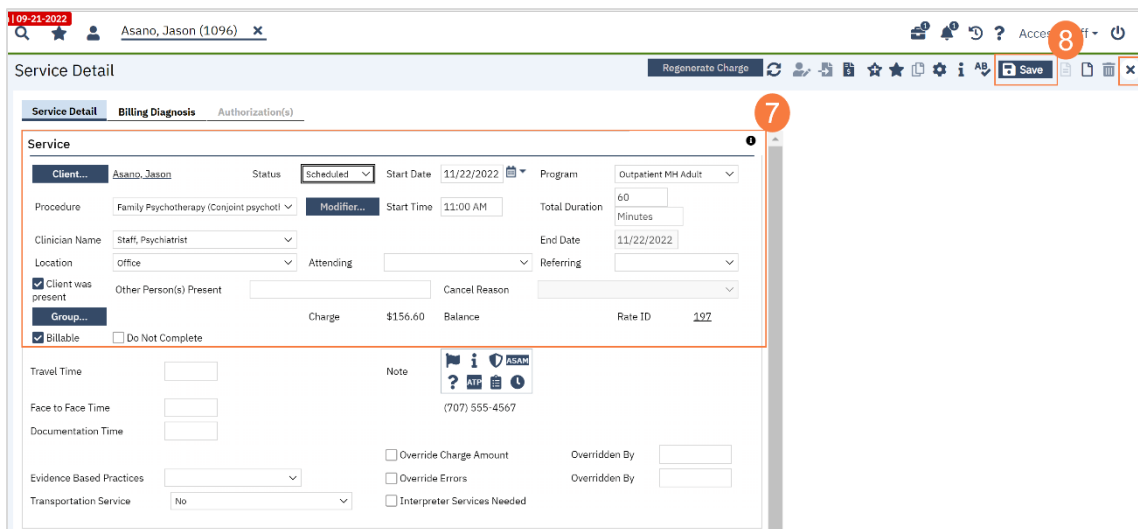
- Your Staff Calendar screen will open, **click and drag your mouse on the calendar timeslot you want to book.**



- In the New Entry Type window, click the radio button for Reschedule.
- Click to select the reason for the reschedule.
- Click OK.



- The Service Entry window will open, ensure all the information is correct.
- Click Save** to reschedule the appointment. **Click the X** to close.



# How to Cancel a Client's Appointment

To cancel a client's appointment from your calendar, follow the steps below:

1. From your SmartCare home page, locate the Appointments for Today widget. Click the appointment time to the right of the patient you need to cancel.

The screenshot shows the SmartCare Dashboard with several widgets. The 'Tracking Widget' is at the top left, showing various flags tracked. The 'Appointments For Today' widget is in the middle left, listing appointments for the day. The appointment for 'Asano, Jason (Thera...)' at '01:00 PM' is highlighted with a red box and a circled '1'. The 'Status' field for this appointment is 'Scheduled'. The 'New Alert/Messages' widget is on the right, showing a list of messages.

2. The Progress Note screen will open, click the drop-down menu in the Status field and select Cancel.
3. Click the drop-down menu in the Cancel Reason field and select the appropriate reason.
4. Click Save to cancel the appointment. Click the X to close.

The screenshot shows the 'Progress Note (MH)' form. The 'Status' field is set to 'Cancel' (circled 2). The 'Cancel Reason' field is set to 'Consumer Cancelled (Transport Issues)' (circled 3). The 'Save' button is circled 4. The form includes fields for Effective date, Status, Author, Start Date, Start Time, Travel Time, Face to Face Time, Documentation Time, Total Duration, Attending, and Referring.

# How to Document a No-Show Appointment

To document a No-Show Appointment, follow the steps below:

1. From your SmartCare home page, locate the Appointments for Today widget. Click the appointment time to the right of the patient you need to cancel.

The screenshot shows the SmartCare Dashboard with several widgets. The 'Appointments For Today' widget is highlighted with a red box. It contains a table with the following data:

Client Name/Description	Time	Status
TestCH_Client(Ass...	08:00 AM	Cancel
Process Group	10:00 AM	Show
Lunch	12:00 PM	
Asano, Jason(Thera...	01:00 PM	Scheduled
Asano, Hiro(Assessment)	03:00 PM	Scheduled
Paper Work	04:00 PM	

A red circle with the number '1' is placed over the '01:00 PM' time slot for the appointment 'Asano, Jason(Thera...'. Other widgets visible include 'Tracking Widget', 'Assigned Document(s)', and 'New Alert/Message(s)'.

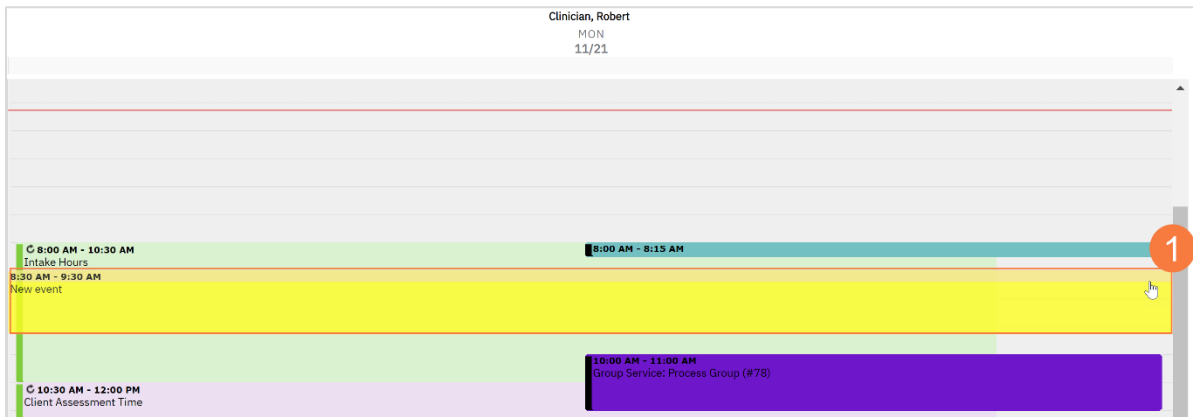
2. The Progress Note screen will open, click the drop-down menu in the Status field and select No Show.
3. Click Save to cancel the appointment. Click the X to close.

The screenshot shows the 'Progress Note (MH)' screen. The 'Service' tab is active, and the 'Status' dropdown menu is open, showing 'No Show' selected. A red box highlights the dropdown, and a red circle with the number '2' is placed over it. The 'Save' button is highlighted with a red circle and the number '3'. The screen also shows fields for 'Effective' date (11/22/2022), 'Status' (To Do), 'Author' (Clinician, Robert), and 'Start Date' (11/22/2022).

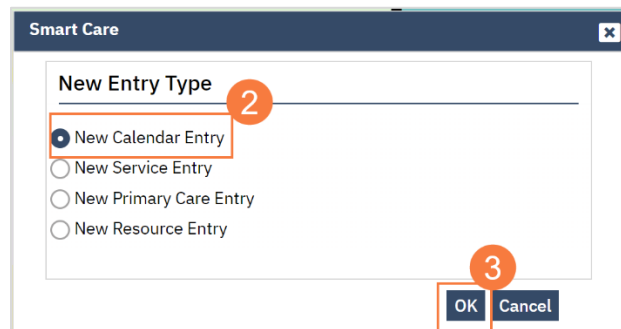
## How to Schedule Non-Client Time on Your Calendar

To schedule non-client time on your calendar such as paperwork time, meetings, supervision, training, holiday, etc., follow the steps below:

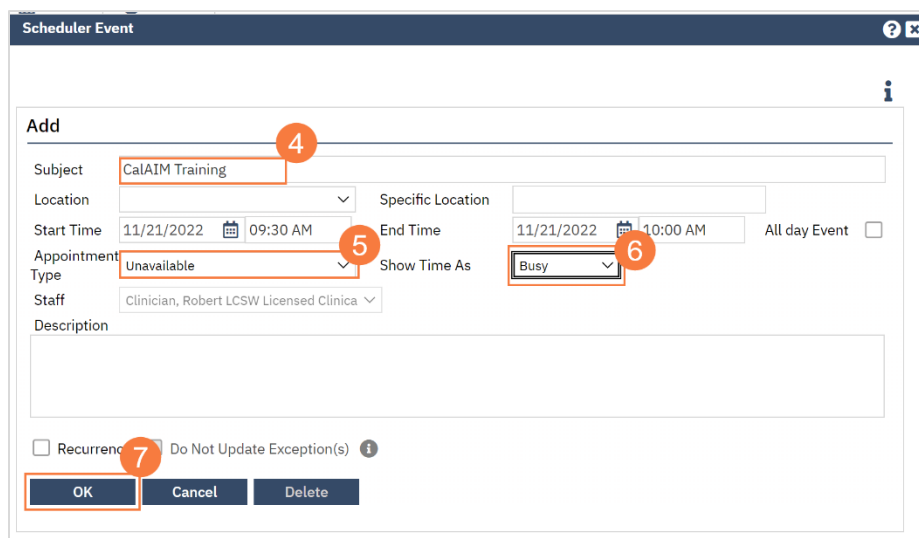
1. From the Staff Calendar screen, **click and drag your mouse on the calendar timeslot** you want to book.



