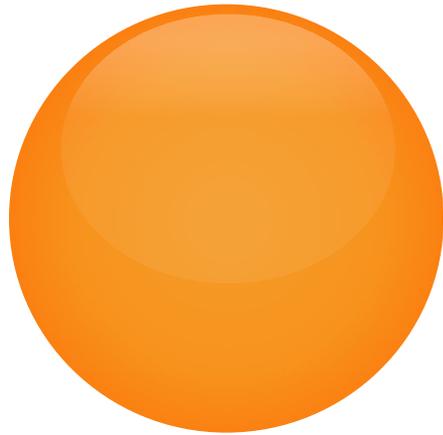




October 15, 2014 10:00- 11:30 am

Avatar

Client Look up, Episode Opening & Closing, Updating Client Demographics, & Client Relationships



Presenter Alys C. Herring
Provider Analyst
aherring@smcgov.org
650-573-3538

BHRS , 225 37th, Room 300, San Mateo, CA 94403

Today's Agenda

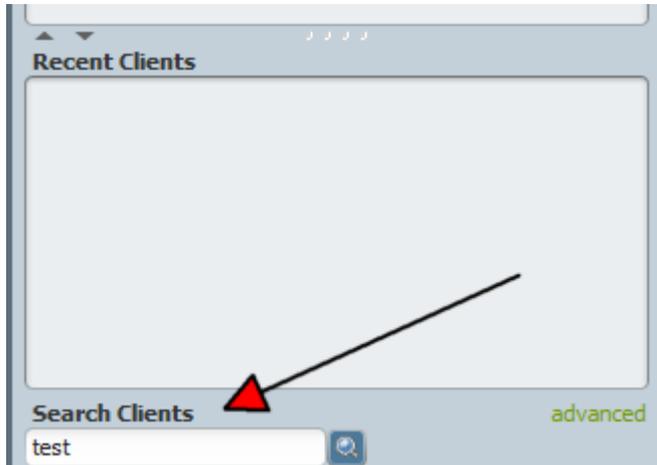




AVATAR Client Lookup



Avatar Client Lookup



Clients can be searched in Avatar various ways:
by Avatar ID, Birth date, SSN, Alias, Last Name

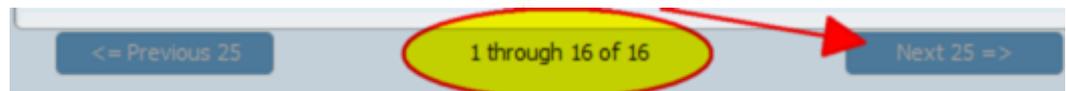
Steps

1. In the Search Client screen, enter the client's last name, SSN, Birth date, Avatar ID or Alias

2. Avatar utilizes “**Smart Search**” all clients with the same last name or sounding like your client's last name will appear. For the name “Test” there are 16. If there were more they would appear on the “Next 25”

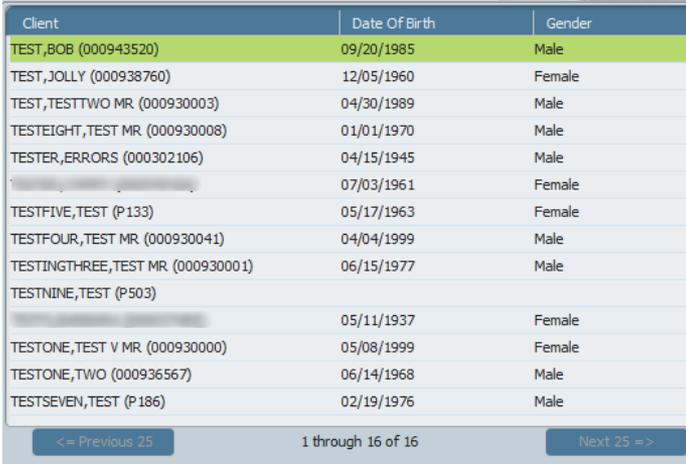
Client	Date Of Birth	Gender
TEST,BOB (000943520)	09/20/1985	Male
TEST,JOLLY (000938760)	12/05/1960	Female
TEST,TESTTWO MR (000930003)	04/30/1989	Male
TESTEIGHT,TEST MR (000930008)	01/01/1970	Male
TESTER,ERRORS (000302106)	04/15/1945	Male
	07/03/1961	Female
TESTFIVE,TEST (P133)	05/17/1963	Female
TESTFOUR,TEST MR (000930041)	04/04/1999	Male
TESTINGTHREE,TEST MR (000930001)	06/15/1977	Male
TESTNINE,TEST (P503)		
	05/11/1937	Female
TESTONE,TEST V MR (000930000)	05/08/1999	Female
TESTONE,TWO (000936567)	06/14/1968	Male
TESTSEVEN,TEST (P186)	02/19/1976	Male

