DCR Frequently Asked Questions

Q1: Help? I forgot my DCR username and/or password!

A: Below the log in box, click "forgot user name or password?". You can contact ITWS by mail, email or phone call:

- Go to <u>https://mhhitws.cahwnet.gov/comment.asp</u> to send ITWS a note; or
- E-mail ITWS at ITWS@dmh.ca.gov; or
- Telephone ITWS at (916) 654-3117 or (916) 654-3445.

Q2: When I open up the DCR, all the pulldown menus are blank. How do I fix this?

A: There appears to be a problem with viewing the DCR in Internet Explorer version 8. You will need to use the Compatibility View.

Go to <u>www.microsoft.com/windows/internet-explorer/features/easier.aspx</u> for more information or search the IE help menu for Compatibility View

Q3: Which ID numbers are required by San Diego County on the PAF?

A: You need to enter:

- CSI County Client Number (CCN) the Anasazi ID
- Provider number / NPI format is 37xx
 - If this is missing from existing clients, use a KET to add it.
- The FSP Program ID
- The Partnership Service Coordinator ID

Q4: For the programs that converted to FSPs, what is the appropriate date to enter as the Partnership Date? Is it the date we originally opened the case in the FSP subunit OR the date the PAF was completed?

A: You should enter the Partnership Date as the first time the client received a service after your program became an FSP.

Q5: Our FSP Program ID was recently changed by the state? How do we change this in the DCR?

A: For each active client, you will enter a KET reflecting the FSP Program ID change. The date should be the first time you see the client after the FSP Program ID was changed (e.g. 1/1/2010 for the recent change).

Q6: A large number of our PAFs are listed as pending due to "CSI # did not match our records or CSI # is blank." How do we fix these so they are removed form the list?

A: Once the PAF is in, it will update automatically. It does take a while for the CSI to come up (up to 6 months). Double check the CSI #, but if it is correct, you just need to wait for it to update on its own.

Q7: Can you change dates in the PAF, either the Partnership Date or the Partner's Date of birth, after the data has been submitted? If so, how do we do that?

A: Programs <u>cannot</u> edit the Partnership Date. If you need to change the partnership date (e.g. you entered 1/5/2009 instead of 1/5/2010), you need to contact Saya Eto-Barba for Children's programs, and Bret Vedder for adult programs. They have Administrative Read/Write access and can delete the PAF. You will then need to re-enter the PAF with the correct date.

You <u>can</u> edit the client's DOB but <u>we do not recommend it</u> because this date determines what forms come up. If there is a big difference, it may result in the wrong forms appearing (e.g. TAY client has Child PAF). If you need to change the date and it will affect the form type, contact Saya Eto-Barba or Bret Vedder to delete the PAF. You will then need to re-enter the PAF with the correct birth date.

Q8: We are trying to enter a new client, but keep getting the following error message when entering the CSI # on a PAF: "CSI # already exists in system." What does this mean?

A: This client has been or is already open to another FSP. You should check in Anasazi to see whether they are currently open to an FSP. The program manager should have a list of FSP subunits.

If they are not currently open to another FSP and discharged from the FSP <u>less than one year ago</u>, you do not need to submit a PAF. Instead, enter a KET with the date the FSP Program ID changed.

If they are currently open to another FSP, the original FSP will be responsible for entering the DCR data.

Example: Client opens to TBS services through an FSP program while already in an FSP. The TBS program would not enter any data in the DCR, but need to work with the primary FSP program.

If you have questions about sharing clients between 2 FSPs, please contact your COTR.

Q9: If a client has gone to ESU, then immediately after moved to the hospital, do we need to do two KETs?

A: Yes. Those are two separate Key Events and need to be tracked individually.

Q10: We need to enter an assessment for a client that was previously discharged from our program, but is now back. How do we enter a new assessment for the client, since the system states the CSI number already exists for another partner?

A: You need to go to the Inactive partner list (under the Partnerships tab) and reactivate that partner.

The system will either generate a PAF (if the break was one year or longer) or generate a KET (if break was less than one year) to track changes during the break time.

Q11: I found a KET that should have been entered for a client who has been discharged. Can I enter data for a closed/inactivated client in the DCR?

A: This situation is tough because we do want all available data for the client. However, the DCR does not allow data to be entered for an inactive client. One workaround is to

- 1) re-activate the client using a KET for the same date of the discontinuation,
- 2) enter the missed KET, and
- 3) discontinue again using a KET with the same original discontinuation date.

Q12: We made an error on a KET and want to re-enter the data correctly. Can a KET be deleted?

A: You do not need to delete the KET. As long as there is no discontinuation or re-establishment indicated on the KET, just open the KET, enter the correct information, and then re-submit.

If the KET contains a discontinuation or re-establishment, you cannot edit these KETs.

If you accidentally discontinued a client, then re-establish using a KET with the same date.

Q13: How do you correctly report a crisis situation for a client? On the KET, we entered the data under Residential Information (hospital) and also entered it under Emergency Intervention. Is this the correct process?

A: YES! You are correct in reporting it as both a residential status change and as an emergency intervention. Emergency interventions and residential statuses are analyzed separately, so it will not be counted twice.

Q14. We're concerned that the categories under "Licensed Residential Treatment" include such a wide array of programs from crisis to long term. If a client goes from a short-term program to a stable living situation (long-term), do we need to submit a KET since the category has not changed?