2. In the New Entry Type pop-up, **select the New Calendar Entry radio button.**
3. **Click OK.**



4. The Scheduler Event window will open, **click in the subject field** and **enter the subject** for the calendar entry
5. **Click the drop-down menu in the Appointment Type field** and **select the correct option.**
6. **Click the drop-down menu in the Show Time As field** and **select the correct option.**
7. **Click OK.**





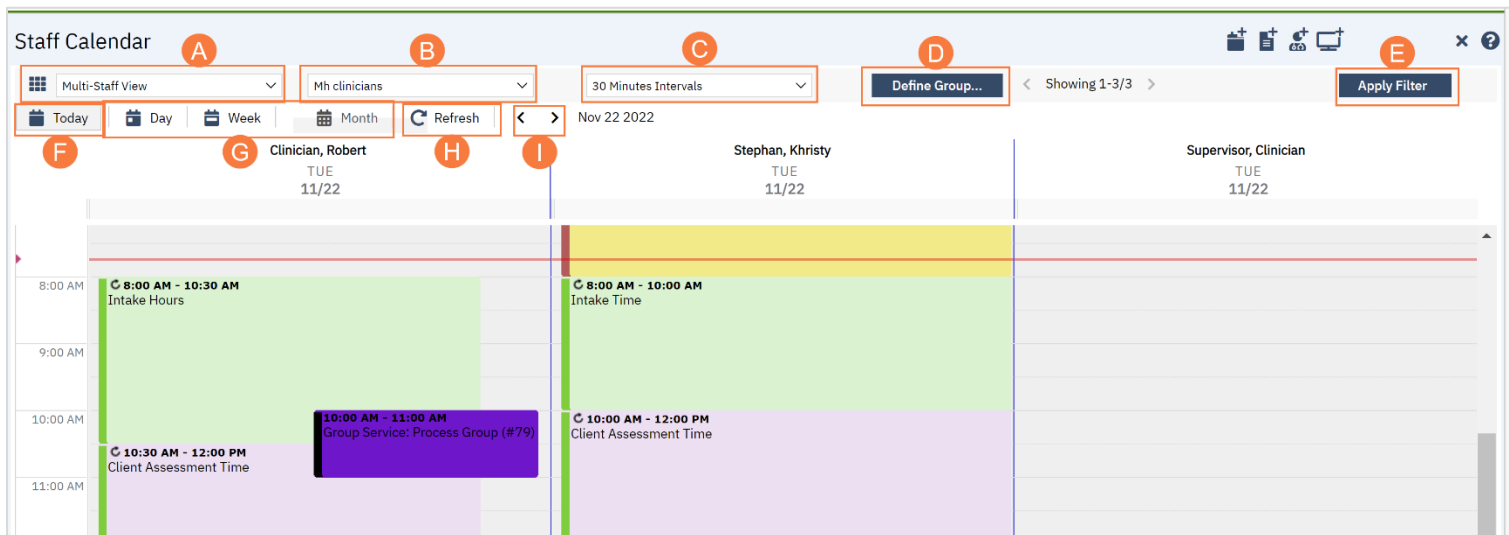
# Front Desk Workflows

Here will be introduction to front desk....

## Basic Navigation of the Staff Calendar

Use the guide below to learn how to navigate the Staff Calendar screen,

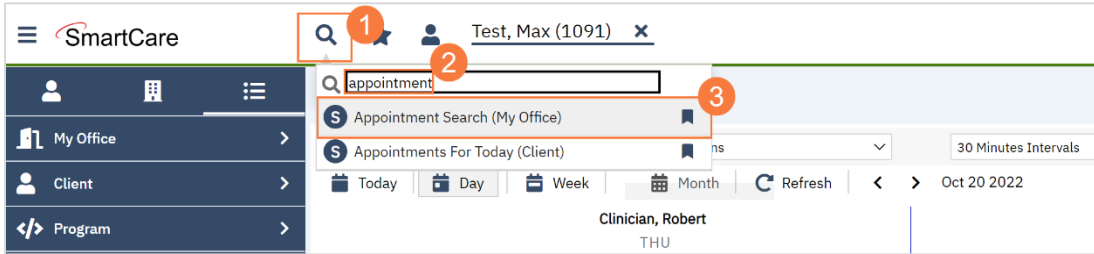
- A. The View drop-down menu will allow to switch between calendar views of a single-staff, multiple-staff members based on a pre-defined group, or multiple-staff members that you can select.
- B. In the multiple-staff view, this will allow you to choose between pre-defined groups. In single-staff view, this will allow you to switch between staff members.
- C. The Intervals drop-down menu will allow you to tell SmartCare the time intervals you want the calendar to display. in. For example, if you select 30 minutes there will be two time slots in each hour on the calendar.
- D. The Define Group button will allow you to create your own customized staff group.
- E. The Apply Filter button will need to be clicked any time you make changes to A-C (listed above) in order for it to update the calendar below.
- F. The Today button will bring you back to today's date when you have navigated away to a different date.
- G. The Day, Week, and Month buttons will allow you to change between daily view, weekly view, or monthly view.
- H. The Refresh button will refresh the calendar and show you the most up-to-date information.
- I. The Forward and Back buttons will take you forward a day and back a day.



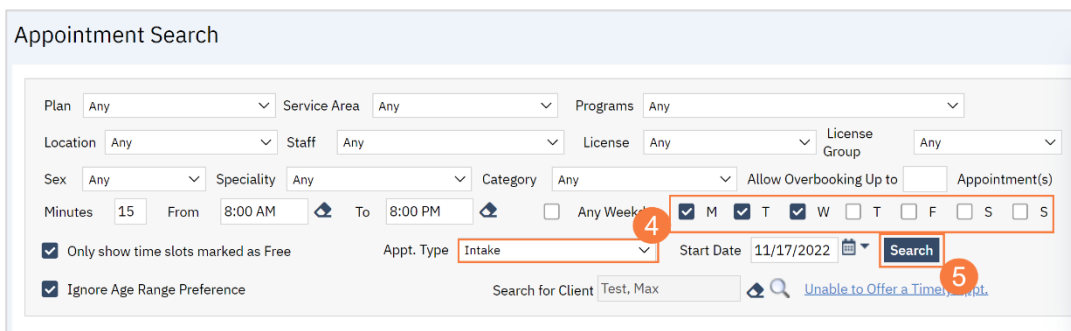
# How to Schedule an Appointment

To schedule an appointment, follow the steps below:











1. With the client open, **click the Search icon**.
2. **Type Appointment** in the search bar.
3. **Click to select Appointment Search (My Office)**.



4. In the Appointment Search screen, select the parameters for your search, such as:
  - Appointment type
  - Days of the week
  - Clinician, etc.
5. **Click Search**.



6. A list of available appointments will populate below, **click the Schedule Appt icon** next to the appointment time you want to choose.

	Staff Name	Date/Time	Duration	Type	Location Name
	 <a href="#">Sullivan, Kevin</a>	11/21/2022 8:00 AM	210 mins	Intake	Community Mental Health Center
	 <a href="#">Stephan, Christy</a>	11/21/2022 8:00 AM	120 mins	Intake	
	 <a href="#">Clinician, Robert</a>	11/21/2022 8:00 AM	120 mins	Intake	
	 <a href="#">Clinician, SUD</a>	11/21/2022 8:00 AM	120 mins	Intake	
	 <a href="#">Clinician, Robert</a>	11/21/2022 1:00 PM	180 mins	Intake	

7. The Service Detail window will open, **click the drop-down menu in the Program field** to select a program.
  - Note: If a client is not yet enrolled in the program, an alert will pop up. This will not keep you from scheduling this appointment.
8. **Click the drop-down menu in the Procedure field** and select the appropriate option.
9. **Click the drop-down menu in the Location field** and select the appropriate location.

The screenshot shows the 'Service Detail' window with the following fields and annotations:

- Client:** TestCH\_Client
- Status:** scheduled (annotated with 8)
- Start Date:** 11/21/2022
- Program:** MH Screening (annotated with 7, with a warning: 'Client is not enrolled in this program.')
- Procedure:** Assessment (annotated with 8)
- Start Time:** 8:00 AM
- Total Duration:** 15 Minutes
- Clinician Name:** Clinician, SUD (annotated with 9)
- End Date:** 11/21/2022
- Location:** Community Mental Health Center (annotated with 9)
- Attending:** (empty)
- Referring:** (empty)
- Other Person(s) Present:** (empty)
- Cancel Reason:** (empty)
- Charge:** \$0.00
- Balance:** (empty)
- Rate ID:** (empty)
- Billable:**  Billable,  Do Not Complete
- Travel Time:** (empty) Minutes
- Face to Face Time:** (empty) Minutes
- Documentation Time:** (empty) Minutes
- Evidence Based Practices:** (empty)
- Transportation Service:** No
- Override Charge Amount:**  Overridden By: (empty)
- Override Errors:**  Overridden By: (empty)
- Interpreter Services Needed:**

10. **Click Save** to schedule the appointment. **Click the X icon** to close this screen.

The screenshot shows the 'Service Detail' window with the following fields and annotations:

- Client:** TestCH\_Client (1080)
- Status:** Scheduled
- Start Date:** 11/21/2022
- Program:** MH Screening
- Procedure:** Assessment
- Start Time:** 8:00 AM
- Total Duration:** 15 Minutes
- Warning:** Client is not enrolled in this program.
- Action Buttons:** Regenerate Charge, Save (annotated with 10), and Close (X icon, annotated with 10)

## How to Cancel an Appointment

To document a cancelled appointment, follow the steps below:

1. **Click the Search icon.**
2. **Type Reception** in the search bar.
3. **Click to select Reception/Front Desk(My Office).**

The screenshot shows the SmartCare search interface with the following elements and annotations:

- Search Icon:** (annotated with 1)
- Search Input:** reception (annotated with 2)
- Search Results:**
  - Reception Views (Administration)
  - Reception/Front Desk (My Office) (annotated with 3)

- In the Reception/Front Desk screen, locate the correct client along with correct staff and appointment time. Click on the Status field and the word Scheduled.