<= Previous 25 1 through 16 of 16 Next 25 =>



Avatar Client Lookup

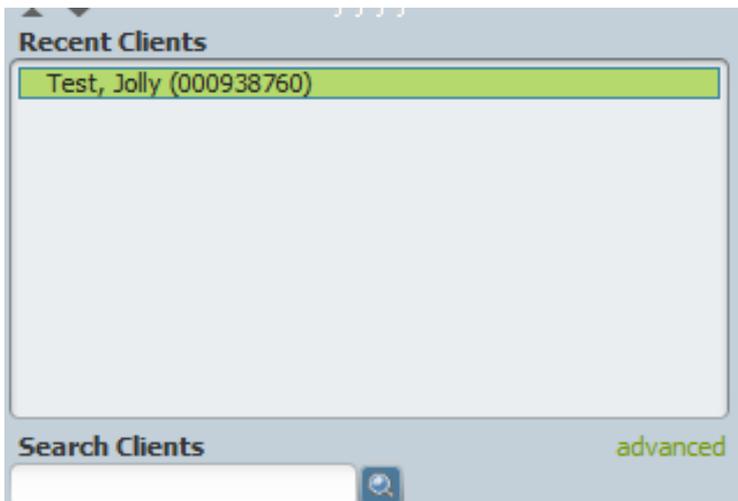
3. By clicking on a client, it becomes highlighted (green).



Client	Date Of Birth	Gender
TEST,BOB (000943520)	09/20/1985	Male
TEST,JOLLY (000938760)	12/05/1960	Female
TEST,TESTTWO MR (000930003)	04/30/1989	Male
TESTEIGHT,TEST MR (000930008)	01/01/1970	Male
TESTER,ERRORS (000302106)	04/15/1945	Male
[REDACTED]	07/03/1961	Female
TESTFIVE,TEST (P133)	05/17/1963	Female
TESTFOUR,TEST MR (000930041)	04/04/1999	Male
TESTINGTHREE,TEST MR (000930001)	06/15/1977	Male
TESTNINE,TEST (P503)		
[REDACTED]	05/11/1937	Female
TESTONE,TEST V MR (000930000)	05/08/1999	Female
TESTONE,TWO (000936567)	06/14/1968	Male
TESTSEVEN,TEST (P186)	02/19/1976	Male

<= Previous 25 1 through 16 of 16 Next 25 =>

4. Once selected, the client is placed in the **“Recent Clients”** box



Recent Clients

Test, Jolly (000938760)

Search Clients  **advanced**



Avatar

Episode Opening

Admission (Outpatient)

Home **New C**

New Client (000954738)

Admission (Outpatient)

Admission

Demographics

SMC BHRS Fields

Submit

Online Documentation

Episode Number **1**

Client Name
TEST, JIMBO

Sex
 Female Male Other Unknown

Date Of Birth

Age

Preadmit/Admission Date

Preadmit/Admission Time

Program

Type Of Admission

Source Of Admission

Primary Therapist / Counselor

Primary Psychiatrist / Supervisor

Anniversary Date (MM/DD)

SMC MRN / ID (MIS use ONLY)

Social Security Number

Alternate Social Security Number

Client's Living Arrangements

Disabilities-1

- None
- Semi - Ambulatory
- Non - Ambulatory
- Severe Sight Disability
- Blind
- Organic Based Communication Disability
- Chronic Health Problem
- Mental Retardation / Developmental Disability
- Severe Hearing Disability
- Deaf
- Sign Language Interpreter

Disabilities-2

- None
- Semi - Ambulatory
- Non - Ambulatory
- Severe Sight Disability
- Blind
- Organic Based Communication Disability
- Chronic Health Problem
- Mental Retardation / Developmental Disability
- Severe Hearing Disability
- Deaf
- Sign Language Interpreter

Disabilities-3

- None
- Semi - Ambulatory
- Non - Ambulatory
- Severe Sight Disability
- Blind
- Organic Based Communication Disability
- Chronic Health Problem
- Mental Retardation / Developmental Disability
- Severe Hearing Disability
- Deaf
- Sign Language Interpreter

Received Copy Of Client Rights Yes No

Advanced Directive Yes No

Advanced Directive Note

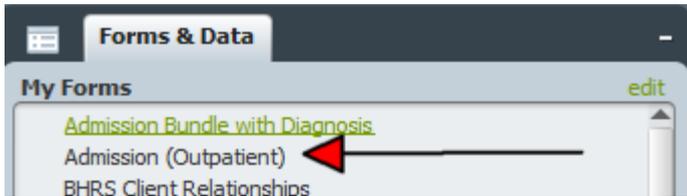
Red=Required fields

Episode is auto assigned and cannot be changed

Avatar Episode Opening (Admitting a New Client)

Steps

1. After searching for a client with client lookup and if the client is not in the system, you are ready to open a new client.

