Utah Division of Child and Family Services & Fostering Health Children SACWIS System (SAFE) Screen Prints May 5, 2009

Notification window

Notification Type: [All] Received From: 00 0	Status: Active To: 14JUL06	Search	Cases — C All C My	View © Expan	ided nary
New Notification Type	Message	Due	Received	Worker	0
Pending Case	There are 2 pending cases assigned to you		09Jul06 1:03 PM		
Overdue - 30 Days	Wilow, Globe, 1011155, HSOM Test Results - 4 Months	20Jul05 11:59 PM	19Aug05 11:59 PM	Gum, Bubba	Ji
Overdue - 10 Days	Harris, Michael, 1011271, HSOM Test Results - 5 Day	18Jun06 11:59 PM	28Jun06 11:59 PM	Gum, Bubba	Ji
Overdue	Simmons, Danny, 1011209, FCCRB Request for Healthcare Information	05Jul06 11:59 PM	09Jul06 11:59 PM	Gum, Bubba	Ji
Overdue	Simmons, Justin, 1011208, FCCRB Request for Healthcare Information	05Jul06 11:59 PM	09Jul06 11:59 PM	Gum, Bubba	Ji
Overdue	Simmons, Ariel, 1011207, FCCRB Request for Healthcare Information	05Jul06 11:59 PM	09Jul06 11:59 PM	Gum, Bubba	Ji
Overdue	Harris, Michael, 1011271, HSOM Test Results - 30 Day	13Jul06 11:59 PM	13Jul06 11:59 PM	Gum, Bubba	Ji
Notice #26	Willow, Weeping, 1011156, SCF child placement change		26May05 8:57 AM	Gum, Bubba	Ji
Notice #26	Wilow, Globe, 1011155 SCF child placement change		14Jul06 10:19 AM	Gum, Bubba	Ji
Prompt	Almond, Anne, 1011158, FC Service Plan	09Jun06 11:59 PM	10May06 11:59 PM	Gum, Bubba	Ji
Prompt	Simmons, Hobbie, 1011210, 24 Month Well Child/CHEC	16Jul06 11:59 PM	16Jun06 11:59 PM	Gum, Bubba	Ji
Prompt	Simmons, Hobbie, 1011210, HSOM Test Results - 30 Day	16Jul06 11:59 PM	16Jun06 11:59 PM	Gum, Bubba	Ji
Prompt	Cacti, Baby Doe, 1011178, HSOM Test Results - 30 Day	18Jul06 11:59 PM	18Jun06 11:59 PM	Gum, Bubba	Ji
Prompt	Corn, Calvin, 1011269, FC Service Plan	20Jul06 11:59 PM	20Jun06 11:59 PM	Gum, Bubba	Ji
Prompt	Simmons, Justin, 1011208, Well Child/CHEC	16Jul06 11:59 PM	21Jun06 11:59 PM	Gum, Bubba	Ji
Prompt	Simmons, Justin, 1011208, Dental Exam	16Jul06 11:59 PM	21Jun06 11:59 PM	Gum, Bubba	Ji
Prompt	Simmons, Danny, 1011209, Dental Exam	16Jul06 11:59 PM	21Jun06 11:59 PM	Gum, Bubba	Ji
Prompt	Harris, Michael, 1011271, FC Service Plan	28Jul06 11:59 PM	28Jun06 11:59 PM	Gum, Bubba	Ji
Transcribed Draft	Wilow, Globe, 1011155, 1 Transcribed Drafts				
Transcribed Draft	Willow, Weeping 0, 1011156, 1 Transcribed Drafts				
Reminder	Check on lab results,1011156,Willow, Weeping O	28Jun05 12:00 AM	16Jun05 12:00 AM	Gum, Bubba	Ji
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The purpose of this window is to assist users in managing case requirements. There are six types of notifications that may appear: Pending Cases, Prompts, Overdues, Notices, Reminders, and Transcribed Drafts. Each notification type appears only if it currently applies to a case that the Healthcare worker is assigned too.

• Pending Cases - automatically generated when a healthcare worker is assigned to an SCF (Foster Care) case.

Prompts - automatically generated by policy/guideline requirements for SCF case. This reminds the healthcare worker they have some type of action or document that needs to be completed within a timeframe to meet policy/guideline requirements. Entering the Health Visit Report (HVR) completes prompts. A HVR is a form that is filled out by a medical professional during a visit and returned to the Healthcare worker.

Overdues - are Prompts, which are not completed by the Due date. The difference between a Prompt and an Overdue is that a prompt appears prior to a due date and an Overdue appears after the due date.

• Transcribed Draft - this is an activity entry that is completed by a transcription service and sent directly to SAFE. The healthcare worker then reviews and edits the entry before finalizing when it then becomes a permanent part of the case documentation.

• Notices - created to remind the healthcare worker of something important on a case. These are strictly informational.

Reminders - this is an optional prompt that is created by the user.