	Time	Client Name	Flags	Procedure	Status	Staff	Balance	Comment
(0)	1:00 AM	CTest_CTest (1118)	i	testProcedure	Scheduled	garaju, Chitra	\$0.00	Add
(0)	8:00 AM	TestCH_Client (1080)	i	Assessment	Scheduled	Clinician, Robert LC...	\$0.00	Add
(1)	10:00 AM	Asano, Jason (1096)	i	Family Psychother...	Scheduled	Staff_Psychiatrist...	\$0.00	Add
(0)	10:00 AM	Bravo, Johnny (1062)	i	Group Psychother...	Scheduled	Clinician, Robert LC...	\$0.00	Add

- The Change Status window will open, click the drop-down menu and select Cancel.
- Next you will be prompted to enter a cancel reason, click the drop-down menu and select the appropriate option.
- Click Change to cancel the appointment. The status will now show as Cancelled.

**Change Status**

Cancel

Consumer Cancelled (Childca)

Change Close

## How to Document a No-Show Appointment

To document a No-Show Appointment, follow the steps below:

- In the Reception/Front Desk screen, locate the correct client along with correct staff and appointment time. Locate the Status field and click the word Scheduled.

	Time	Client Name	Flags	Procedure	Status	Staff	Balance	Comment
(0)	1:00 AM	CTest_CTest (1118)	i	testProcedure	Scheduled	garaju, Chitra	\$0.00	Add
(0)	8:00 AM	TestCH_Client (1080)	i	Assessment	Scheduled	Clinician, Robert LC...	\$0.00	Add
(1)	10:00 AM	Asano, Jason (1096)	i	Family Psychother...	Scheduled	Staff_Psychiatrist...	\$0.00	Add
(0)	10:00 AM	Bravo, Johnny (1062)	i	Group Psychother...	Scheduled	Clinician, Robert LC...	\$0.00	Add

- The Change Status window will open, click the drop-down menu and select No Show
- Click Change to cancel the appointment. The status will now show as No Show.

**Change Status**

No Show

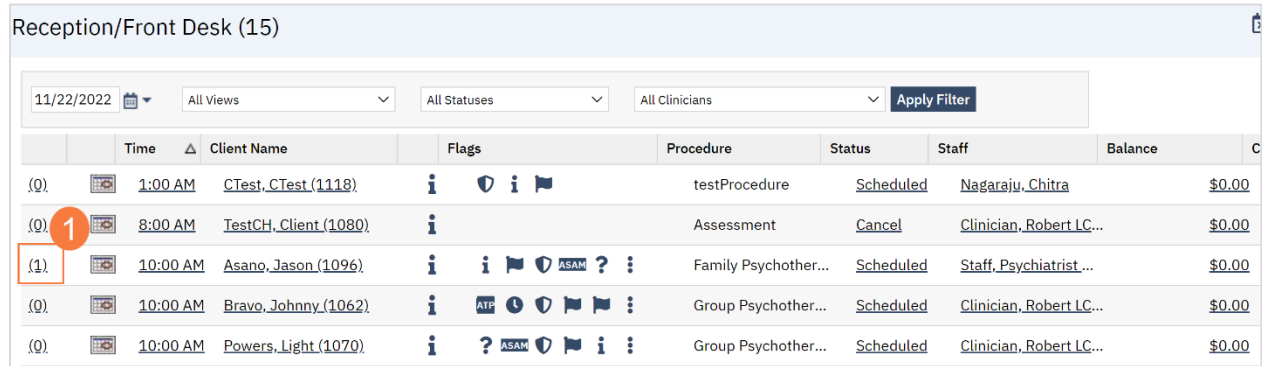
Change Close

# How to Reschedule an Appointment

To reschedule an appointment, follow the steps below:

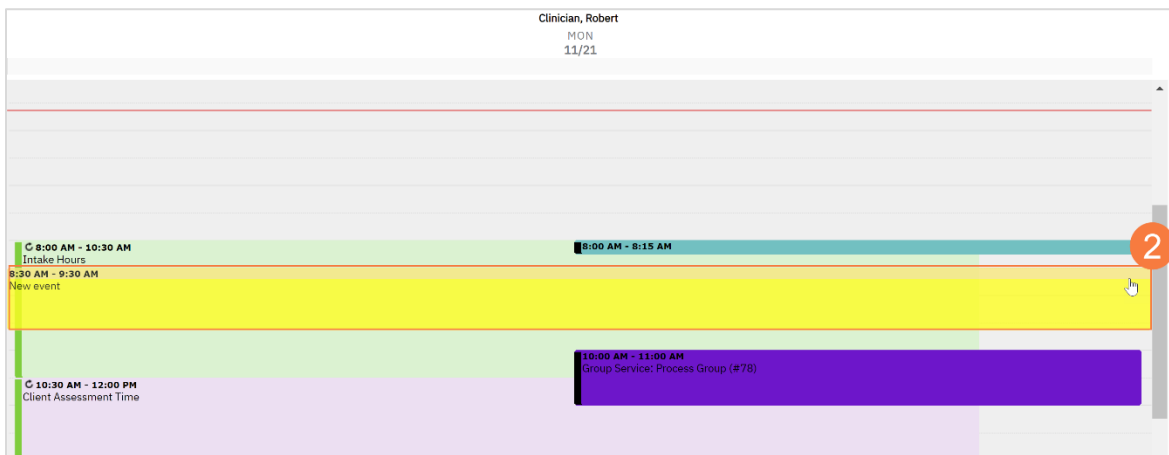
1. In the Reception/Front Desk screen, locate the correct client along with correct staff and appointment time. **Click the number in parenthesis** to the left of the appointment time.

**Note:** This number indicates the number of times this appointment has been rescheduled.

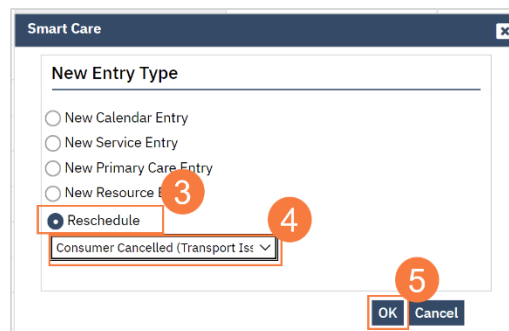


	Time	Client Name	Flags	Procedure	Status	Staff	Balance
(0)	1:00 AM	CTest, CTest (1118)	i i	testProcedure	Scheduled	Nagaraju, Chitra	\$0.00
(0)	8:00 AM	TestCH_Client (1080)	i	Assessment	Cancel	Clinician, Robert LC...	\$0.00
(1)	10:00 AM	Asano, Jason (1096)	i i ASAM ?	Family Psychother...	Scheduled	Staff, Psychiatrist...	\$0.00
(0)	10:00 AM	Bravo, Johnny (1062)	i ATP	Group Psychother...	Scheduled	Clinician, Robert LC...	\$0.00
(0)	10:00 AM	Powers, Light (1070)	i ? ASAM	Group Psychother...	Scheduled	Clinician, Robert LC...	\$0.00

2. This will take you to the Staff Calendar screen to allow you to select a new appointment time. **Click and drag your mouse on the calendar timeslot** you want to book.



3. In the New Entry Type window, **click the radio button for Reschedule**.
4. **Click to select the reason** for the reschedule.
5. **Click OK**.



6. The Service Entry window will open, ensure all the information is correct
7. **Click Save** to reschedule the appointment. **Click the X** to close.

## How to Handle Client Intake

### Front Desk: A client has arrived for their intake/assessment appointment. What do I do?

- f. Open the Staff Calendar, if not already done so.
  - a. Click the Search icon.
  - b. Type "Staff Calendar" in the search bar.
  - c. Select "Staff Calendar (Staff)" from the search results.
- g. Find the client's appointment on the Staff Calendar and click on it to open.
- h. This opens the service note. Change the status from "Scheduled" to "Show." This will create an alert in the provider's SmartCare letting them know that their appointment has arrived.
- i. Open the Client Programs list page. Find your program on the list and click on the link in the Status column, which should be listed as "Requested."
- j. This takes you to the Client Program Details screen. Change the Status to "Enrolled". This unlocks the Enrollment Date field. Enter today's date in the Enrollment Date field. Click Save.
- k. The next steps in the process are to complete the intake documentation packet, confirm the client's information, and for the clinician to complete the clinical assessment. Complete the documents you are responsible for. The following instructions will walk you through the basics of completing any document in SmartCare. If you need additional information on a specific form, see their respective section (e.g. Privacy and Consents; Clinical Documents; Intake and Other Forms; State Reporting).
  - a. Search for the document by clicking the Search icon, typing in the document name, and selecting the document from the search results.
  - b. Complete the document based on the client's responses. You are able to jump back and forth between documents, even if you haven't saved the document. Any unsaved documents can be easily accessed using the Unsaved Changes icon. You can also use the History icon to jump to recent screens and documents.
  - c. Once you've completed the document, click Sign. This will save the document as a pdf.