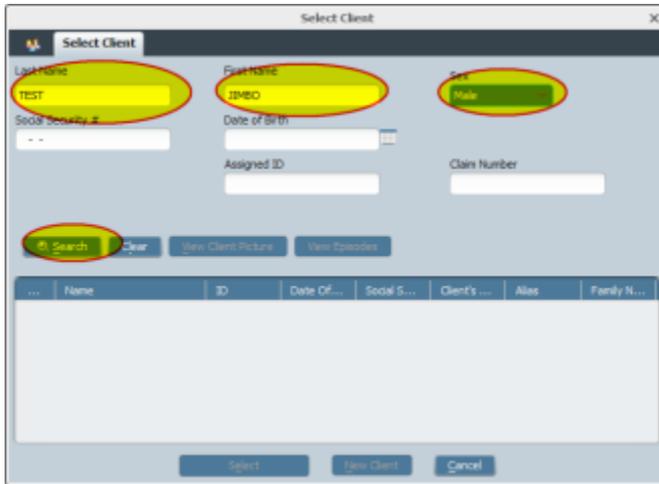


2. Select **Admission Outpatient** form from your list of forms, the **Select Client** box should appear

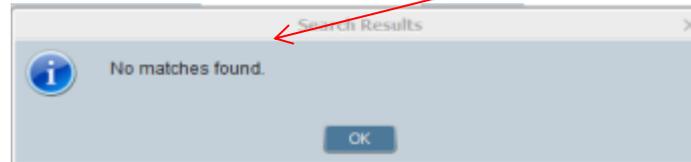
The screenshot shows a "Select Client" dialog box. At the top, the title "Select Client" is highlighted with a yellow oval. The dialog contains several input fields: "Last Name", "First Name", "Social Security #", "Date of Birth", "Assigned ID", "Sex" (a dropdown menu), and "Claim Number". Below these fields are four buttons: "Search", "Clear", "View Client Picture", and "View Episodes". At the bottom of the dialog is a table with the following columns: "Name", "ID", "Date Of...", "Social S...", "Client's...", "Alias", and "Family N...". Below the table are three buttons: "Select", "New Client", and "Cancel".

Avatar Episode Opening (Admitting a New Client)

3. In the Select Client screen, enter the client last name, first name, and sex. Click Search.



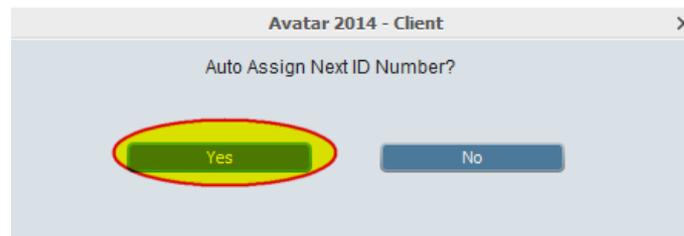
4. If a client is found, select the client, click OK. If a client is not found, the **No Matches found** box will display



5. click **New Client**.



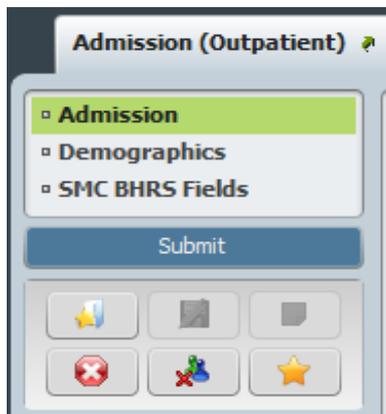
6. The Auto Assign dialog display, Click **Yes** to generate an ID number.



Avatar Admission (Section)

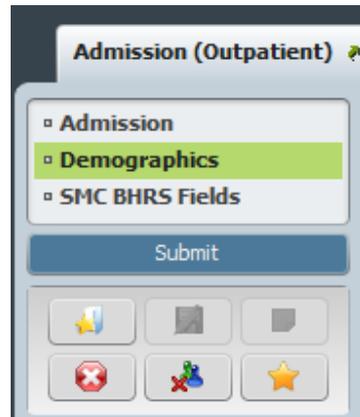
The Admission (Outpatient) form is divided in 3 sections

1. Admission



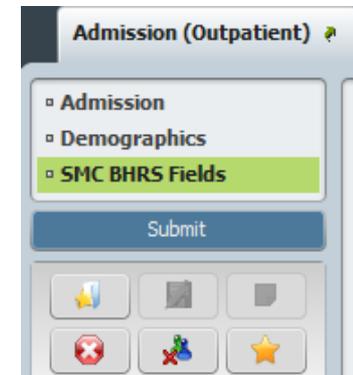
A screenshot of the 'Admission (Outpatient)' form. The title bar at the top reads 'Admission (Outpatient)'. Below the title bar is a list of three sections: 'Admission', 'Demographics', and 'SMC BHRS Fields'. The 'Admission' section is highlighted with a green background. Below the list is a blue 'Submit' button. At the bottom of the form are six icons arranged in two rows of three: a yellow star, a grey document, a grey document, a red 'X' in a circle, a blue person icon, and a yellow star.

2. Demographics



A screenshot of the 'Admission (Outpatient)' form. The title bar at the top reads 'Admission (Outpatient)'. Below the title bar is a list of three sections: 'Admission', 'Demographics', and 'SMC BHRS Fields'. The 'Demographics' section is highlighted with a green background. Below the list is a blue 'Submit' button. At the bottom of the form are six icons arranged in two rows of three: a yellow star, a grey document, a grey document, a red 'X' in a circle, a blue person icon, and a yellow star.

3. SMC BHRS Fields



A screenshot of the 'Admission (Outpatient)' form. The title bar at the top reads 'Admission (Outpatient)'. Below the title bar is a list of three sections: 'Admission', 'Demographics', and 'SMC BHRS Fields'. The 'SMC BHRS Fields' section is highlighted with a green background. Below the list is a blue 'Submit' button. At the bottom of the form are six icons arranged in two rows of three: a yellow star, a grey document, a grey document, a red 'X' in a circle, a blue person icon, and a yellow star.