Main Menu

🚹 SAFE 2.9.31 101	14 12-17-08							
File Module Wind	ow Help							
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🟠 Main Menu								_ 🗆 ×
Launch SA	Utah Chil	d Welfare Ma	nagement Sys	stem Dedicate	ed to the Pro	tection and Well	Being of Utah's	Children
7ar (80*	SAFE Monda m - noon a 1)538-4141	Help Des ay - Friday nd 1pm - 5 or <u>safehel</u>	sk :30 pm o <u>@utah.gov</u>		Documer	Attent ts tab on the gone	ion! Person win e.	dow is
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Case	Intake	Directory	Provider	Work	.oad Pi	ofessional Dev. Li	icensing	
	***	7		NEW		n sent.	2	EXIT -2
Action Items	Activities	Case List	Select Case List	Case Creation	Forms	Reports	File Import	Leave SAFE

This is a central launching pad for all areas of SAFE. There are five tabs located at the bottom of the window: Case, Intake, Directory, Provider and Workload. The buttons on each tab are just a larger versions of the icons found on the tool bar. Notice that the Activities and Case Creation buttons on the Case tab are greyed out meaning that they are unavailable for Healthcare.

Case List window

Search b)V VOfficeA	Norker:				- 44	Case	Type	-			ielect
Prim	ary Client	Only		C All Clients		C All Persons	case	C All W	orkers		<u>_</u> *	<u>felect</u>
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011269	SCE	Corn Cal	vin	Foster Child	040102007	05.Jun06.00:00	1.4	10Aug1993	XX		Gum Bubba	Prima
011271	SCE	Harris M	chael	Foster Child	040101831	13.Jun06.00:00	2a	25Nov1997	XX		Gum Bubba	Prima
011272	SCE	Pansy Pa	atrick T	Foster Child	030102497	06.000000	2.5	010ct1989	XX		Gum Bubba	Prima
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			- Go b	o Worker Assignm	ent							<u> </u>
			Go t	Person Health	NG 91							
			Go t	o Print Home to Ho	ome Packet							

This window displays all the cases that a specific nurse is assigned to as a secondary worker and provides a summary of case information. This window is a grid format (columns and rows). Notice that each row is a case and each column provides some particular kind of information about the case. To navigate to the Health windows, highlight a case and click the right mouse button (RMB) and then select Go to Person Health.

To Access the Health windows

To access the Health windows open the Main Menu window and click on the Caselist button on the Case tab. Highlight (single click) the Arial Simmons SCF case, click the right mouse button (RMB) and select "Go to Person Health". The health windows for Arial Simmons will be displayed. You will find data in all tabs on the Health windows. If you double click on a row on the Summary or Conditions tab it will bring up the Medical, Dental or Mental Health Detail window. The information on this window comes from the Health Visit Report (HVR) form, which is entered by the healthcare staff.

Person Health – Summary tab

훩 Person Healt	h 2303712 [Symms, I	Hobbie -	07600)2892]						_ 🗆 >
Person: Symms, Hol	obie	C	lient ID: 0	7600289	92 Per	son ID: 2303712	Age: 2	DOB: 03Apr2	2007	Gender	:F
C ase Worker Vic Valley		Phone	Number			Health Worker Nurse Ratchet		Pho (801)	n e Numt) 655-432	рег 22	
Summary HSOM	Conditions Al	lergy/Meds	Immuniza	ations H	History MI7	06 HC Professionals	5				-
Ev	ent	F	Appt Due	Appt D	ate Visit Da	te	Comments		Source	Status	6
A Laboratory			08Aug09			Labs ordered at F	РСМС		REF		
A Dentist		(08Aug09	06May(09				REF		
Ages and Stages					01May0	9 FOSTERING HEAL	LTHY CHILDRE	N, A Specialist,	HVR	Final	
Dental Exam					30Apr0	9 RONALD ASHTO	N, Dentist		HVR	Final	
DEC - Meth					18Apr0	9 SAFE AND HEAL	THY FAMILIES	- PCMC, Clinic	HVR	Final	
Well Child/CHEC					22May0	8 ROB LINDSAY, P	ediatrician		HVR	Final	
New Health Event	I										

This window displays a summary of Health events for the person. It includes the following information:

- Event
 - Three types of events, Medical, Mental Health and Dental.
 - When you double click on an event row SAFE will open the Event Detail window (Medical, Mental Health or Dental, see pages 16 – 20) where the information from the HVR form was entered.
- Appt. Due
 - \circ $\;$ This is the date the appointment needs to be completed by.
 - o 60 Days if no appointment noted.
 - 30 Days if timeline given such as see after 1st birthday or see in 3 months you will add 30 days to this date.
 - If an appointment date is given, you would enter it here.
- Appt. Date
 - This is the actual date of the appointment.
 - \circ $\,$ If an appointment date is given, it would be entered in both the Appointment Due and
 - Appointment Date box
- Completed date
 - The date the child actually saw the health care professional.
- Comments
 - Text entry limited to 255 characters.
- Source
 - Where the information came from.
- Status.
 - If the entry of the Health Visit Report (HVR) is complete the status will be Final, if partially complete then Draft status is selected.

