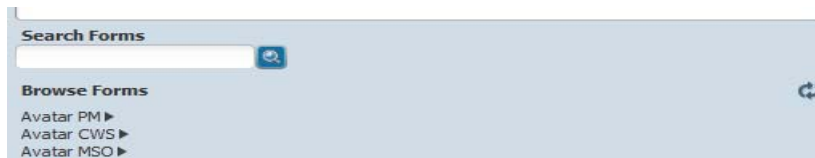


Admission (Avatar)

The purpose of this desk reference is to provide guidance in how to open an admission to an Episode.

Menu Path

Avatar PM > Client Management > Episode Management or you can enter “Yolo Mental Health Admission” under Search Forms



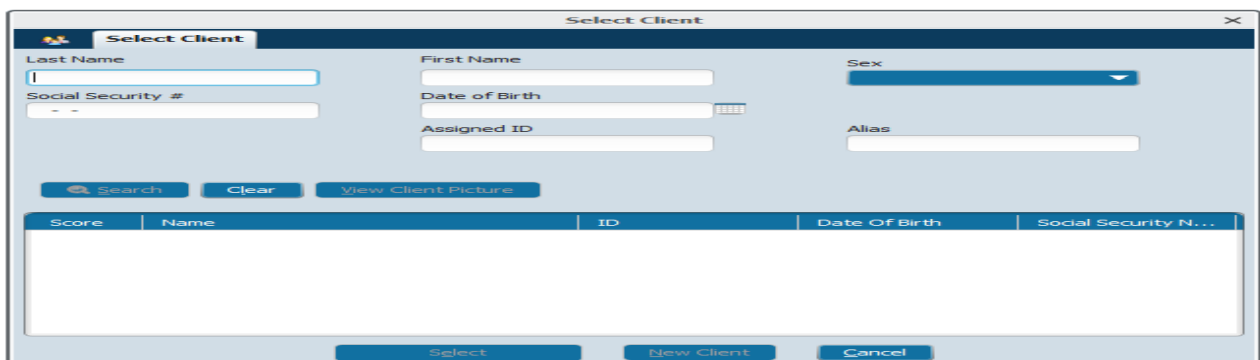
The screenshot shows a 'Search Forms' window with a search input field and a magnifying glass icon. Below the search field is a 'Browse Forms' section with a refresh icon. Under 'Browse Forms', there are three items: 'Avatar PM ▶', 'Avatar CWS ▶', and 'Avatar MSO ▶'.

Details

- The Yolo Mental Health Admission form is used to admit clients into an episode.
- If the client is being admitted into a treatment program that is associated with CSI data, the CSI Admission form will open for submission.

Steps

- Open the Yolo Mental Health Admission form.



The screenshot shows a 'Select Client' dialog box with the following fields: Last Name, First Name, Sex (dropdown), Social Security #, Date of Birth, Assigned ID, and Alias. Below the fields are buttons for Search, Clear, and View Client Picture. At the bottom, there is a table with columns: Score, Name, ID, Date Of Birth, and Social Security N... Below the table are buttons for Select, New Client, and Cancel.

- Enter the Last Name, First Name, Sex, Social Security # and Date of Birth.
- Click on Search

- If there is not a match in the system, then a No match found will appear. If there is a potential match the system will display all possible matches in the display area.
- If the client is listed in the display area, then double click on it.
- A list of all episodes that are currently open will display.

Episode #	Admit Date	Discharge Date	Program
31	04/27/2017		2-1945A PIP EPISODE
30	03/04/2018		2-1945A PIP EPISODE
29	06/30/2018	03/04/2018	2-1945A PIP EPISODE
28	06/30/2018	06/30/2018	2-1945A PIP EPISODE
27	08/11/2018	08/30/2018	2-1945A PIP EPISODE
26	01/05/2018	11/09/2018	2-1945A PIP EPISODE
25	01/05/2018	02/03/2018	2-1945A PIP EPISODE
24	08/07/2018	02/03/2018	2-1945A PIP EPISODE
23	01/06/2018	07/06/2018	2-1945A PIP EPISODE
22	08/11/2018		2-1945A PIP EPISODE
21	12/04/2011	12/04/2011	2-1945A PIP EPISODE
20	01/17/2008	01/17/2008	2-1945A PIP EPISODE
19	08/19/2008	08/19/2014	2-1945A PIP EPISODE
18	07/02/2008	05/18/2012	2-1945A PIP EPISODE
17	06/03/2008	06/03/2017	2-1945A PIP EPISODE
16	03/07/2008	06/30/2008	2-1945A PIP EPISODE
15	03/04/2008	03/04/2008	2-1945A PIP EPISODE
14	03/04/2008	03/04/2008	2-1945A PIP EPISODE
13	01/07/2008	01/07/2008	2-1945A PIP EPISODE
12	01/14/2008	01/14/2008	2-1945A PIP EPISODE
11	01/04/2008	01/04/2008	2-1945A PIP EPISODE
10	11/07/2007	03/04/2008	2-1945A PIP EPISODE
9	09/11/2007	03/04/2008	2-1945A PIP EPISODE
8	04/01/2007	03/04/2008	2-1945A PIP EPISODE
7	04/07/2007	03/04/2008	2-1945A PIP EPISODE
6	03/05/2008	03/04/2008	2-1945A PIP EPISODE
5	04/06/2008	03/04/2008	2-1945A PIP EPISODE
4	08/01/2008	01/07/2008	2-1945A PIP EPISODE
3	08/01/2008	03/04/2008	2-1945A PIP EPISODE
2	01/18/2008	03/04/2008	2-1945A PIP EPISODE
1	01/18/2008	03/04/2008	2-1945A PIP EPISODE

