

To: BHS Providers

Date: June 8, 2018

From: AnnLouise Conlow, BHS Senior MIS Manager

Re: Cerner Community Behavioral Health (CCBH) Access to Services Journal

MIS has established the following process for capturing access times within CCBH. Up to this point, access times for provider metrics have been captured through an Excel spreadsheet. Access Time metrics will instead be reported directly into the CCBH product through the Access to Services Journal. This improvement will allow for better monitoring and tracking for both the Providers and the County. To support this transition, providers will adhere to the following implementation:

- July 1, 2018, administrative staff will use the Access to Services Journal in CCBH. Full client look-up is necessary for Access to Services and for this reason only administrative staff will be entering data into the journal. Clinicians and Program Managers will work with their administrative staff for entry into CCBH as noted in the instructions.
- Administrative staff may practice entering data into the Access to Services Journal within CCBH in the LIVE environment for the remainder of the month of June 2018. This will allow for an orientation period for administrative staff and for assessment and adaptation to workflows for the programs. Please note, data entry must still be completed in the Excel spreadsheet that programs currently use for the month of June 2018. Programs must submit the June 2018 log to the COR/Analyst/PIT following normal procedures. These logs will no longer need to be submitted after July 1, 2018.

The Access to Services Journal Tip Sheet is provided in this memo and a tutorial along with the Tip Sheet has been posted to the Optum website: <u>https://www.optumsandiego.com/content/sandiego/en/asj.html</u>

The Tip Sheet provides direction for specific client information that now needs to be collected in the journal as per new quality review requirements to determine access times. It is important to provide accurate data for access times to be reported to the state. The Tip Sheet also provides information on system outage protocol.

CCBH provides a canned report for programs to review their Access to Services Journal times and to check for data quality.

The Access to Services Log will be updated to reflect the changes in CCBH and is to be used by clinical staff *after* July 1, 2018. It will be uploaded to the Optum website. The spreadsheet will also be used for system down times.

If you have any questions, please contact QI Matters at <u>QIMatters.HHSA@sdcounty.ca.gov</u>

Access to Service Journal

- 1. Open the Access to Services Journal
 - a. Select the Systems Button \rightarrow Menu \rightarrow ATP \rightarrow Access to Services Journal

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Open	Recently Opened Views	Services	🔥 System eRx not availabl
Menu	Application Menu	PN	
Security	Client Profile	Froup Notes	ePrescribing Status
About CCBH	Client Assignments	•	
	Client <u>F</u> inancial Information	•	
	Client <u>R</u> eviews	There are no	o items to show.
	Client <u>S</u> ervices	•]	
	ATP	ATP R	eports 🕨
	System Tools	Clinic	ian's Homepage (v3.0)
	Reimbursement	Acces	s to Services Journal

2. The date and time of the contact will pre-populate to when the journal was opened. If needed, both can be back dated. It should reflect the first date of contact with the client. If administrative staff are entering from the paper form, be sure to match the date with the original date of contact. Fill in the Unit and Subunit. These are required fields and will need to be filled out before the rest of the journal is completed.



 Fill in the Contact Type (the way in which the program was contacted), Contact Reason, and the Response Type (the urgency). These are required fields and will need to be filled out before the rest of the journal is completed.

Contact Type	Telephone	QT
Contact Reason	Mental Health	<u>q</u> m
Response Type	Routine	<u>C</u> R

Note: Pay close attention to the response codes. If the response code is anything but R – Routine or I –Information, there are specific time requirements for the client to be seen.

Title 9 defines "Emergent (Access w/in 1 hour)" as a condition in which the client, due to a mental disorder, is an imminent danger to self or others or is immediately unable to provide for or utilize food, shelter or clothing. This situation indicates an immediate need for psychiatric inpatient hospitalization or psychiatric health facility services. Client must be seen within one (1) hour of initial client contact/referral.

Title 9 defines "**Urgent (access w/in 72 hours)**" as a condition, which without timely intervention is certain to result in an immediate emergency psychiatric condition. Client must be seen within seventy-two (72) hours of initial client contact/referral. When using response code H -"**D/C from IP (72 hour assess)**" - Patient Discharged from Inpatient Facility, be sure that the inquiry date reflects the actual discharge date of the client, not the date the hospital contacts the provider to let them know the client

is being discharged. Client must be seen within 72 hours of discharge date.