Person Heath – HSOM tab

	mms, Hok	bie	с	lient ID: 076002	892	Perso	n ID: 23	03712	Age: 2	DOB: 06Mar2007	Gender:F
e Work /alley	(er		Phone I	lumber			Health V Nurse Ra	Vorker atchet		Phone Nur (801) 655-4	nber 1322
nmary	HSOM	Conditions	Allergy/Meds	Immunizations	History	MI706	HC Pr	ofessiona	ls		
HSOM	Date	HSOM Te	st Interval	Score		A/B/BC	C Statu	s	Comment	s	
20Jar	n09 8	8 Months	<u> </u>	2	ΘA	ОВ	O BC	<u> </u>			
_23No	V08 (6 Months	<u> </u>	5	ΘA	ОВ	OBC	<u> </u>			
20Au	ig08 🕻	3 Months	<u> </u>	2	ΘA	ОВ	OBC	<u>Oc</u>			
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The Health Status Outcome Measure (HSOM) is used to identify the acuity (Numeric Score) and health needs (Alpha Score) of a child placed in foster care. The HSOM score is a "snapshot" of the child at the time the score is completed. The scores can vary daily, based on the child's needs. The tool is used to track the child's status over time to make sure the FHC staff is assisting the Division of Child and Family Services in meeting the health, dental, and mental health needs of the child while in custody.

- Schedule of HSOM's
 - The HSOM score is completed on a regularly scheduled basis for the first 6 months and then based on the score.
 - Scheduled prompts for completion based on custody date:
 - 1 Month
 - 3 Months
 - 6 Months
 - Based on the 6 month numeric score:
 - 1, 2, and 3 will be done every 6 months.
 - 4 will be completed every 4 months.
 - 5 and 6 will prompt every 2 months.
- Scoring System
 - 1. Healthy.
 - a. Current on all requirements.
 - b. Overdue for exam only.
 - bc. Overdue for exam and/or follow-up and immunizations.
 - c. Overdue for immunization(s) only.
 - 2. Healthy. In counseling. No medical/mental health conditions requiring medication.
 - a. Current on all requirements.
 - b. Not receiving recommended counseling and/or overdue for exams and/or follow-up.
 - bc. Overdue for exam and/or follow-up and immunizations
 - c. Overdue for immunization(s) only.
 - 3. Chronic condition on preventive medications only. (Examples: Hay fever, Eczema, Oral Contraceptive, Fluoride, Topical Ointments).
 - a. Current on all requirements.

- b. Overdue for exams and/or follow-up only.
- bc. Overdue for exam and/or follow-up and immunizations
- c. Overdue for immunizations only.
- 4. Acute illness or chronic condition that REQUIRES regular on-going follow-up. Includes those placed in Residential Placement, Acute Care Facility, and State Hospital.
 - a. Current on all requirements/follow-up.
 - b. Overdue for exam and/or follow-up only.
 - bc. Overdue for exam and/or follow-up and immunizations
 - c. Overdue for immunization(s) only.
- 5. Medically fragile child. Has multiple and/or debilitating condition(s) that require assistance with activities of daily living. At risk for developing acute condition. Requires daily monitoring.
 - a. Current on all requirements/follow-up.
 - b. Overdue for exam and/or follow-up only.
 - bc. Overdue for exam and/or follow-up and immunizations
 - c. Overdue for immunization(s) only.
- 6. Other
 - a. AWOL (runaway)
 - b. New case or placement contacted three times/letter sent.
 - c. Not in custody.

Person Health – Conditions tab

e rson: Symms,Hob	obie		Client ID:	076002	2892	Person ID: 2303712	Age: 2 DC) B: 06Mar2007	Gender:F
ase Worker ic Valley		Phone	e Number			Health Worke Nurse Ratchet	r	Phone Nu (801) 655-	imber 4322
Summary HSOM	Conditions	Allergy/Med	s Immuni	zations	History	MI706 HC Professio	onals		
Show All Condit	ions 🔽								
Condition		Exam Date	D/C Date	AC	Display	Medical Treatment	Dental Treatment	Comments	Professional Nam
Healthy, no concei	rns 📃 💌	22May08	14Apr09				•		LINDSAY, ROB
Ages and Stages (Question 💌	09Mar08	14Apr09				•		CASH, TRACY
Surgery, see com	ments 💌 💌	23Nov08	14Apr09				•	Appendix	LEMONS, RICHARD
Drug Exposure	-	22May08					•	DEC exam	LINDSAY, ROB
Caries	-	30Jun08				Refer to dentist	•	Due to bottle?	MULITALO, KAREN
Neglect, see comm	nents 💌	30Jun08	30Jun08	·			·	environmental	MULITALO, KAREN
Neglect, see comm	nents 🔽	30Jun08	30Jun08				T	environmental	MULITALO, KAREN
Neglect, see comm	-up	30Jun08	30Jun08	ot Due	Appt Da	te Visit Date Comr	▼	[environmental	MULITALO, KAREN
Neglect, see comm ▲ Referral / Follow A Dentist	nents ▼	30Jun08	30Jun08 Apr 13	ot Due	Appt Da	te Visit Date Comr	▼ nents	[environmental	MULITALO, KAREN
Neglect, see comm	-up y Families - D	30Jun08	30Jun08 Apr 13 115	ot Due Jul09 Sep08	Appt Da	te Visit Date Comm	▼ nents	[environmental	MULITALO, KAREN
Referral / Follow A Dentist A Safe and Health A Mental Health Th	-up y Families - D erapist	S0Jun08	30Jun08 Apr 13 115 14M	x Due Jul09 Sep08 May09	Appt Da	te Visit Date Comm 30Jun08 09Mar08	nents	[environmental	MULITALO, KAREN