This section is currently not being used

Avatar Admission (Section)

Episode Number

Client Name

Sex
 Female Male Other Unknown

Date Of Birth

Age

Preadmit/Admission Date

Preadmit/Admission Time

Program

Type Of Admission

Source Of Admission

Primary Therapist / Counselor

Primary Psychiatrist / Supervisor

Anniversary Date (MM/DD)

SMMC MRN / ID (MIS use ONLY!)

Social Security Number

Alternate Social Security Number

Client's Living Arrangements

1. Date of Birth
2. Admission Date
3. Admission Time
4. Program
5. Type of Admission
6. Source of Admission
7. Primary Therapist/Counselor
8. SSN
9. Living Arrangements

Avatar Admission (Section)

The screenshot displays a form with four main sections, each containing radio button options and a yellow callout box with a number:

- Disabilities-1 (10):** Includes options for None, Semi - Ambulatory, Non - Ambulatory, Severe Sight Disability, Blind, Organic Based Communication Disability, Chronic Health Problem, Mental Retardation / Developmental Disability, Severe Hearing Disability, Deaf, and Sign Language Interpreter. The 'None' option is selected.
- Disabilities-2 (11):** Includes the same options as Disabilities-1.
- Disabilities-3 (12):** Includes the same options as Disabilities-1.
- Received Copy Of Client Rights (13):** Includes 'Yes' and 'No' options.
- Advanced Directive (14):** Includes 'Yes' and 'No' options.

10. Disabilities -1
(if None – Disabilities 2 & 3 are grayed out)

11. Disabilities- 2

12. Disabilities-3

13. Copy of Client Rights
(Should always be Yes)

14. Advance Directive

Avatar Demographics (Section)

Even though this section is not required it is recommended that this form be completed with as much information as possible.

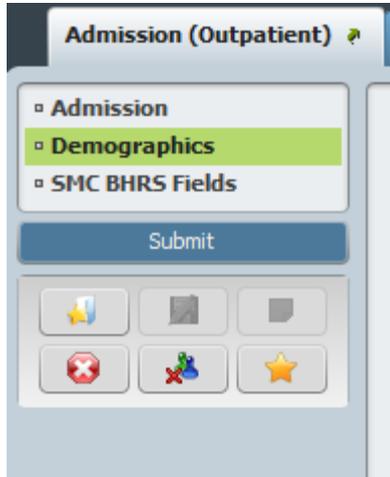
The screenshot shows a form with the following fields and callouts:

- 1. Client Last Name (TEST)
- 2. Client First Name (JIMBO)
- 3. Client's Middle Initial (G)
- 4. Suffix (Sr, Jr, II, IV, V, VI)
- 5. Client's Address - Street (156 Stb St)
- 6. Client's Address - Zipcode (94403)
- 7. Client's Address - City (SAN MATEO)
- 8. Client's Address - County (SAN MATEO)
- 9. Client's Address - State (CALIFORNIA)
- 10. Client's Home Phone (650-123-8975)
- 11. OK to contact/leave message (Home Phone) (No)
- 12. Client's Work Phone
- 13. OK to contact/leave message (Work Phone) (No)
- 14. Client's Cell Phone (650-456-7894)
- 15. OK to contact/leave message (Cell Phone) (Yes)
- 16. Primary Phone (Cell Phone selected)
- 17. Maiden Name
- 18. Marital Status (Single / Never Married)
- 19. Occupation (Executive, Administrative, And ...)
- 20. Employment Status (Full time 35+ hrs per wk (nonco...))
- 21. Education (13 Years)
- 22. Client's Email Address (jimbo@yahoo.com)
- 23. Smoker (Never Smoked)
- 24. Alias (TEST, JIMMY)

1. Client Last Name (**auto populated**)
2. Client First Name (**auto populated**)
3. Client Middle Initial
4. Suffix (**if applicable**)
5. Client's Address
6. Client's Zipcode
7. Client's City
8. Client's County
9. Client's State
10. Client's Home Phone
11. Ok to contact
12. Client's Work Phone
13. Ok to contact
14. Client's Cell Phone
15. Ok to contact
16. Primary Phone
17. Maiden Name (**if applicable**)
18. Marital Status
19. Occupation
20. Employment Status
21. Education
22. Email
23. Smoking Status
24. Alias (**10 available**)

Use this field to enter ALIAS information only

Avatar Demographics (Section)



Admission (Outpatient)