- d. If the client and/or guardian needs to sign the document, click the Plus button to show the signature ribbon.
- e. Select the co-signer from the list and click Co-Sign.
- f. This brings up the pop-up signature window. The co-signer can now sign using a signature pad, a mouse, or a touchpad. Select the method of capturing the signature. If the cosigner needs to start over, click the Clear button to erase the current signature. Once the co-signer is happy with their signature, click the Save button. If the client has signed a paper version of the form or has agreed verbally and is unable to sign electronically at this point, these are other options.
- l. If you have documents that were completed on paper that need to be scanned in to SmartCare, **[INSERT INSTRUCTIONS ON HOW TO SCAN IN DOCUMENTS]**

## **Front Desk: A person has walked in for an assessment at a walk-in clinic. What do I do?**

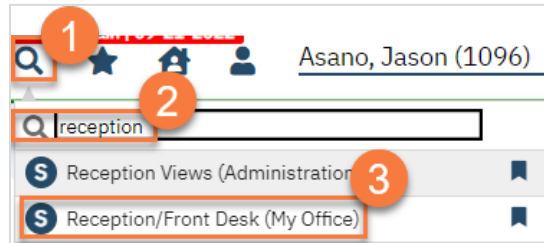
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2. Use the Client Search screen to determine if the person is a client already in the system.
  - e. If they are already a client in the system, select them to open their record.
  - f. If they are not a client in the system, create a new client.
3. Confirm the client needs an assessment. If you just created a new client, obviously they'll need an assessment. However, if the person was already a client in the system, you'll want to check to see if they already are connected to services.
  - a. Look at the Client Programs to see if the client is already open to a program that can share an assessment with your program.
  - b. Look at the client's Documents list page to see if they already have a valid assessment.
4. If the client does need an assessment, enroll them in your program.
  - a. Open the Client Programs list page.
  - b. Click the New icon.
  - c. Complete the Client Program Details screen.
5. The next steps in the process are to complete the intake documentation packet, confirm the client's information, and for the clinician to complete the clinical assessment. Complete the documents you are responsible for and let your clinical staff know that there is a client awaiting a clinical assessment. The following instructions will walk you through the basics of completing any document in SmartCare. If you need additional information on a specific form, see their respective section (e.g. Privacy and Consents; Clinical Documents; Intake and Other Forms; State Reporting).
  - a. Search for the document by clicking the Search icon, typing in the document name, and selecting the document from the search results.
  - b. Complete the document based on the client's responses. You are able to jump back and forth between documents, even if you haven't saved the document. Any unsaved documents can be easily accessed using the Unsaved Changes icon. You can also use the History icon to jump to recent screens and documents.
  - c. Once you've completed the document, click Sign. This will save the document as a pdf.
  - d. If the client and/or guardian needs to sign the document, click the Plus button to show the signature ribbon.
  - e. Select the co-signer from the list and click Co-Sign.
  - f. This brings up the pop-up signature window. The co-signer can now sign using a signature pad, a mouse, or a touchpad. Select the method of capturing the signature. If the cosigner needs to start over, click the Clear button to erase the current signature. Once the co-signer is happy with their signature, click the Save button. If the client has signed a paper version of the form or has agreed verbally and is unable to sign electronically at this point, these are other options.

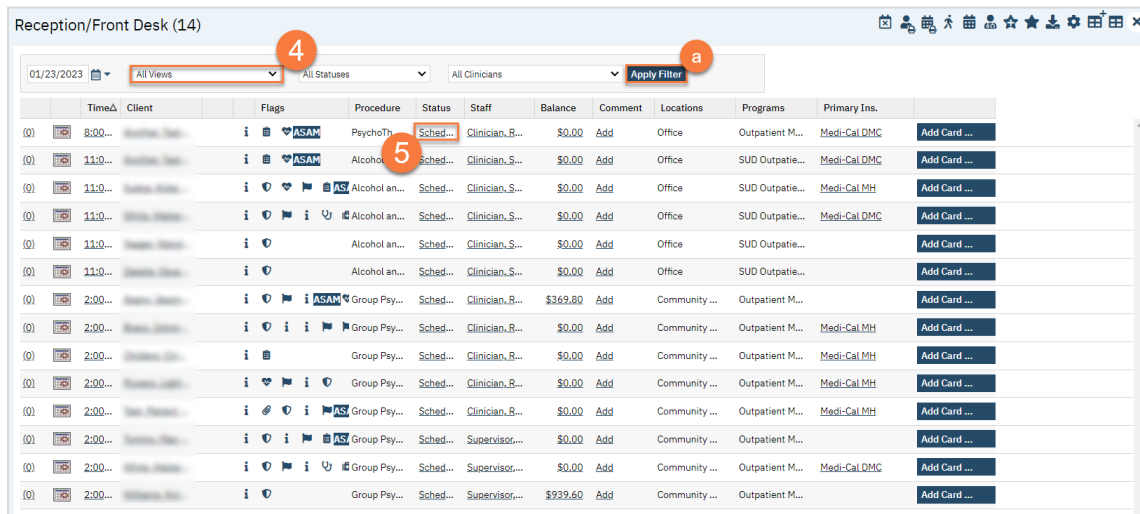
6. If you have documents that were completed on paper that need to be scanned in to SmartCare, **[INSERT INSTRUCTIONS ON HOW TO SCAN IN DOCUMENTS]**

## Reception View

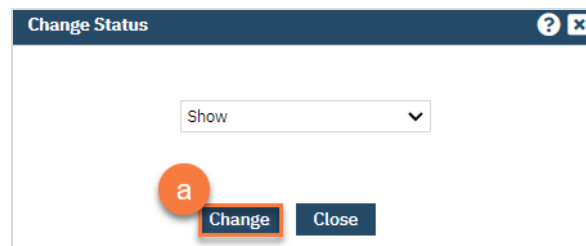
10. Click the Search icon.
11. Type “Reception” in the search bar.
12. Select “Reception/Front Desk (My Office)” from the search results.



13. This will bring up the Reception/Front Desk view. **Select your program from the Views dropdown menu.** Your system administrator can set up the appropriate list for your location. If you’ve used this screen before, it should populate from the most recent view you used.
  - a. **Click Apply Filter** to apply the view filter.
14. To check in a client, click the link in the Status column.

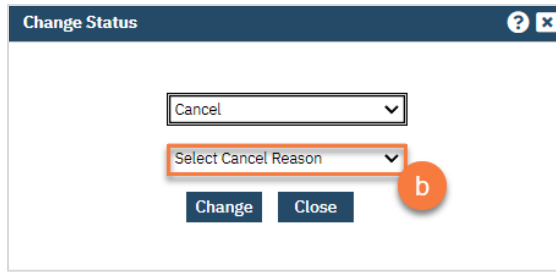


- a. This will bring up a pop-up window which auto-populates to “Show.” **Click Change** to check the client in.



- b. You can also use this to cancel the appointment or mark the client as a no-show. If you mark this as “Cancel,” you’ll need to enter the reason for cancellation. If you mark this as “cancel” or “no show,” you can NOT undo this.





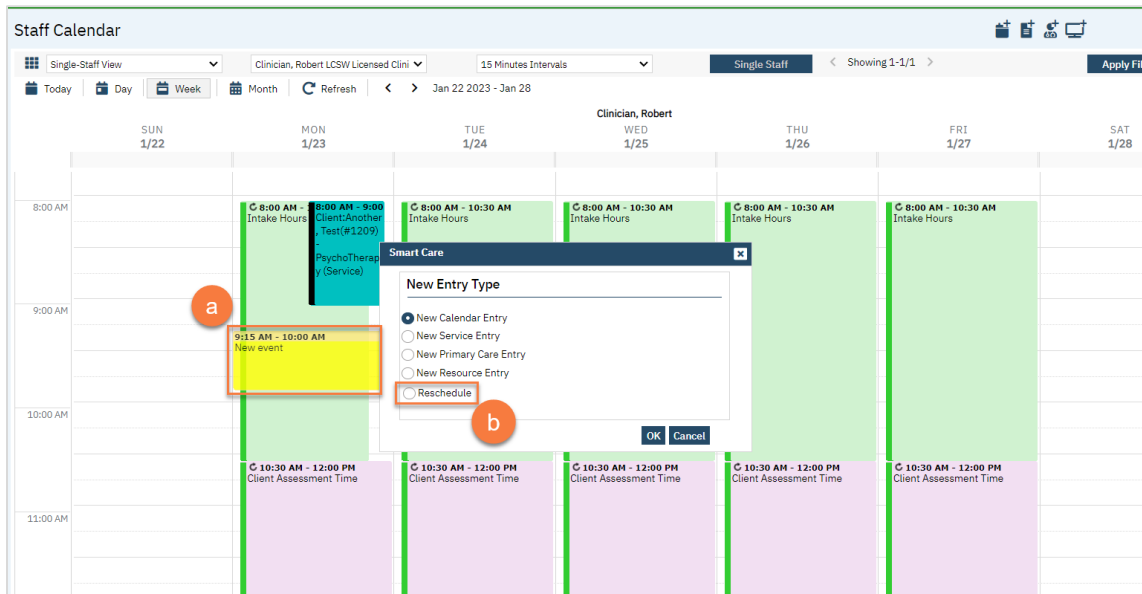
15. If you need to reschedule an individual appointment, click on the left-most link. This will open the Staff Calendar, where you can enter in the new appointment time.