- Click on Add. The system will open to the data entry form

- If there is no match, then click on New Client.

- The system will ask to assign the next ID number.
- Click Yes. The data entry form will appear.

- Record the MR # number on the admission packet.
- The Client Name field displays the client name.
- If appropriate, in the Sex field select the client's sex.
- If appropriate, in the Date of Birth field enter the client's date of birth.
- The Age field displays the client age.
- In the Pre-admit/Admission Date field, enter the admission date. This data should be the date of initial contact.
- In the Pre-admit/Admission Time field, click on Current.
- In the Program field, select the appropriate treatment program.
- In the Type Of Admission field, select the admission type (First Admission should be used for when the client is a new client or the client is coming back into our system of care within 30 days of a final discharge, readmission should be used when the client is an existing client).
- In the Source Of Admission field, select the admission source.
- In the Received Copy of Client Rights, Select Yes or No
- In the Admitting Practitioner field, enter the practitioner name that the case will be assigned to or 19 for the generic HHSa practitioner, click Process Search to select. Click OK.
- In the Attending Practitioner field, enter the practitioner name that the case will be assigned to or 19 for the generic HHSa practitioner, click Process Search to select. Click OK. (Attending practitioners can be re-assigned to the client throughout the duration of the client episode. This field is disabled when a client episode is opened for editing.)
- Leave Team Assignment field blank, unless Turning Point FSP ACT/AOT episode, in which select the appropriate team.
- In the Practitioner Type field, select the type of practitioner.
- Leave the Reflection Client # field blank.
- In the Social Security Number field, enter the client's social security number.
- No entry required for the Perform Discharge Alert field

- No entry required for the Type Of Alert field
- In the Disposition field, enter the disposition.

- In the Presenting Problem –Primary, Secondary and Tertiary fields, enter problems accordingly.
- In the Client’s Living Arrangements field, Select the appropriate living arrangement
- In the Disabilities-1 field, Select disabilities
- No entry is required for Current Medication -1,-2,-3 fields
- For the Advanced Directive field, Select Yes or No

- Select Demographics on the left hand side tab

The screenshot displays a web application interface for client demographics. At the top, there is a navigation bar with 'Home', 'Yolo T', and 'Delete/Re-Assig'. Below this, a client profile summary shows 'TESTCLIENT, YOLO (000011136)', 'M, 50, 05/06/1967', and 'Ht: 5' 11", Wt: 186 lbs, BMI: 25.9'. The main content area is divided into a sidebar and a main form. The sidebar contains tabs for 'Admission', 'Demographics', and 'Inpatient/Partial/Day T...'. The 'Demographics' tab is active, showing a 'Client Demographics' form. The form includes the following fields: 'Client Last Name' (TESTCLIENT), 'Client First Name' (YOLO), 'Client's Middle Initial' (empty), 'Suffix' (radio buttons for Sr, Jr, IV, V, II, VI), 'Prefix' (dropdown menu), 'Alias' (four text boxes), and 'Remarks' (text area with 'TEST REMARKS'). A 'Submit' button is located below the form. The bottom of the sidebar has 'Online Documentation'.

Please turn your CAPS LOCK ON.

- In Client Last Name field, enter the last name of the client (this should match to the Medi-Cal Swipe if there is one).
- In Client First Name field, enter the first name of the client (this should match to the Medi-Cal Swipe if there is one).
- In Client Middle Initial field, enter the initial of the client
- In the Suffix field, select the appropriate suffix if applicable.
- In the Prefix field, select the appropriate prefix if applicable.
- In the Alias field, enter any alias names the client had used. This is where you would enter the name provided, if it doesn't match Medi-Cal swipe.
- In the Remarks field, enter any remarks if applicable.