When you double click on a row under the Condition heading SAFE will open the Event Detail window (Medical, Mental Health or Dental, see pages 16 - 20) where the information from the HVR form was entered.

The following information is displayed in the window columns:

- Conditions
 - Selected from a drop down data window
- Exam Date
 - Date of the visit
- Noted Date
 - The date you are told the condition no longer exists. Commonly this will be gathered during the HSOM telephone call. Acute conditions SHOULD end.
- `A'
 - o Acute
- `C'
 - o Chronic
- Display
 - A check in this column displays the child's condition. If this box is not checked, the conditions will not display unless "Show All Conditions" is selected.
 - The checked conditions are what print on the Health Data Report.
- Medical Treatment
 - Explains what medical treatment was received for this condition.
- Dental Treatment
 - Drop down data window to choose what treatment was provided.
- Comments
 - Text entry limited to 255 characters.

The user has to scroll across to see all of the columns displayed on the upper section of this screen.

宿 Person	Health 23	30371	2 [Sy	mms, Hobb	ie - 07	600289	2]							_ 🗆 >
Person: Sy	mms, Hobb	oie		С	lient I): 076002	2892	Perso	n ID: :	2303712	Age: 2	DOB: 06M	ar2007	Gender:F
Case Work Vic Valley	(er			Phone	Numbe	÷r		H M	lealti lurse	n Worker Ratchet		PI (8	n one Numi 01) 655-432	ber 22
Summary	HSOM	Condit	tions 🛛	Allergy/Meds	Immu	nizations	History	MI706	HC	Professionals]			
Show A	ll Conditio	ons 🔽	i '-											
atment	Comme	ents	Prof	essional Na	me		Facility	1		Profe	ssional Spe	cialty	Date 1st	DX HVR Status
			LINDSA	AY, ROB	F	CMC				Pediatrician				Final
▼			CASH,	TRACY	F	AMILY S	UPPORT 8	& TREAT	MEN	Licensed Clini	ical Social Wo	orker		Final
•	Appendix		LEMON	IS, RICHARD	F	CMC				Other Health (Care Provider			Final
•	DEC exam	า	LINDSA	AY, ROB	F	CMC				Pediatrician				Final
	Due to bot	ttle?	MULITA	ALO, KAREN	5	SOUTH MA	AIN CLINIC	:		Nurse Practiti	oner			Final
•	environme	ental	MULITA	ALO, KAREN	s	SOUTH MA	AIN CLINIC	:		Nurse Practiti	oner			Final
I														
Referral	/Follow-u	up			A	opt Due	Appt Da	te Visi	t Date	Comment	ts			
A Dentist					1	3Jul09								
A Safe ar	nd Healthy	Familie	es - DEi	CExam 🗌	11	Sep08		30J	un08					
A Mental	Health The	rapist			14	4May09		09M	ar08					
•														Þ

- Professional Name
 - Shows the name of the Health Care professional that saw the child for the condition.
 - If this person has been entered in the SAFE data base you can type in their name and the facility and/or specialty will auto fill.
- Facility
 - Indicates the place where the professional practices.
- Professional Specialty
 - SAFE auto fills this information
- Date 1st DX
 - The date the child was first diagnosed with the condition.
- Referral / Follow-up
 - This area is completed if the child needs to return for a follow-up appointment or is referred to another professional for services.
- Appt. Due
 - This is the date the appointment needs to be completed by.
 - 60 Days if no appointment noted.
 - 30 Days if timeline given such as see after 1st birthday or see in 3 months you will add 30 days to this date.
 - If an appointment date is given, you would enter it here.
- Appt. Date
 - This is the actual date of the appointment.
 - If an appointment date is given, it would be entered in both the Appointment Due and Appointment Date box
- Completed date
 - The date the child actually saw the health care professional.
- Comments
 - Text entry limited to 255 characters.

When entered and saved a referral or follow-up reminder will display on the Summary Tab.