Reception/Front Desk (14)

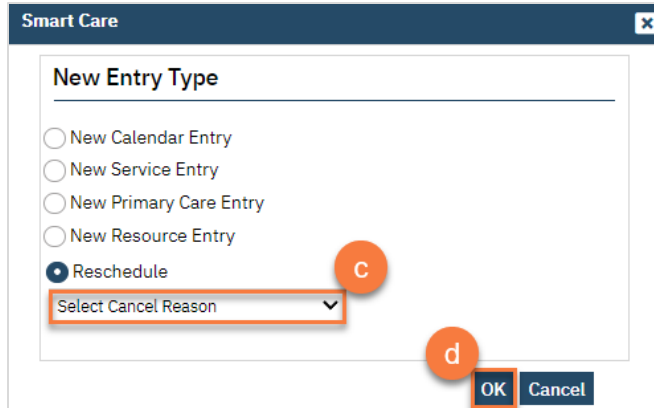
01/23/2023 All Views All Statuses All Clinicians Apply Filter

	Time	Client	Flags	Procedure	Status	Staff	Balance	Comment	Locations	Programs	Primary Ins.	
(0)	8:00...	...	i	ASAM PsychoTh...	Sched...	Clinician, B...	\$0.00	Add	Office	Outpatient M...	Medi-Cal DMC	Add Card ...
(0)	11:0...	...	i	ASAM Alcohol an...	Sched...	Clinician, S...	\$0.00	Add	Office	SUD Outpatie...	Medi-Cal DMC	Add Card ...
(0)	11:0...	...	i	ASAM Alcohol an...	Sched...	Clinician, S...	\$0.00	Add	Office	SUD Outpatie...	Medi-Cal MH	Add Card ...
(0)	11:0...	...	i	Alcohol an...	Sched...	Clinician, S...	\$0.00	Add	Office	SUD Outpatie...	Medi-Cal DMC	Add Card ...
(0)	11:0...	...	i	Alcohol an...	Sched...	Clinician, S...	\$0.00	Add	Office	SUD Outpatie...	Medi-Cal DMC	Add Card ...
(0)	11:0...	...	i	Alcohol an...	Sched...	Clinician, S...	\$0.00	Add	Office	SUD Outpatie...	Medi-Cal DMC	Add Card ...
(0)	2:00...	...	i	ASAM Group Psy...	Sched...	Clinician, B...	\$369.80	Add	Community ...	Outpatient M...	Medi-Cal DMC	Add Card ...
(0)	2:00...	...	i	Group Psy...	Sched...	Clinician, B...	\$0.00	Add	Community ...	Outpatient M...	Medi-Cal MH	Add Card ...
(0)	2:00...	...	i	Group Psy...	Sched...	Clinician, B...	\$0.00	Add	Community ...	Outpatient M...	Medi-Cal MH	Add Card ...
(0)	2:00...	...	i	Group Psy...	Sched...	Clinician, B...	\$0.00	Add	Community ...	Outpatient M...	Medi-Cal MH	Add Card ...
(0)	2:00...	...	i	ASAM Group Psy...	Sched...	Clinician, B...	\$0.00	Add	Community ...	Outpatient M...	Medi-Cal MH	Add Card ...
(0)	2:00...	...	i	ASAM Group Psy...	Sched...	Supervisor...	\$0.00	Add	Community ...	Outpatient M...	Medi-Cal DMC	Add Card ...
(0)	2:00...	...	i	Group Psy...	Sched...	Supervisor...	\$0.00	Add	Community ...	Outpatient M...	Medi-Cal DMC	Add Card ...
(0)	2:00...	...	i	Group Psy...	Sched...	Supervisor...	\$939.60	Add	Community ...	Outpatient M...	Medi-Cal DMC	Add Card ...

- Select the new appointment time.
- This brings up a pop-up that now has “Reschedule” as an option. Select Reschedule.



- Select the reason for the cancellation.
- Click OK to bring forward the old service information to this new service entry.



16. To schedule a follow-up for the client, click on the calendar icon. This will bring you to the Staff Calendar, where you can enter in a follow-up appointment.
17. You can add a comment to the service by clicking on the link in the Comment column.
18. To open the client's chart, click on the link in the Client column.

Reception/Front Desk (14)

TimeΔ	Client	Flags	Procedure	Status	Staff	Balance	Con	Locations	Programs	Primary Ins.	
8:00...		i	PsychoTh...	Sched...	Clinician_B...	\$0.00	Add	Office	Outpatient M...	Medi-Cal DMC	Add Card ...
11:0...		i	Alcohol an...	Sched...	Clinician_S...	\$0.00	Add	Office	SUD Outpatie...	Medi-Cal DMC	Add Card ...
11:0...		i	Alcohol an...	Sched...	Clinician_S...	\$0.00	Add	Office	SUD Outpatie...	Medi-Cal MH	Add Card ...
11:0...		i	Alcohol an...	Sched...	Clinician_S...	\$0.00	Add	Office	SUD Outpatie...	Medi-Cal DMC	Add Card ...
11:0...		i	Alcohol an...	Sched...	Clinician_S...	\$0.00	Add	Office	SUD Outpatie...		Add Card ...
2:00...		i	Group Psy...	Sched...	Clinician_B...	\$369.80	Add	Community ...	Outpatient M...		Add Card ...
2:00...		i	Group Psy...	Sched...	Clinician_B...	\$0.00	Add	Community ...	Outpatient M...	Medi-Cal MH	Add Card ...
2:00...		i	Group Psy...	Sched...	Clinician_B...	\$0.00	Add	Community ...	Outpatient M...	Medi-Cal MH	Add Card ...
2:00...		i	Group Psy...	Sched...	Clinician_B...	\$0.00	Add	Community ...	Outpatient M...	Medi-Cal MH	Add Card ...
2:00...		i	Group Psy...	Sched...	Supervisor...	\$0.00	Add	Community ...	Outpatient M...		Add Card ...
2:00...		i	Group Psy...	Sched...	Supervisor...	\$0.00	Add	Community ...	Outpatient M...	Medi-Cal DMC	Add Card ...
2:00...		i	Group Psy...	Sched...	Supervisor...	\$939.60	Add	Community ...	Outpatient M...		Add Card ...

# State Reporting

 Under Construction 

## CSI

 Under Construction 

**How do I complete the CSI demographic record?**

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 Under Construction 

**How do I complete the CSI Assessment Data record?**

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 Under Construction 

## CalOMS

 Under Construction 

**How do I complete the CalOMS Admission?**

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 Under Construction 

**How do I complete the CalOMS Referral/Transfer?**

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 Under Construction 

**How do I complete the CalOMS Discharge?**

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 Under Construction 

## Full-Service Partnership (FSP)

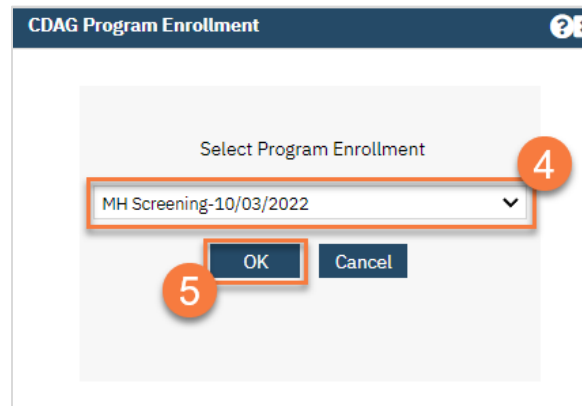
Clients who are identified as Full-Service Partnership (FSP) clients under the Mental Health Services Act (MHSA) have additional reporting requirements. These do not replace the need for a CSI or CalOMS report, but are in addition to them. In this section, we'll cover the required FSP documents. Depending on your county, this information will either be extracted from SmartCare and uploaded into the State's database or will have to be manually entered into it. Check with your county to determine what your process for FSP data is.

### How do I complete a PAF?

1. You must first have the client open, then **click the Search icon**.
2. **Type "FSP"** into the search bar.
3. **Click to select "California FSP PAF (Client)"** from the search results.



4. In the CDAG Program Enrollment window pop-up, **click the drop down** and **click to select** the appropriate program.
5. **Click OK** to continue.



6. The PAF document will open. Most of the screen will be blank until you enter the partnership date. This will determine what your client's PAF form will look like.