- Admission
- Demographics
- SMC BHRS Fields

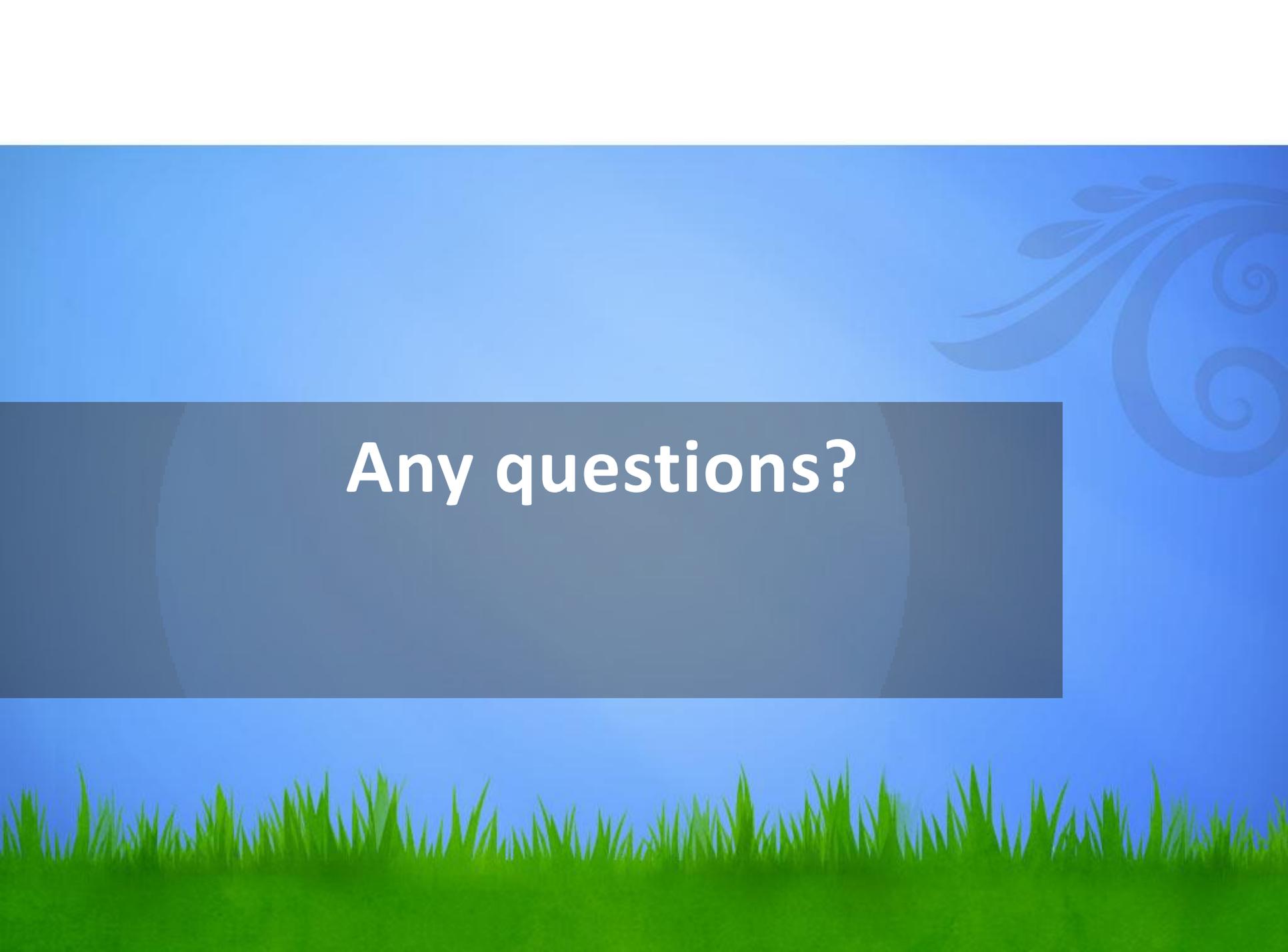
Submit

Icons: Star, Document, Document, Stop, Add, Star

After completing the Demographics section , your ready to save the form, click submit to save the form.



Now you've just completed an Episode Opening.



Any questions?



Avatar Client Relationship
& Client Update



BHRS Client Relationship

List of All Client Relationships

Type of Relationship	Last Name / Agency Name	First N...	Home Ph...	Cell Ph...	Release Available?	Release Start Date	Rel
Father	GRAFF	PETER	650-123-...		Yes (limited)	08/12/2014	08/

Add New Item Edit Selected Item Delete Selected Item

Type of Relationship: Father
Last Name / Agency Name: GRAFF
First Name: PETER
Address - Street: 56 9TH
City: SANMATEO
State: CALIFORNIA
Zip Code: 94403

Home Phone: 650-123-7412
Cell Phone:
Work Phone:
Email Address:
Best Number/Time to Contact: 1 - 5 PM MONDAYS

Release Available?: Yes (limited)
Release Start Date: 08/12/2014
Release End Date: 08/12/2015

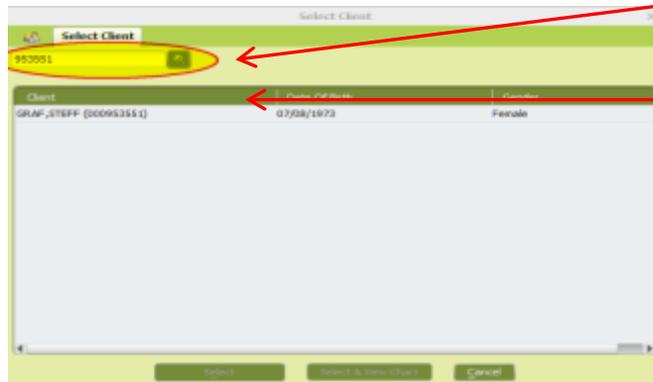
Legal Guardian?: No
Emergency Contact?: Yes
Next of Kin?: Yes

Notes (Record any limitation to the release of information in this Notes field.)
SPEAK TO ONLY ABOUT ATTENDANCE