Person Health - Allergy/Meds tab

rson: Syn	nms, Hobbie	с	lient ID: 076003	2892	Person II):2303712	Age: 2	DOB: 0	6Mar2007	Gender:F	-
i se Work ≿Valley	er	Phone I	lumber		Hea Nur:	ith Worker se Ratchet			Phone Num (801) 655-43	iber 122	
Summary	HSOM Conditions	Allergy/Meds	Immunizations	History	MI706 H	IC Professionals					
Date	Allergies	D147 - 1	Symptoms		Source of	Information	Comr	nents			
23Nov08 22Mav08	Drug Bee Sting	 Difficulty Apaphyl 	Breathing actic Reaction	▼ Hosp ▼ Natur	oital ral Parent		Amoxic	Illin			
22May08	Dust	▼ Wheezin	iq	▼ Natur	ral Parent		-				
1							1				
i [Status	Medication		Strength	Dosage	Frequency	Pre	scribed By	Comments		
i late 05Feb09	Status Current	Medication	Cold Prepar	Strength 10 mg	Dosage 1/2tab	Frequency Every Day	Pre V Dr. L	scribed By Indsay	Comments Zyrtec for a	lergies	
t date 05Feb09 03Jan09	Status Current Completed	Medication OTC Allergy Zithromax	Cold Prepar	Strength 10 mg 100mg/Sc	1 Dosage 1/2 tab 2 T Tsp	Frequency Every Day Every Morning	Pre Pre Dr. L	scribed By indsay indsay	Comments Zyrtec for al x 10 Days fo	i lergies pr Otitis	
ate 05Feb09 03Jan09 03Dec08	Status Current Completed Discontinued	Medication OTC Allergy Zithromax Albuterol/Pro	Cold Prepar ▼ →Air ▼	Strength 10 mg 100mg/Sc Inhaler	1 Dosage 1/2 tab 21 Tsp 2 puffs	Frequency Every Day Every Morning Four Times a D	Pre	scribed By indsay indsay indsay	Comments Zyrtec for al x 10 Days fo	i Iergies vr Otitis	
Ate 05Feb09 03Jan09 03Dec08 01Jun08 22Mav08	Status Current Completed Discontinued No prescribed med Unknown Medicat	Medication Control Allergy Zithromax Albuterol/Pro No prescribe No prescribe	Cold Prepar ▼ →Air ▼ d medicatio ▼	Strength 10 mg 100mg/Sc Inhaler	1 Dosage 1/2 tab x1 Tsp 2 puffs	Frequency Every Day Every Morning Four Times a D	Pre Dr.L Dr.L Dr.L Dr.L V	scribed By indsay indsay indsay	Comments Zyrtec for al x 10 Days fo	i lergies pr Otitis	
 ✓ Date 05Feb09 03Jan09 03Dec08 01Jun08 22May08 	Status Current Completed Discontinued No prescribed mer Unknown Medicati	✓ Medication ✓ OTC Allergy/ ✓ Zithromax ✓ Albuterol/Pro ✓ No prescribe ✓ No prescribe	Cold Prepar ▼ → Air ▼ d medicatio ▼ ad medicatio ▼	Strengtin 10 mg 100mg/Sc Inhaler	Dosage 1/2 tab 21 Tsp 2 puffs	Frequency Every Day Every Morning Four Times a D	Pre Dr. L Dr. L Dr. L Dr. L V V V	scribed By indsay indsay indsay	Comments Zyrtec for al × 10 Days fo	i Iergies or Otitis	
ate DSFeb09 03Jan09 03Dec08 01Jun08 22May08	Status Current Completed Discontinued No prescribed med Unknown Medicati	Medication OTC Allergy Zithromax Albuterol/Pro No prescribe No prescribe	Cold Prepar ▼ →Air ▼ ad medicatio ▼ d medicatio ▼	Strength 10 mg 100mg/Sc Inhaler	Dosage 1/2 tab 1 Tsp 2 puffs	Frequency Every Day Every Morning Four Times a D	Pre Dr.L Dr.L Dr.L Dr.L V V	scribed By indsay indsay indsay	Comments Zyrtec for al x 10 Days fo	i lergies or Otitis	

This window displays information pertaining to a child's allergies and medications.

- Allergy area
 - o Date
 - The date the information was reported to DCFS caseworker or Healthcare worker.
 - o Allergies
 - Selection is made from a drop down list.
 - o Symptoms
 - Selection is made from a drop down list.
 - o Source of Information
 - Selection is made from a drop down list.
 - o Comments
 - Text entry limited to 255 characters..
- Medication area displays current and past medications.
 - o Date
 - The date the information was reported to DCFS caseworker or Healthcare worker.
 - o Status
 - Selection is made from a drop down list.
 - If "Unknown medication" or "No medication prescribed" is selected the same selection needs to be made in the Medication column.
 - o Medication
 - Selection is made from a drop down list.
 - Entry in this column is required.
 - Select "Unknown medication" or "No medication prescribed" if selected under status.
 - o Strength
 - The potency the medication is dispensed as.
 - Text entry limited to 255 characters.
 - o **Dosage**
 - How much of the medication the child is to receive: IE. Strength is 500 mg child is to receive 250mg dosage would be ¹/₂ tablet.
 - Text entry limited to 255 characters.