Client's Billing Address - Street
137 N COTTONWOOD

Client's Billing Address - Street 2

Client's Billing Address - Zip code
95695

Client's Billing Address - City
Woodland

Client's Billing Address - State
CALIFORNIA

Client's Billing Address - County

Client's Home Phone
530-555-5555

Client's Work Phone

Client's Cell Phone
530-666-6666

Client's Email Address

Communication Preference

Email Regular Mail Home Phone

Work Phone Cell Phone

Physical Address-Street (if different than billing address)

Physical Address-City (if different than billing address)

- In the Client's Billing Address- Street field, enter the client billing street name.
- In the Client's Billing Address- Street 2 field, enter the client billing apartment number.
- In the Client's Billing Address- Zip code, enter the client billing Zip code.
- The System will auto generate, the City, State and County fields.
- In the Client's Home Phone/Work Phone/Cell Phone fields, enter the client phone number details.
- In the Client's Email Address field, enter the client's email address if available.
- In the Communication Preference field, select the appropriate preference.
- In the Physical Address-Street and City fields, enter the client's physical address if different from the billing address.

Client Declined To Provide Information On The Following

Ethnic Origin Race Language

Primary Language
English

Client Race
White

Ethnic Origin
Not Hispanic

Religion
Baptist

Place Of Birth
WOODLAND

Country Of Origin
United States

Maiden Name

Mother's Maiden Name

Marital Status
Married

Education
12 Years

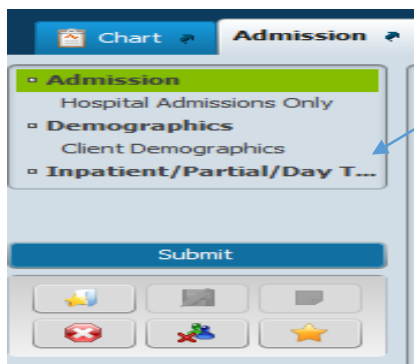
Employment Status
Not In Labor Force - Other ...

Occupation
Never Employed

Smoker

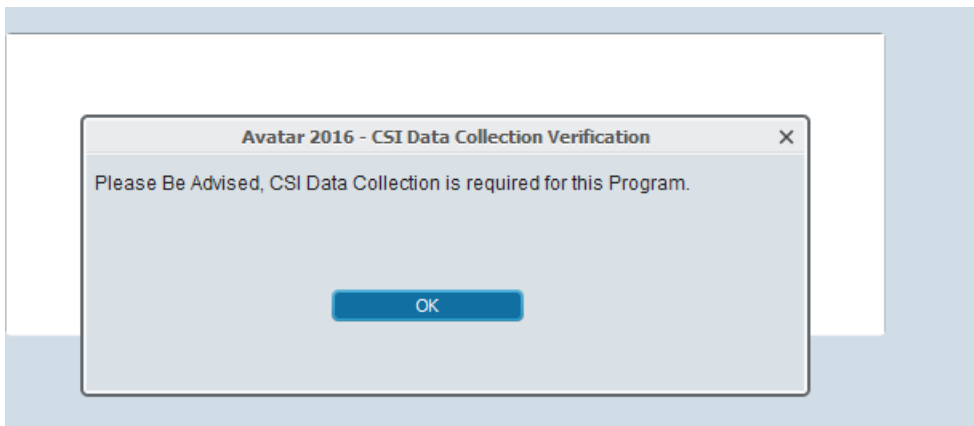
Smoking Status Assessment Date

- In the Primary Language field, select the appropriate language. If the client declined to provide information, then check the box under Client Declined to Provide Information On the Following field.
- In the Client Race field, select the appropriate race. If the client declined to provide information, then check the box under Client Declined to Provide Information On the Following field.
- In the Ethnic Origin field, select the appropriate ethnicity. If the client declined to provide information, then check the box under Client Declined to Provide Information On the Following field
- In the Religion field, select the appropriate religion.
- In the Place of Birth field, enter City, State, if born outside of the United States enter equivalent information.
- In the Country of Origin, select the appropriate country.
- If the client has been identified as a female, the Maiden name field will be available for input. Enter the client’s maiden name (Birth Name). If the client is a Male, this field will be greyed out and not available.
- In the Mother’s Maiden Name field, enter the mother’s last name prior to marriage (Birth Name).
- Complete the Marital, Education, Employment Status and Occupation fields.
- In the Smoking Status Assessment Date field, enter the date the intake packet was completed and signed.
- For Inpatient or Day Treatment Facilities, click on the Inpatient/Partial/Day Treatment tab