Red=Required fields



Select **BHRS Client Relationship** form from your list of forms, the **Select Client** box should appear



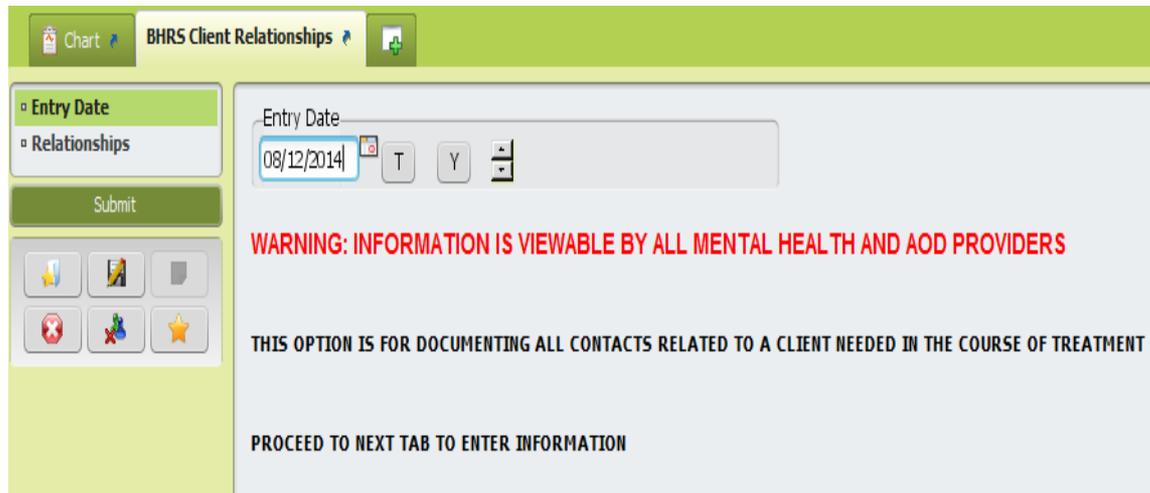
Enter Client ID or Type in last name, first name

Select the Client

Avatar BHRM Client Relationship

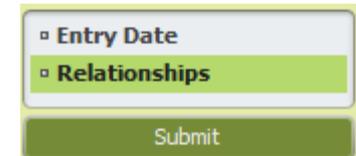
The BHRM Client Relationship form has 2 sections

1. Entry Date



The screenshot shows the 'BHRM Client Relationships' form. The 'Entry Date' section is active, with a date field containing '08/12/2014'. Below the date field is a red warning message: 'WARNING: INFORMATION IS VIEWABLE BY ALL MENTAL HEALTH AND AOD PROVIDERS'. Below the warning is a black text message: 'THIS OPTION IS FOR DOCUMENTING ALL CONTACTS RELATED TO A CLIENT NEEDED IN THE COURSE OF TREATMENT'. At the bottom of the form, it says 'PROCEED TO NEXT TAB TO ENTER INFORMATION'. The left sidebar contains a 'Submit' button and a set of icons for navigation.

2. Relationships



The screenshot shows the 'BHRM Client Relationships' form with the 'Relationships' section active. The 'Entry Date' section is inactive. Below the 'Relationships' section is a 'Submit' button.

Warning: Information is viewable by all Mental Health and AOD Providers

List of All Client Relationships

Type of Relationship	Last Name / Agency Name	First N...	Home Ph...	Cell Ph...	Release Available?	Release Start Date	Rel
Father	GRAFF	PETER	650-123-...		Yes (Limited)	08/12/2014	08/

Buttons: Add New Item, Edit Selected Item, Delete Selected Item

a new line (green) is added

To add a new contact, click **"Add New Item"**

Type of Relationship: Mother **1**

Last Name / Agency Name: Graf **2**

Other Relationship: **3**

First Name: Kari **4**

Address - Street: 568 36th Ave **5**

City: San Mateo **6**

State: CALIFORNIA **7**

Zip Code: 94066 **8**

1. Type of Relationship
2. Last Name/Agency Name
3. Other Relationship
4. First Name
5. Address – St.
6. City
7. State
8. Zip Code

Home Phone: 650-898-6365 (9)

Cell Phone: (10)

Work Phone: (11)

Email Address: (12)

Best Number/Time to Contact: (13)

- 9. Home Phone
- 10. Cell Phone
- 11. Work Phone
- 12. Email Address
- 13. Best #/Time to Contact

Release Available? Yes (Full) (14)

Release Start Date: 10/08/2014 (15)

Release End Date: 10/03/2015 (16)

Legal Guardian? No (17)

Emergency Contact? Yes (18)

Next of Kin? Yes (19)

Notes (Record any limitation to the release of information in this Notes field.) (20)

- 14. Release Available
(3 Choices-Full, Limited, Verbal)
- 15. Release Start Date
- 16. Release End Date
- 17. Legal Guardian
- 18. Emergency Contact
- 19. Next of Kin
- 20. Notes: (if Limited or Verbal field becomes required)