A. There should be a new KET submitted every time there is a <u>physical</u> residential change, even if the overall category does not change.

A new KET form is submitted EACH time there is a change in residence; both changes in residential categories and moves between residences are tracked via the KET. This is described in the "Companion Guide for Full Service Partnerships" on page 9.

Q15: What do we enter in the Sources of Financial Support question? Is it the child's income, the caregiver's income, or both?

A: You need to enter all sources of financial support that are <u>used to meet the client's needs</u>. This may include their own income (e.g. disability, social security) and/or their caregiver's.

Q16: What do we choose for the Sources of Financial Support question for children who are dependents of the court (e.g. living in foster or group home)?

A: The best choice is Other, as there is no category to reflect the support that Child Welfare provides.

Q17: How do we fill out the Education section for a child who is under 5 and has never been to school?

A: If they are in day care or preschool, you can mark these.

If they have never attended any sort of school, mark "Level Unknown" and leave the attendance and grades sections blank.

Q18: If a client has gone to an Emergency Room, then immediately after, moved to a hospital do we need to do two KETs?

A: Yes. Those are two separate Key Events and need to be tracked individually.

Q19: If a client has been discharged from our program, and inactivated in the DCR, when they return back to our program in less than a year's time, will the old quarterlies show up again when they are reactivated in the DCR?

A: When a client is reactivated, you will see the old quarterlies if they return back in less than a year. You do not need to complete these quarterlies during the discontinued time, but we ask that you complete KETs to record what key changes occurred during that time.

Q20: If you need to go back and enter data on a closed client in the DCR, how do you do that?

A: This situation is tough because we do want all available data for the client, however the DCR does not allow data for a discontinued client to be updated. One workaround is to re-activate the client with the same date of the discontinuation, enter all missing data, then discontinue again using the same original discontinuation date.

Q21: A provider made an error on a KET and asked for it to be deleted so they could reenter correctly. Can a KET be deleted for a provider?

A: As long as there is no discontinuation or re-establishment indicated on the KET, just open the KET and clear out all the fields then re-submit. This will delete the KET (but you may still see it on the outcomes assessments table).

If the KET does contain a discontinuation or re-establishment, you cannot edit these KETs. If you accidentally discontinued, then re-establish using the same date.

If a KET has a discontinuation or re-establishment listed on it, this KET cannot be edited regardless of what the changes are (for instance even if you needed to change something on a different domain). The DCR at this time does not allow these KETs to be edited and re-submitted. It is the date of change (Date of Partnership Status Change) that is important. If that date is 1/23/09, then it's okay that the entry date is 2/9/09. Unfortunately, we don't have a way of changing the date if it is incorrect.

Q22: A provider is trying to enter an assessment for a client that they previously had in the program and had discharged, but is now back. How do they enter a new assessment for the client, since the system states the CSI number already exists for another partner?

A: The user needs to go to the Inactive partner list (under the Partnerships tab), then reactivate that partner. The system will either generate a PAF (if the break was one year or longer) or generate a KET (if break was less than one year) to track changes during the break time.

Q23: How do you correctly report a crisis situation for a client, primarily upon entering the psych hospital or a crisis program. On the KET, the data has been entered under Residential Information under the hospital or residential program subsets but then also entered under Emergency Intervention. Is this the correct process or is this resulting in double the data being shown in the system for only one event?

Also, I've received concerns over the category under Residential Program to include such a wide array of programs from crisis to long term. If a client goes from a crisis program to a stable living situation (long-term) it doesn't indicate a change in their residential information. Any recommendations?

A: You are correct in reporting it as both a residential status change and as an emergency intervention. Although it is reported twice, emergency interventions and residential statuses are analyzed separately so one occurrence would not be interpreted as two.

Regarding your second issue about how residential statuses may be interpreted (i.e. crisis stablization vs. long term placement), there should be a new ket submitted every time there is a physical residential change as well as a change in status. I believe this is described in the "Companion Guide for Full Service Partnerships" on page 9. "In order to track residential changes over time, a new KET form is submitted EACH time there is a change in residence; both changes in residential categories and moves between residences are tracked via the KET."

I have included the link to the companion guide for your reference. http://www.dmh.cahwnet.gov/POQI/docs/FSPCompanionGuide02072008.pdf

In addition, when we do the analyses of the data we weight length of stay as well as status so that longer stays receive more weight than shorter ones.

Q24: Two different programs that we have been providing assistance to have had the same error message, when entering the CSI # on a PAF: "CSI # already exists in system."

We speculate that this error message exists because another program has not yet discharged the partner who has discontinued services and is now entering a new program. Is this correct? We are wondering how this can be fixed.

A: If a person moves from one program to another, you would not create a new PAF. What you would do is submit a KET to move a partner from one program to another, unless it has been more than one year.

Q25: "So, will it always be safe to assume that when a client ID number is already in the system, I should just request a KET? How am I to be sure that it really is because they are in another program? Could it also be that someone may have entered the incorrect number for a different client?"

A: When you build this model, there is only 1 PAF and only 1 CSI associated with that PAF. Any program or change would fall under the PAF. You would submit a KET under the PAF, not request a KET. The counties should be tracking their PAF and know when a program change has taken place for the PAF (see diagram below).



> Everything falls under the original PAF