•

- Frequency
 - Selection is made from a drop down list.
- Prescribed By
 - Text entry of provider name.
- o Comments
 - Text entry limited to 255 characters.

Person Health - Immunizations tab

豫 Person Health 2303712 [Symms, Hol	bie - 076002892]				
Person: Symms, Hobbie	Client ID: 076002892	Person ID: 2303712	Age: 2	DOB: 06Mar2007	Gender:F
Case Worker Phon Vic Valley	e Number	Health Worker Nurse Ratchet		Phone Nur (801) 655-4	nber 322
Summary HSOM Conditions Allergy/Med	ls Immunizations Histo	ory MI706 HC Professiona	als		
Immunization Type	Given Date Due Date	Information Source	Comments		
Haemophilus Influenzae b	03Jan09	Medical Record 📃 💌			
Diphtheria, Tetanus, Pertussis, HepB, Poli 💌	22May08	HVR 💌			
Measies, Mumps, Rubella	U3MayU8	Health Department			
Diphtherie, Tatepus Pertussis HenB, Poli	USMayU8	Natural Parent			
Diprimena, retands, retussis, hepb, roll	OJimayoo				
•					

- Immunization information can be entered in two ways
 - Directly on this screen
 - Click the RMB and select add
 - Enter on the HVR Details window
- Immunization Type
 - Selection is made from a drop down list.
- Given Date
 - The date the immunization was given to the child.
- Due Date
 - The date the next immunization of this type is due.
- Information Source
 - Selection is made from a drop down list.
- Comments
 - Text entry limited to 255 characters.

Person Health – History tab

Person Health 2303712 [S	symms, Hobble - 076002892]								
Person: Symms, Hobbie	Client ID: 076002892	2	Perso	n ID: 23037	12 1	Age::	2 DOB: 06Mar200	7 Gender:F	
Case Worker Vic Valley	Phone Number		I	Health Wo Nurse Ratc	r ker het		Phone (801) 65	Number 55-4322	
Summary HSOM Conditions	Allergy/Meds Immunizations H	istory	MI706	HC Profe	ssionals				
Problem	Family Member		In	formation	Source		Comments		_
Arthritis	Maternal Grandfather		Other Fa	amily Memb	er	-	Outletere		
Substance Abuse	Mother	<u> </u>	Self Rep				Opiates Sielde Cell Disesse		
Blood Disorders			Heatth D	apartment		÷	DASSED DISEASE		
Newborn Hearing Screen		· ·	r leain D	epartment		•			
									▶
Birth Height: 20.5 in	Pre-Natal Care: Yes 💌	Тох	Screen	Date	Rest	ılt	Explain Abnormal		
Birth Weight: 7#11oz	Birth OFC:	– –	Nom	U6MarU7	JAbnorm	al 💌	Positive for Opiates		
Birthplace: Tuscaloosa									
		Тох	Screen	Date	Rest	ılt	Explain Abnormal		
Hospital: junknown			Baby	06Mar07	Abnorm	al 💌	postivie opiates		
Special E	quipment								
С-Рар		IQ		Instrume	nt	Date	Tested Comments		
Nebulizer									
Pulse Oximeter									
Common to									
Comments									

This window is where medical information for the immediate, biological family members is entered, as well as any birth or IQ information for the child. The medical history information can be very helpful when a child is adopted.

- Problem
 - Selection is made from a drop down list.
- Family Member
 - Selection is made from a drop down list.
- Information Source
 - Selection is made from a drop down list.
- Comments
- Text entry limited to 255 characters.
- Birth Height
 - Text entry limited to 7 characters.
- Pre-Natal Care
 - o Yes, No, Unknown
 - Birth Weight
 - \circ $\;$ Text entry limited to 7 characters.
- Birthplace
 - Text entry limited to 70 characters.
- Hospital
 - Text entry limited to 70 characters.
- Special Equipment
 - Multiple select field.
 - User can select or deselect choices as needed.
- Tox Screen Mom must have release from mother before entering this information.
 - o Date
 - The date the test was done.
 - o Result
 - Selection is made from a drop down list.
 - o Explain Abnormal

Utah DCFS & Fostering Healthy Children

- Text entry limited to 255 characters.
- Tox Screen Baby
 - o Date
 - The date the test was done.
 - o **Result**
 - Selection is made from a drop down list.
 - o Explain Abnormal
 - Text entry limited to 255 characters.
- IQ test information
 - To enter this information the user will click the right mouse button (RMB) and select "Add".
 - o IQ
 - Text entry limited to 3 characters.
 - o **Instrument**
 - Selection is made from a drop down list.
 - o Date Tested
 - Date format DDMMMYY
 - o **Comments**
 - Text entry limited to 255 characters.
- Comments
 - o Text entry limited to 255 characters