Entry Date

Relationships

Submit

Click "Submit" to save form

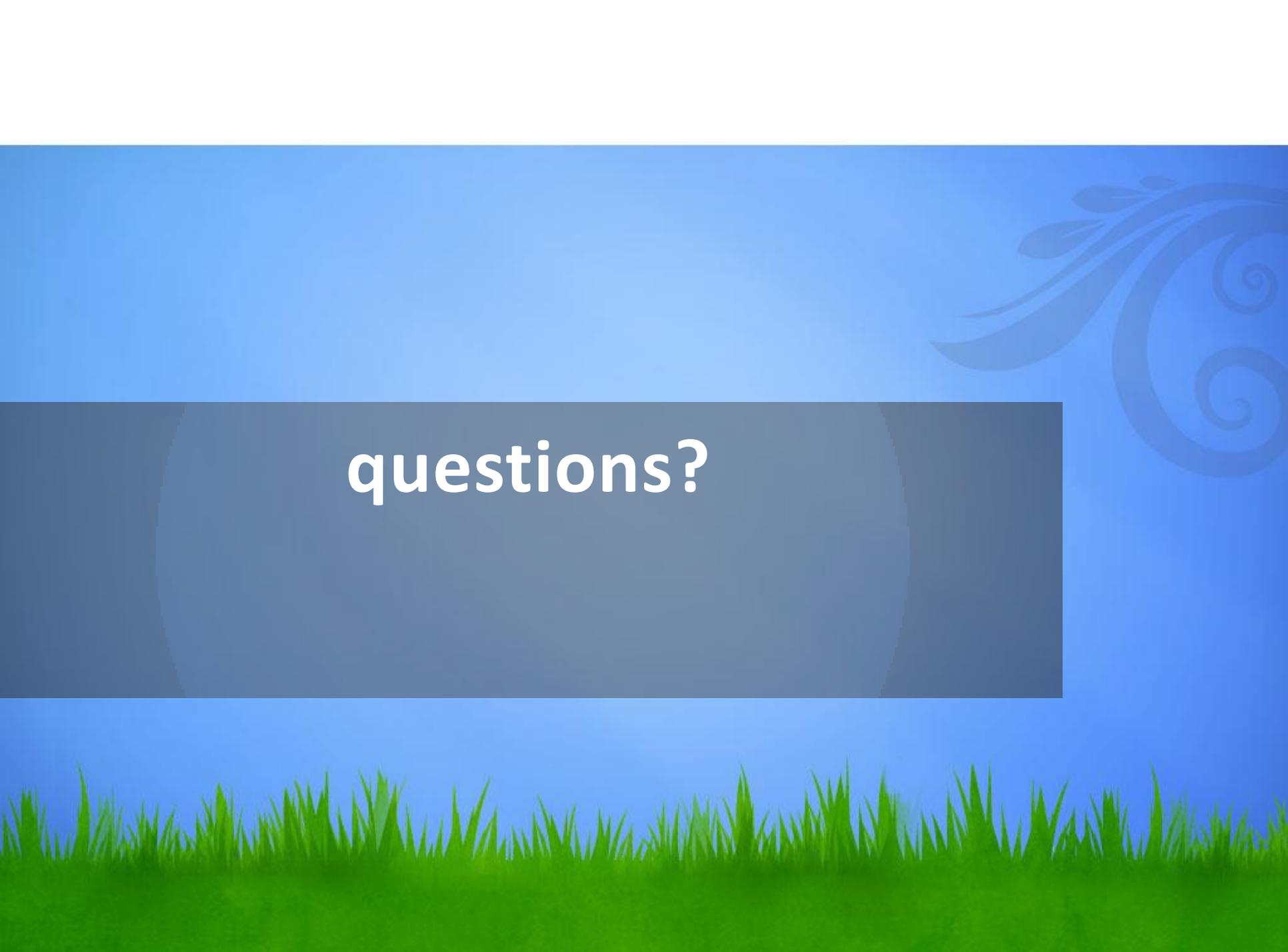
Avatar Updating Client Demographics –Admission (Outpatient)

Client demographics updates are done utilizing the Admission Outpatient Form – (Demographics section)

The screenshot shows a web form for updating client demographics. The form is divided into two columns. The left column contains fields for: Client Last Name (TEST), Client First Name (JIMBO), Client's Middle Initial (G), Suffix (Sr, Jr, II, IV, V, VI), Prefix, Client's Address - Street (156 Stb St), Client's Address - Zipcode (94403), Client's Address - City (SAN MATEO), Client's Address - County (SAN MATEO), Client's Address - State (CALIFORNIA), Client's Home Phone (650-123-8975), OK to contact/leave message (Home Phone) (No), Client's Work Phone, OK to contact/leave message (Work: Phone) (No), Client Declined To Provide Information On The Following (Ethnic Origin, Race, Language), and Alias (TEST, JIMMY). The right column contains fields for: Client's Cell Phone (650-456-7894), OK to contact/leave message (Cell Phone) (Yes), Primary Phone (Cell Phone), Maiden Name, Marital Status (Single / Never Married), Occupation (Executive, Administrative, And ...), Employment Status (Full time 35+ hrs per wk (nonco...)), Education (13 Years), Client's Email Address (jimbo@yahoo.com), and Smoker (Never Smoked). A red arrow points to the Alias field at the bottom left.