California FSP PAF

Effective 01/24/2023 Status New Author Rowe, Charla Sign

**Partner/Residential/Education**

**Initial**

FSP Program Name: Outpatient MH Adult 01/13/23 GUI ID: 66562129-4C7C-4517168481AB2F

Partnership Service Coordinator (PSC): Clinician, Robert Partnership Date: [Calendar Icon]

Partner County: Imperial Referral Source: [Dropdown]

DOB: 06/07/2002 Partnership Age: Partnership Form Type:

California FSP PAF

Effective 01/24/2023 Status New Author Rowe, Charla Sign

**Partner/Residential/Education** **Employment/Financial** **Justice/EI/Health/SU**

**Initial**

FSP Program Name: Outpatient MH Adult 01/13/23 GUI ID: 66562129-4C7C-4517168481AB2F

Partnership Service Coordinator (PSC): Clinician, Robert Partnership Date: 01/24/2023

Partner County: Imperial Referral Source: [Dropdown]

DOB: 06/07/2002 Partnership Age: 20 Partnership Form Type: PAF TAY

FORMER AB2034 Partner:  Yes  No

Additional Programs partner is currently involved with:  Governor's Homeless Initiative (GHI)  MHSA Housing Program

**Residential Information (includes hospitalization and incarceration)**

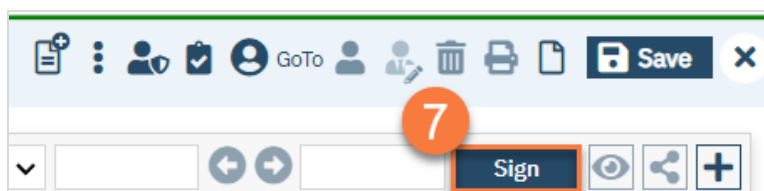
Please check at least one checkbox PRIOR TO THE LAST 12 MONTHS

Setting	Most recently when?	During the Past 12 Months Indicate the Total:		Prior to the Last 12 Months
		# Occurrences	# Days (must = 365)	
<b>Child/TAY Residential Information - General Living Arrangement</b>				
<b>General Living Arrangement</b>				
With one or both biological/adoptive parents	<input type="checkbox"/> Tonight	0		<input type="checkbox"/>
	<input type="checkbox"/> Yesterday (as of 11:59 p.m. the day BEFORE the partnership)			
With adult family member(s) other than parents	<input type="checkbox"/> Tonight	0		<input type="checkbox"/>
	<input type="checkbox"/> Yesterday (as of 11:59 p.m. the day BEFORE the partnership)			

- a. There is a lot of logic built into the form. If you need help understanding how to complete this form, talk to your supervisor or FSP manager for assistance. We have put in tips to try to help, but these forms may be overwhelming for some.

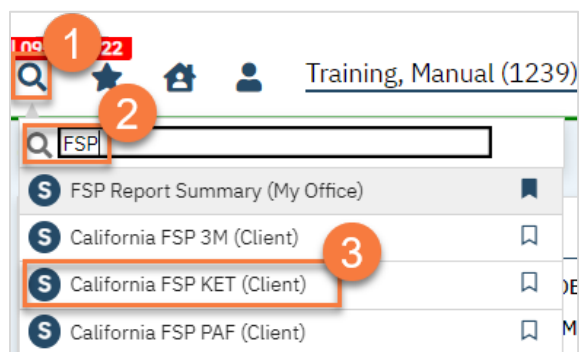
Time Spent in Education Current/Past Twelve Months		
Number of weeks should add up to be 52 weeks! Please check at least one checkbox IS CURRENTLY! Note for TAY - For Youth Who are NOT Required by Law to Attend School		
For the educational settings below, indicate where the partner...	Was During THE PAST 12 MONTHS # of weeks	is CURRENTLY
Not in school of any kind	0 <input type="text"/>	<input type="checkbox"/>
High School/Adult Education	0 <input type="text"/>	<input type="checkbox"/>
Technical/Vocational School	0 <input type="text"/>	<input type="checkbox"/>
Community College/4 year College	0 <input type="text"/>	<input type="checkbox"/>
Graduate School	0 <input type="text"/>	<input type="checkbox"/>
Other	0 <input type="text"/>	<input type="checkbox"/>
<div style="border: 1px solid orange; padding: 2px; display: inline-block;"> <b>Total # of Weeks</b>            MUST = 52         </div>		0 <input type="text"/>

- Once you've completed all fields on all tabs, **click Sign** to complete and generate the document.

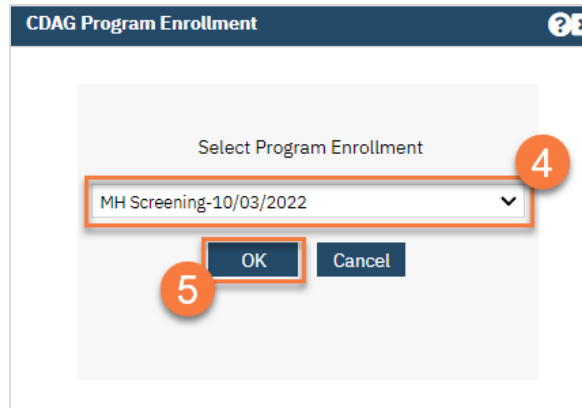


## How do I complete a KET?

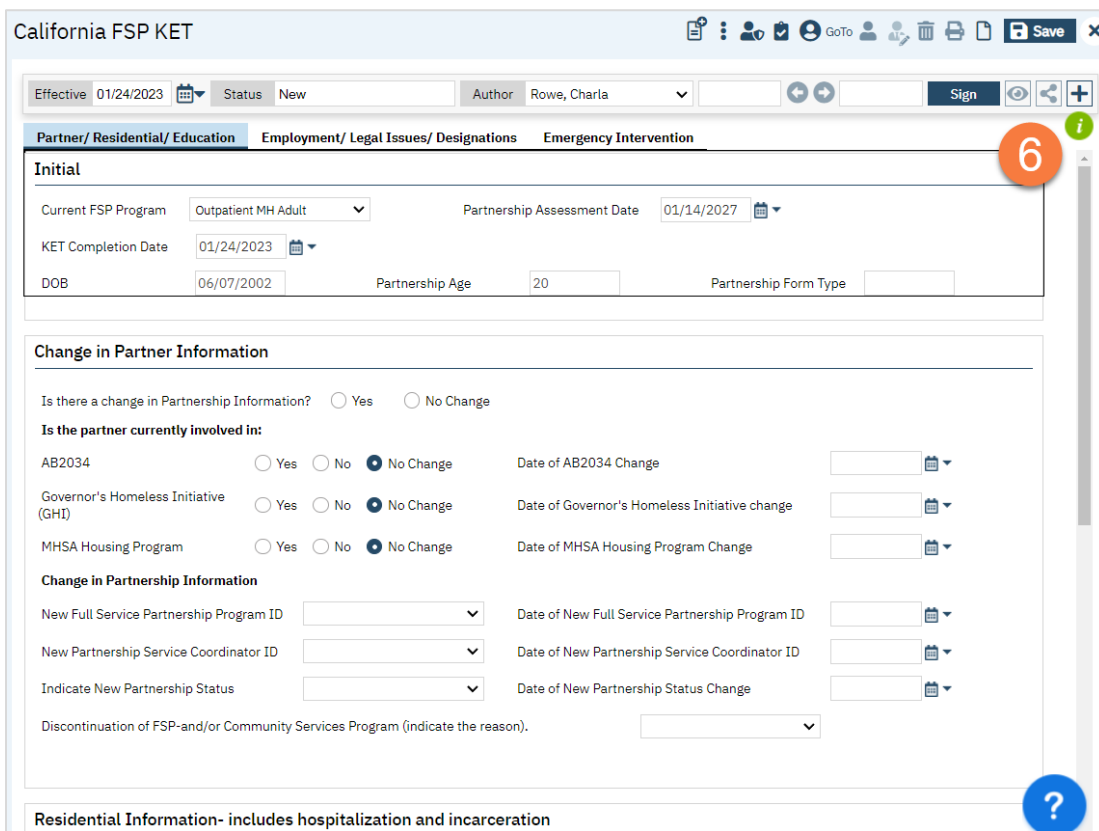
- You must first have the client open, then **click the Search icon**.
- Type "FSP"** into the search bar.
- Click to select "California FSP KET (Client)"** from the search results.



- In the CDAG Program Enrollment window pop-up, **click the drop down** and **click to select** the appropriate program.
- Click OK** to continue.



- The FSP KET document will open. **Complete the document.** There is logic built into the form, based on the FSP KET reporting rules. If you need help understanding how to complete this form, talk to your supervisor or FSP manager for assistance.

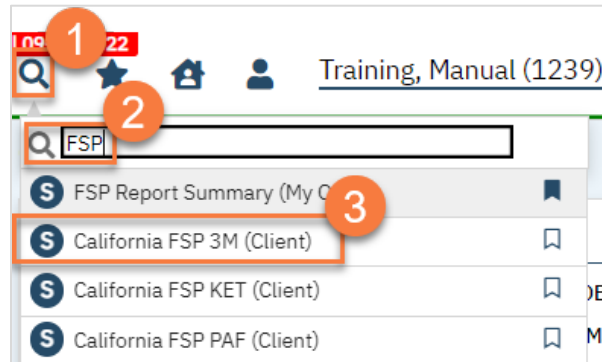


- Once you've completed all fields on all tabs, **click Sign** to complete and generate the document.

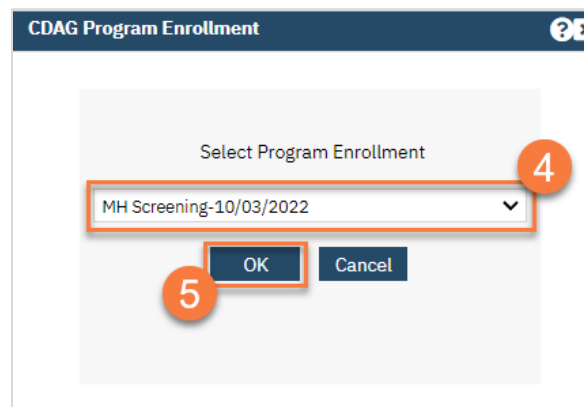


## How do I complete a 3M?

1. You must first have the client open, then **click the Search icon**.
2. **Type “FSP”** into the search bar.
3. **Click to select “California FSP 3M (Client)”** from the search results.



4. In the CDAG Program Enrollment window pop-up, **click the drop down** and **click to select** the appropriate program.
5. **Click OK** to continue.



6. The FSP 3M document will open. **Complete the document**. There is logic built into the form, based on the FSP 3M reporting rules. If you need help understanding how to complete this form, talk to your supervisor or FSP manager for assistance.