Person Health – MI706 tab

ĩ	Person Heal	th 2303712 [Symms, H	obbie - 0760	02892]					×
P	erson:Symms,	Hobbie		Client ID:	076002892 P	erson ID: 2303712	Age: 2	DOB: 06Mar2007	Gender:F	
1	c ase worker /ic Valley		Pho	ne Number		Health Worker Nurse Ratchet		(801) 655-4	nber 322	
	Summary HSC)M Condition:	s Allergy/M	eds Immuniz	ations History N	11706 HC Professional	s			
	Mi706 Numbe	r Begin Date	End Date	Issue Date	Issuer	Reason		Comments		
	0760028921	01Jun08		30Jul08	NANCY NURSE	HMO Assignment		HEALTHY U - 076	0028921	
	907865	22May08	22Jun08	22May08	ELISE ELIGIBILITY	No Medicaid at Remo	val	•		
	•								Þ	1

If a child is placed in the custody of DCFS and does not have a Medicaid card an MI706 is issued to cover any medical expenses using state funds. If child is eligible for Medicaid the state is reimbursed for the state dollars used.

Person Health – HC Professional tab

宿 Person Hea	alth 2303	712 [5	iymms, H	obbie - 07600289	92]									
Person: Symma	s, Hobbie			Client ID: 07600	2892	Perso	n ID: 230	0371	2	Age: 2	DOB: 06N	/ar2007	Gende	er:F
Case Worker Vic Valley			Pho	ne Number		ļ	Health V Nurse Ra	Vork atche	ker et		P (1	hone Numb 801) 655-432	22	
Summary HS	60M Con	ditions	Allergy/M	eds Immunizations	History	MI706	HC Pr	ofes:	sionals					
Current Pr	imary Car	e Prof	essionals							·				
Тур	e F	Profess	sional Narr	ne Facilit	V .	P	rofessi	onal	Speci	1	Address	Cit	.v	State Zij
Medical		NDSAY	, ROB			6441 Pe	ediatricia			100 N ME	DICAL DR	SALT LA	KE CITY	UT 8
Dental	M		D, KAREN	SOUTH MAIN CL		9749 NO	urse Pra	ctitio	ner 	3536 S M	AIN 000 S BLDC A	SOUTHS		
		RUNNER	C DOUG	VALLEY MENTA			censea		cai Soc	1121 E 3	SUUS DEDGA	SISALI LA	KE CITY	
•														•
Other Heal	th Care Pi	rofessi	ionals —											
Prior PCP	Status	3	Type Pr	rofessional Name	: Fa	acility			Pro	fession	al Specialty	Address		City
	Current	▼ Me	dical 🔽 BF	RUNKER, DOUG	VALLEY M	IENTAL	- HEALT	角	Licens	ed Clinica	Social Worker	1121 E 390	OS BL:	SALT LAKE
	Previous	▼ Ret	ferra 💌 CA	ASH, TRACY L	FAMILY SU	JPPOR	T & TRE	<u>#</u>	Licens	ed Clinica	l Social Worker	1255 N 120		
	Previous	■ me		MONS, RICHARD S	PCMC			999	Other r	Health Car	'e Provider	TUU N MEDIC	AL DR	SALTLAKE

This window displays a child's Primary Care Professionals, Prior Primary Care Professionals and other Health Care Professionals a child has or may need to visit.

- Primary Care Professionals are identified on the HVR Details window, by selecting the "Primary" check box.
- Only one Professional is allowed for each type of Primary Care Professionals.
 - Medical, Dental, and Mental Health
- Two ways to add a health care professional to SAFE.
 - RMB and select "Add".
 - By using the Health Care Professional Search window, refer to the last page of this document.
 - Clicking on the binocular button opens the Health Care Professional Search window.
- Additional columns that are not displayed on screen print are:
 - o State
 - o Zip Code
 - Telephone number, including area code
 - Obsolete Date
 - If a Professional is no longer practicing SAFE provided the capability to obsolete this professional in the database.
 - Health workers can no longer select this Professional on HVRs but they still display on the Health windows.
 - If the Professional returns to practice the Obsolete Date can be removed and the Professional can again be selected as the Professional seen.

As policies, guidelines, Federal and local laws change and software applications improve and as users become familiar and efficient in their use of SAFE, adaptations to the system become necessary. The following change has been requested. The Current Primary Care Professional area will be removed and all professionals will be displayed. Professionals who are providing services to the child will have a Status of Current. If the Professional is no longer providing services their Status will be Previous.