Use this field to enter ALIAS information only

1. Client Last Name (**auto populated**)
2. Client First Name (**auto populated**)
3. Client Middle Initial
4. Suffix (**if applicable**)
5. Client's Address
6. Client's Zipcode
7. Client's City
8. Client's County
9. Client's State
10. Client's Home Phone
11. Ok to contact
12. Client's Work Phone
13. Ok to contact
14. Client's Cell Phone
15. Ok to contact
16. Primary Phone
17. Maiden Name (**if applicable**)
18. Marital Status
19. Occupation
20. Employment Status
21. Education
22. Email
23. Smoking Status
24. Alias (**10 available**)



questions?



Avatar

Episode Closing

Episode Closing - Discharge (Outpatient)

Chart | Discharge (Outpatient) |

Discharge
Demographics

Submit

Online Documentation

Episode Number 1

Date Of Discharge 08/12/2014 T Y

Discharge Time 03:16 PM Current H M AM/PM

Discharge Day Of Week TUESDAY

Length Of Stay 11

Type Of Discharge Not eligible for services

Discharge Practitioner MCNTOYA, JORGE (020036)

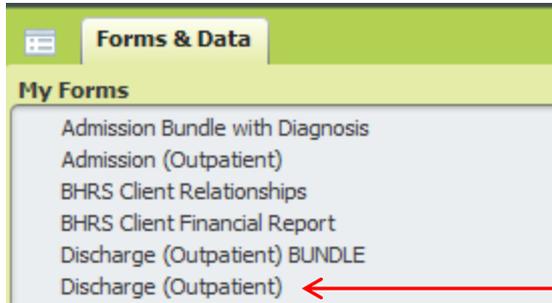
Discharge Remarks/Comments

Hospital Discharge Instructions

Discharge Client Living Arrangement

Red=Required fields

Avatar Episode Closing - Discharge (Outpatient)



Select **Discharge (Outpatient)** form
Forms & Data

Select Client

Select Client

Last Name

First Name

Sex

Social Security #

Date of Birth

Assigned ID

Claim Number

Search Clear View Client Picture View Episodes

Name	ID	Date Of...	Social S...	Client's ...	Alias	Family N...
------	----	------------	-------------	--------------	-------	-------------

Select New Client Cancel

In the Select Client screen, enter the client name or ID, and **select**. Click **Select**.

Avatar Episode Closing - Discharge (Outpatient)

The screenshot shows the 'Discharge (Outpatient)' form in the Avatar system. The form is organized into a sidebar on the left and a main content area. The sidebar includes a 'Discharge' tab, a 'Demographics' tab, a 'Submit' button, and 'Online Documentation' links. The main content area contains the following fields:

- Episode Number:** 1
- Date Of Discharge:** 08/12/2014
- Discharge Time:** 03:16 PM, Current
- Discharge Day Of Week:** TUESDAY
- Length Of Stay:** 11
- Type Of Discharge:** Not eligible for services
- Discharge Practitioner:** MCINTOYA, JORGE (020036)
- Discharge Remarks/Comments:** (Text area)
- Hospital Discharge Instructions:** (Text area)
- Discharge Client Living Arrangement:** (Dropdown menu)

1. In the Date Of Discharge field, enter the date the client will be discharged.
2. In the Discharge Time field, enter the discharge time. Use Current if specific time is not required
3. The Discharge Day Of Week field shows the discharge day **(will pre-populate)**
4. The Length Of Stay field shows the episode length in days **(will pre-populate)**.
5. In the **Type of Discharge** field, select the discharge type. **(Required)**
6. In the **Discharge Practitioner** field, enter the practitioner name or ID, and select. **(Required)**
7. In the Discharge Remarks/Comments field, enter discharge comments or observations **(if applicable)**.
8. In the Hospital Discharge Instructions, enter any comments **(if applicable)**.
9. Select, Discharge Client Living Arrangement
10. Update Client Demographics if at discharge they have changed.

When finished, click **Submit**.

Q & A

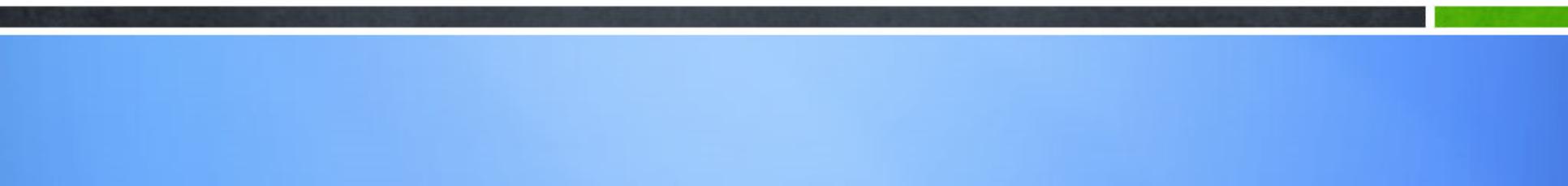
Any questions?



Thank you for attending

Next Webinar – Friday, October 24, 2014 2:00 – 3:30 PM
Contractor TX Plan (includes Assessment Date & Consent to Treatment Date), Contractor LOCUS & CALOCUS, Diagnosis (Admission & Update), CSI Admission

Questions can be sent to aherring@smcgov.org or
650-573-3538





Avatar

Client Look up, Episode Opening & Closing, Updating Client Demographics, & Client Relationships