California FSP 3M

Effective: 01/24/2023 Status: New Author: Rowe, Charla

Partner/Residential/Education Financial Legal/Health/SU

**Initial**

Current FSP Program: Outpatient MH Adult Partnership Assessment Date: 01/18/2023

Effective Date of Assessment: 01/24/2023 Date of the most recent FSP Assessment (PAF or 3M):

DOB: 06/07/2002 Partnership Age: 21 Partnership Form Type: TAY 3M

**Education-Child/Youth/TAY**

Is the child/youth currently receiving special education due to serious emotional disturbance?  Yes  No

Is the child/youth currently receiving special education due to another reason?  Yes  No

**Education-For Children/Youth who are required by law to attend school**

Estimate the child/youth's attendance level CURRENTLY:	CURRENTLY, the child/youth's grades are:
<input type="radio"/> Always attends school (never truant)	<input type="radio"/> Very Good
<input type="radio"/> Attends school most of the time	<input type="radio"/> Good
<input type="radio"/> Sometimes attends school	<input type="radio"/> Average
<input type="radio"/> Infrequently attends school	<input type="radio"/> Below Average
<input type="radio"/> Never attends School	<input type="radio"/> Poor

7. Once you've completed all fields on all tabs, **click Sign** to complete and generate the document.

GoTo Save

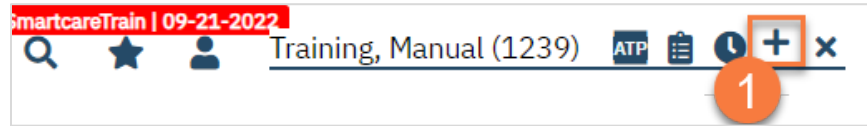
Sign

# Other Functionality

Introduction?

## How do I create a flag to alert treatment team members to important client information?

1. Make sure you have the client open. Click the plus icon next to the client's name.



2. This takes you to the Client Flag Details screen. **Add the relevant information in the Note Information section.** Your user role may only allow certain information to be completed. For example, a supervisor may have additional permissions that a clinician does not.
  - a. **Select the type of flag.** Your system will have a list of flags to choose from.
  - b. Make sure to **include your program.** This will ensure client privacy is upheld.
  - c. **Select the level of the flag.** The options are: Information, Urgent, and Warning.
  - d. Enter the specific language of the flag in the Note field.
  - e. **Enter the display date.** If there is a due date, enter the Open Date (date it became available) and the Due Date (the date the task is due).
  - f. If you need to assign this task to a specific user, you can enter that information in. You can also assign this task based on the treatment team role. An example would be to alert all nurses working with the client of a lab that's due.
  - g. Enter any additional comments as needed.
  - h. You can also choose how the flag is displayed. If you want this flag to show as a pop-up when opening the client's chart, make sure to mark "Always Pop Up."
  - i. Once you've entered all the information, **click Insert.**
  - j. This adds the flag to the Note List section at the bottom of the screen.

**Client Flag Details**

**Note Information**

Type  ID  Work Group   Active

Level  Protocol  Protocol Flag ID  Program   This flag recurs

Note

Open Date  Display Date  Due Date  End/Completed Date

Link to  Completed By

Nothing  Document

Assigned Users  Assigned Roles

No data to display No data to display

Comment

Permissioned Flag  Do not display flag  Never Pop Up  Always Pop Up

**Note List**  Show Active Only

	Note Type	Work Group	Level	Note	Display	End	Created By	Created On
X	<input type="radio"/> CalAIM Assessment Need...		Information	CalAIM Assessment Need...	01/09/2023		MH Outpatie...	01/09/2023
X	<input type="radio"/> CSI admission	Outpatient ...	Information	CSI admission	01/09/2023		MH Outpatie...	01/09/2023
X	<input type="radio"/> Demographics Update Due		Information	Demographics Update Due	01/09/2023		MH Outpatie...	01/09/2023

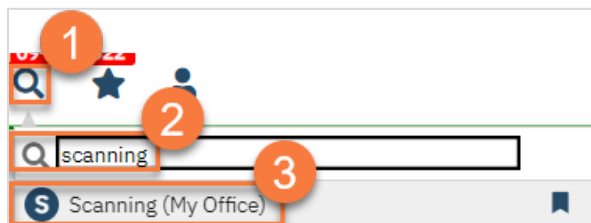
3. Once you've added all flags, click **Save**. You are now finished and may close this screen.



## How do I scan a document into the client's record?

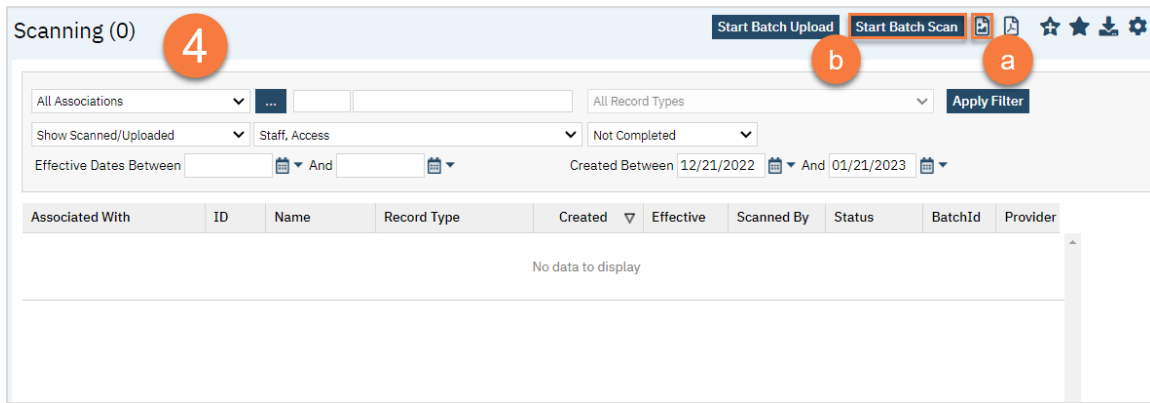
Sometimes documents are completed on paper, but need to be included in the client's record. In this section, we'll cover how to scan a document into the client's record.

1. Click the Search icon.
2. Type "Scanning" in the search bar.
3. Select "Scanning (My Office)" from the search results.



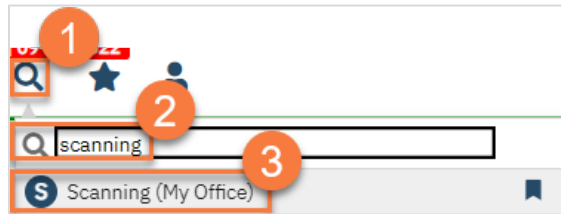
4. To scan, you need a scanner attached to your workstation. Scanning will use your scanner's software but save it in SmartCare.
  - a. To scan a single document, click the "Scan New Images" icon.

b. To scan multiple documents in a batch, click the “Start Scan Upload” button.

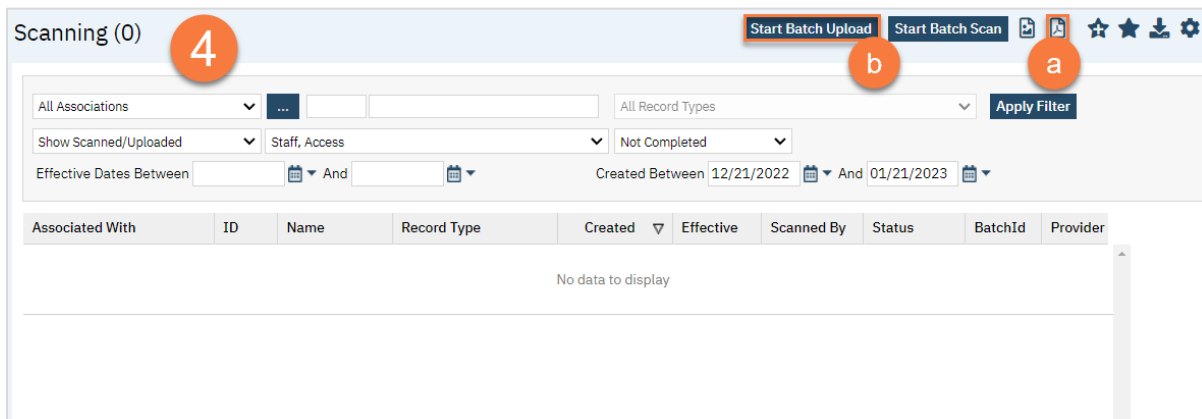


## How do I upload a document into the client’s record if I don’t have a scanner?

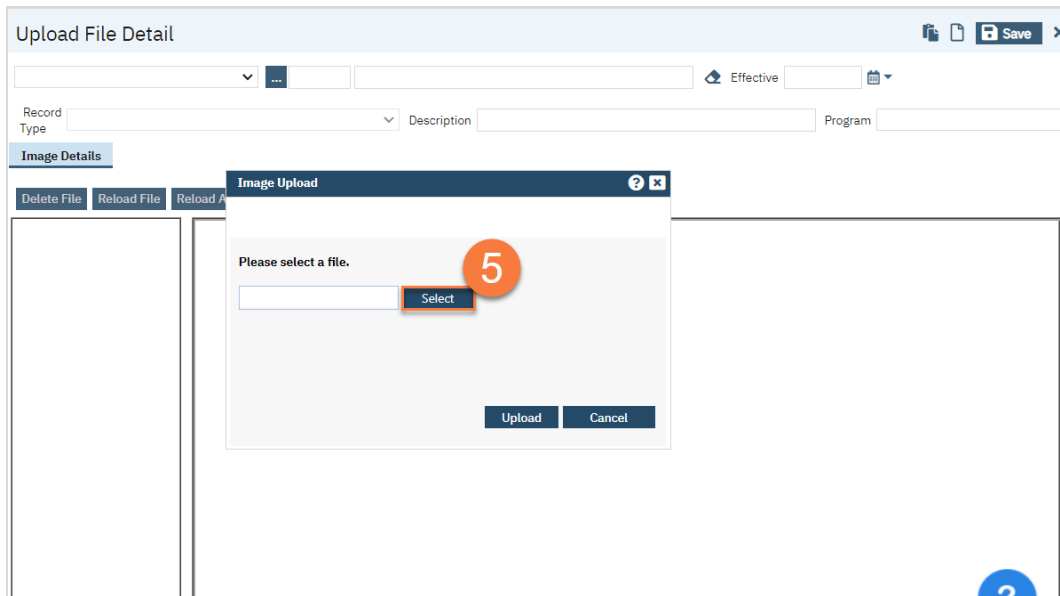
1. Click the Search icon.
2. Type “Scanning” in the search bar.
3. Select “Scanning (My Office)” from the search results.