When coding a client E = Emergent, U=Urgent or H = D/C from IP, make sure the time requirements are adhered to. To indicate urgency for clients who do not meet the Title 9 definition, please use the Notes box or an internal tracking mechanism.

4. Click on the magnifier to search for the client.

Client			0	🔲 Name Not Provid	led
First		Middle		Last	
DOB	// 🖪 Age			Gender	9

5. Search for the client. Feel free to use the filter settings. If the client is in the system, select the client and then select "Ok."

🔜 Clients Lookup										×
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226.03, PREINTAKE		F	4	11/23/1945		9900	9901		800001	
226.03, TEST		F	4	09/21/1973		9900	9901	REJIS ##	7013	
227.01, TEST		F	5	11/08/1999		9900	9901	REJIS #	7013	
227.02, DHP		F	4	11/17/1949		9900	9901		800005	
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- a. **If the client is in CCBH**, most of the demographic information will prepopulate from the latest Demographic Form. Fill in the fields that do not pre-populate to the best of your ability.
- b. **If the client is not in CCBH, and they have requested an appointment**, (this includes if disposition "Made Appointment" or "Declined Appointment" is selected) the client must be added to

CCBH before moving forward. After the CCI is added, select the client by inputting their case number in the "Client" field and tabbing out. Fill in the fields that do not pre-populate to the best of your ability.

c. If the client is not in CCBH, and they are only calling for information or they are being referred out, fill in all the fields manually to the best of your ability.

Client FAKE, T	EST	<u> </u>			Name Not Provided		
First TEST		Middle		Last	FAKE		
DOB 10/11/1	999 🗾 Age 18			Gender	Male	Q	М
Phone	999-999-9999			Alt. Phone			
Race	Chinese	Q	D	Pref. Language	Unknown / Not Reported	Q	U
Ethnicity	Not Hispanic	<u> </u>	1	Benefit Type	MediCal	<u> </u>	MC

6. If an appointment is requested (this includes if disposition "Made Appointment" or "Declined Appointment" is selected), select Add in the service portion.

Service ID	Service Description	First Available Appointment	Access Days	Scheduled Appointment	
			0		
					Add
					🗑 Edit
4					
•				•	Show

7. Add the service by utilizing the magnifier. Enter in the First Appointment Available (if the client accepts it or not). If the client schedules an appointment, enter in the date of the appointment scheduled. *If an appointment was offered, but not accepted, leave Appointment Scheduled blank*. Access days will be calculated between the Date of Contact and the First Appointment Available. Select Save.



- a. Service Code $\overline{10}$ Assessment- Psychosocial will be used for Mental Health Services
- b. Service Code 11- Medication Evaluation will be used for Psychiatric Services
- 8. Select the Disposition, and Referred To/Referred From as applicable. Referred to/Referred from may become required fields based on the Disposition selection.

Disposition		1			Notes
Referred To	<u></u>	Date	7	7	
Referred From	의	Date	7	7	

- 9. Enter any notes needed in the Notes box. These are informational comments that are all encompassing to the program or trend related explanations. Any access times over 5 (CYF) or 8 (AOA) days for Mental Health Assessments and over 30 days for Psychiatric Assessments must be addressed in Notes Box. Also, any applicable comments used for individual clients may be placed here. (For example, outlining multiple attempts made to contact individual/family.) Also note in this field if a client/caregiver elects to remain on the wait list even though they were offered a referral to another program.
- 10. Select Final Approve. No signature/password is necessary.

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Please note: Clinical staff will continue to fill out the access to services journal on paper or Excel. The Access to Services Log has been updated to match the CCBH Access to Services Journal and should be printed for Clinical Staff.

In the event of a system outage, programs should complete the Access to Services Log. Once programs are notified by the Optum Support Desk that the system has been restored, Access to Services Journal entry in CCBH can resume. Enter any paper/Excel log entries that were made during the outage into the Access to Services Journal in CCBH by next business day.