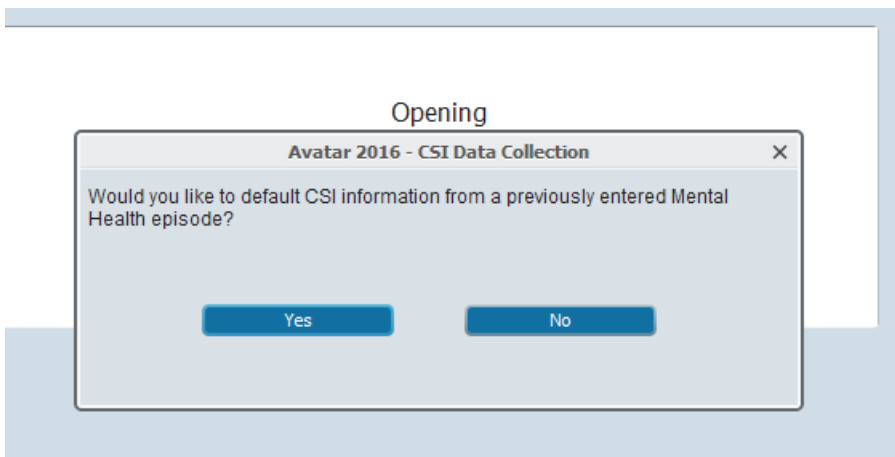


- In the Unit field, select an available unit
- In the Room field, select an available room
- In the Bed field, select an available bed
- In the Room and Board Billing Code, select the appropriate billing code
- The remaining fields are not used.
- When the admission data entry is complete, click SUBMIT.

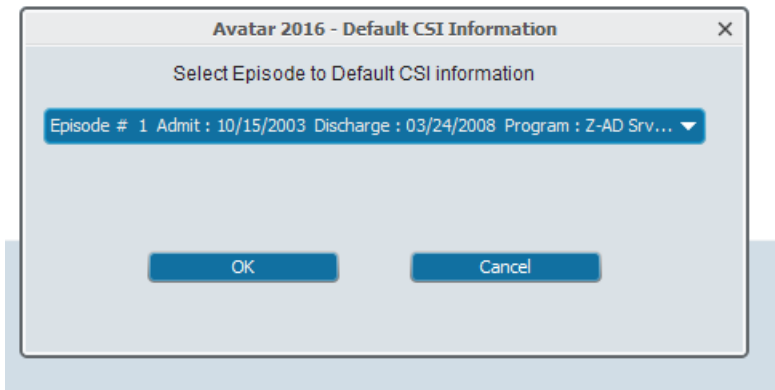
CSI Admission



- An information box will appear informing of a CSI Data Collection, if the episode is a CSI reportable admission.
- Click OK
- If there is exiting CSI data in another episode, the system allows you to default data in.



- Select Yes for defaulting data into the new episode or No to start a new admission.



- If Yes is selected, then the system will provide a list of episodes that can be defaulted in. Select the required episode information and click on OK.

- If default was selected, then the fields would be auto populated with previous information. The information in the CSI admission should be verified and updated accordingly.
- For New CSI Admissions, in the 'Birth Name' fields, enter the client's name given at birth. Note, this may be different from the current name.
- In the Mother's First Name field, enter the mother's information.
- In the Fiscally Responsible County for Client field, select the county that is fiscally responsible for the client. This can be obtained from the Medi-Cal swipe.
- In the 'Place of Birth' - County field, select the client's birthplace county. If the client was born outside of the state of California, select Not California County, if the client declines to provide this information, enter Unknown County.

- In the 'Place of Birth' - State field, select the client's birthplace state. If the client was born outside of the US, select Not US State, if the client declines to provide this information, enter Unknown State.
- In the 'Place of Birth' - Country fields, select the client's birthplace country, if the client declines to provide this information, enter Unknown County
- In the CSI Ethnicity field, select the client's ethnicity.
- In the Special Population field, select the client's special population information.
- In the Legal Class field, select the client's legal class.
- In the County School field, select the county school.
- In the District County Code and District/Site code fields, select the county and site.
- In the Admission Necessity Code field, select the admission necessity.

- In the Substance Abuse Affecting Mental Health, Are Developmental Disabilities Affecting Mental Health and Are Physical Health Disorders Affecting Mental Health fields, select how the client conditions affect their mental health.
- In the Conservatorship/Court Status field, select the client status.
- In the Preferred Language field, select the client's language.
- In the Race (Select Up to Five) field, select the client's race.
- In the 'Number of children less than 18 years of age' field, enter the number of children.
- In the 'Number of dependent adults 18 years of age and above' field, enter the number of defendants.

➤ Click Submit.

➤ If the CSI needs to be updated within the episode at a later date or has been missed. Select menu path Avatar PM>Client Management>Client Information>CSI Admissions.