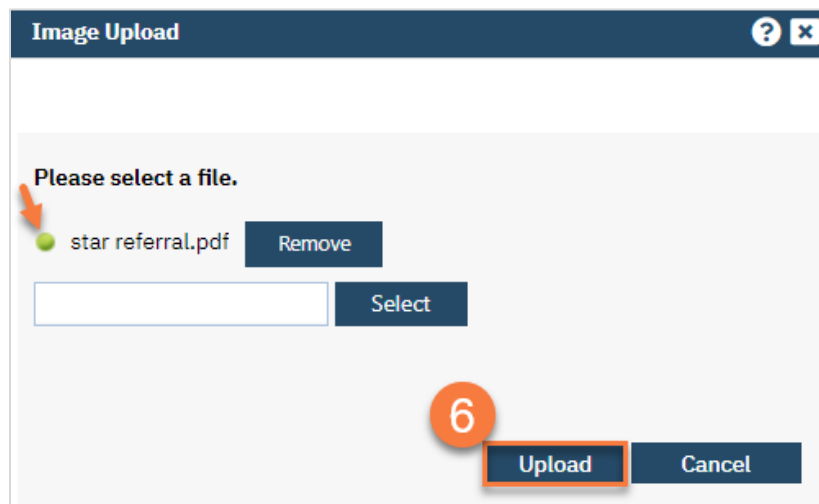
4. You can upload documents one at a time or as a batch.
  - a. To upload a single document, click the “Upload New Images” icon.
  - b. To upload multiple documents in a batch, click the “Start Batch Upload” button.



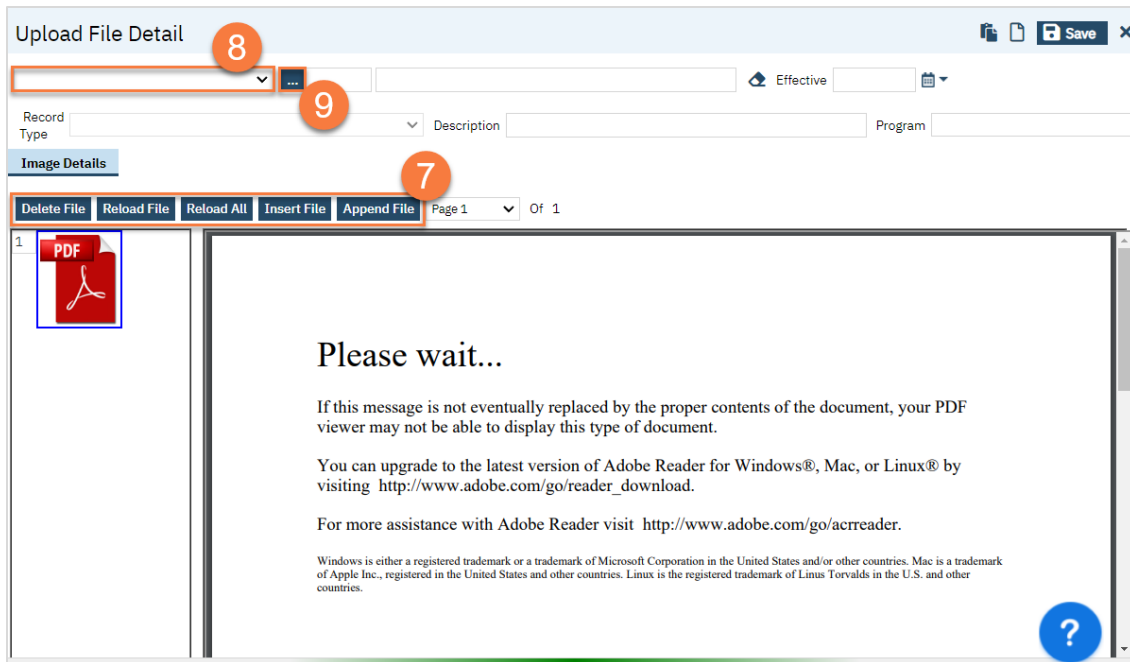
5. Choosing upload will open the Upload File Detail screen. This will include a pop-up. Click **Select** to find the file on your computer.



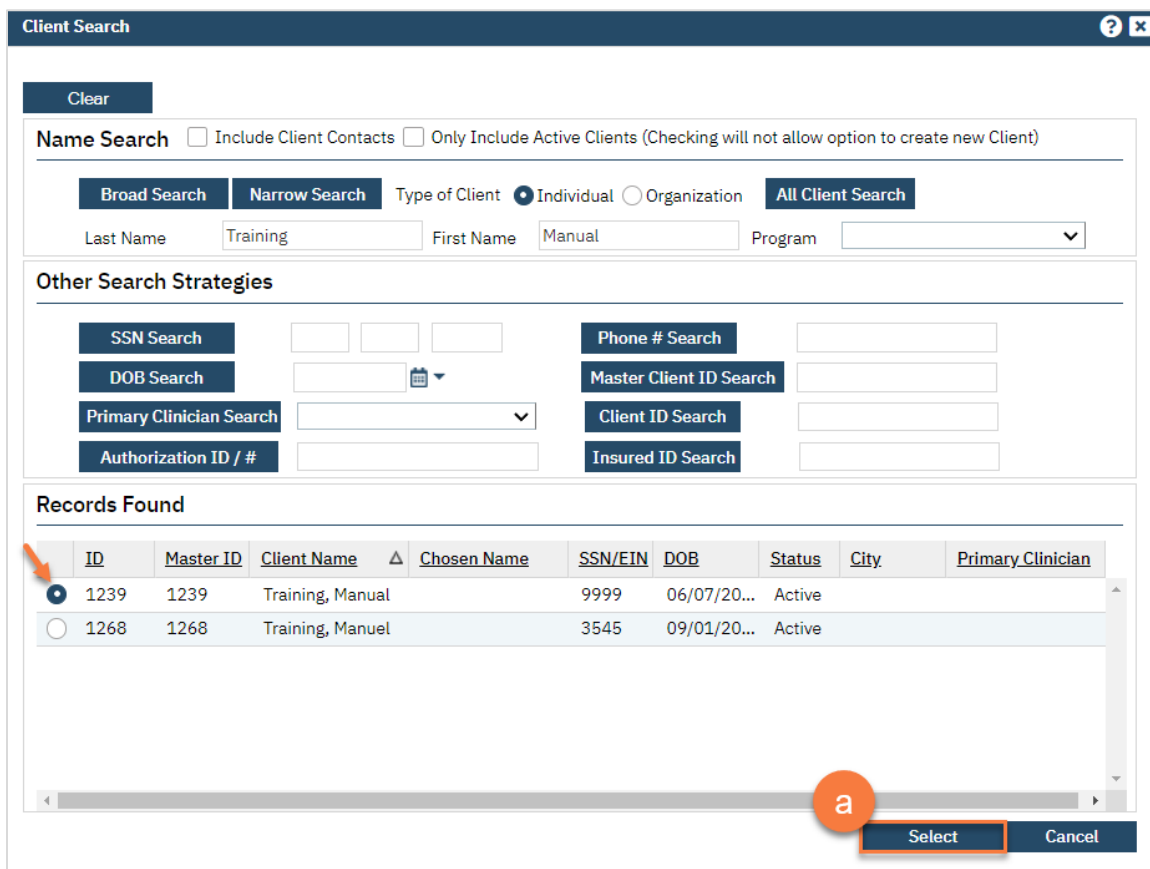
6. Once it's ready, a little green circle will appear next to it. **Click Upload.**



7. This will show you the PDF. Confirm you uploaded the correct document. **Make corrections as needed** using the buttons at the top of the PDF viewer.
8. **Select "Client (Medical Records)"** from the first dropdown menu.
9. **Click on the "..."** button to find the client.



- a. This will bring up the client search. Use the client search to find the client. Click Select when you've located the client.



10. Select the Record Type.
11. Enter the description of the document.
12. Enter the program the document is associated with.
13. Enter the Effective date of the document.
14. Click Save.

Upload File Detail

Client (Medical Records) ... 1239 Training, Manual Effective

Record Type All Record Types Description Program Outpatient MH Adult-01/13/2023

Image Details

Delete File Reload File Reload All Insert File Append File Page 1 Of 1

1 PDF

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