裔	Person	He	alth										
Person:			Client	t ID:	Pe	rson ID:		Age:14 D	0B: 08Ju	11993	Gei	nder:M	
Ca	Case Worker			Phone Num	mber Health Worker		er	Phone Number			mber		
S	ummary		НЅОМ	Conditions	Allergy/	Meds	Immunizations		History	MI706		HC Pr	ofessionals
Г	Current	Pr	imary Care F	Professionals									
	Status		Last Seen	Professional Name	Org.	Fa	cility		Address		Telep	ohone	Speciality
	Current	Ŧ	01FEB08	ASHTON, DENNIS	IHC	WILLOWCRE	EEK PEDIATRICS	150 Ea	ist Center St, Pro	vo 84606	(801) 3	374-701	Allergist 🔄
	Current	-		1		WASATCH	MENTAL HEALT						Dermatologist 🗕
	Current	Ŧ		ABBINANTI, MARTIN		HC SOUTH:	SANDY CLINIC						Pediatrician
	Current	Ŧ		BRINLEY, DERRY		DAVIS BEHA	AVIORAL HEAL						Family Practitio 🚽
	Current	Ŧ		DAVIS, BRETT		UTAH VALL	EY PEDIATRICS						
	Current	-		SHANTEAU, RICHARD		WASATCH	MENTAL HEALT						
	Previous	Ŧ		WHITEHEAD, GORDOL		FAMILY DEN	ITAL PLAN						
	Previous	-		ASHTON, SAMUEL		WASATCHI	MENTAL HEALT						
	Previous	-		LAURET, MICHAEL		UTAH VALL	EY PEDIATRICS						

Professionals with a status of Current will display at the top. This change shall allow users to view all the Professionals currently providing care to a child on one window and at a glance.

Health Data Report Prompt window

Select Data To Print (Place Number in Box to Indicate Sort Order) Image: Select Individual Data Blocks Image: Print Considerations Image: Current Medication Image: Current Medication Image: Current Medication Image: Current Health Events Image: Current Health Current Pope: Current Pope: Current Pope: Current Pope: Current Pope: Current Pope: Current Po	훩 Health Data Rep	oort Prompt 2303550 [Simmons, Ariel	030499033]	
	(Pla (Pla Select Individual Data Blocks	Select Data To Print ce Number in Box to Indicate Sort Order) Print Considerations Allergies Data Special Equipment Current Medication Medication History Current PCP Other HCP Current Health Events All Health Events All Health Events Completed Referrals Completed Referrals Family Health History Data Psycho/Social Data Birth Data Historical Information	030499033	User Defined Report Subtitle Health Care Considerations This text box allows for entry of 32000 characters and will origination the Health Data Report when the "Print Considerations" box is checked. Considerations" box is checked. Image: Consideration or the transmission of transmissi transmissicon of transmission of transmission of tran

This window is used when a printout of the health information is needed.

• Print option

0

- Not limited to Health care staff.
- Can print one or multiple areas of health data.
- Default selection prints all current health information.
 - Users can select the order in which the information will print.
 - Change the number to print data in the order you want.
- User can create a subtitle for the report.
- If there are considerations the Health worker wants the person receiving the report to be aware of they can enter them in the Health Care Considerations text box so they will be on the report.

• User can preview the report before printing.

Preview of Health Data Report

	SAFE	Health Data Rep	port	
Printed: 14Apr09 11:49				Page 1 of 6
Person: Simmons, Ariel	Client ID: 030499	033 Person ID: 2303	550 DOB 28Jan1995	
Case Worker Phone Bubba Gum (801)	Number Health Wor 333-3598 Nurse Rate	ker Phone Nur 1et (801) 655-4	nber 1322	
Health Care Consideratio				
Health Care Consideratio This text box allows for the checked. Unless otherwise sp	entry of 32000 characters and p ecified only current data prints	rints on the top of the H on the report.	Health Data Report when the "Prin	nt Considerations" box is
Health Care Consideratio This text box allows for the checked. Unless otherwise sp	entry of 32000 characters and p ecified only current data prints	rints on the top of the H on the report.	Health Data Report when the "Prin	nt Considerations" box is
Health Care Consideratio This text box allows for the checked. Unless otherwise sp Allergies Data	entry of 32000 characters and p ecified only current data prints	rints on the top of the H on the report.	Health Data Report when the "Prin	nt Considerations" box is

See additional handout for the SAFE Health Data Report.

erson: Symms, Hobbie	Client ID: 076002892	Person ID: 2303712	Age: 2 D	0 B: 06Mar2007	Gender:F	
Case Worker /ic Valley ivent Type(s):	Phone Number Health Worke Nurse Ratchet	er	Phone Number (801) 655-4322	Date of Visit: Received:	22May08 13Jun08	
Well Child/CHEC	>>> Prof (L,F): LINDSAY, F	ROB	<u>#</u>	Status:	Final	•
	Facility: PCMC Prof Spec: Pediatrician	1	Primar	y: 🗆 🗓		
Conditions	Vitals / Labs		Immunizations Given	/ Other		
Condition	Noted Date A	C Display	Medical Treatr	nent		
Healthy, no concerns	✓ ✓				DEC exam	
						<u> </u>
Referral / Follow-up A Safe and Heatthy Families -	DEC Exam >>>> 11 Sep08	pt Date Visit Date 30Jun08		Comments		

Medical Event Detail - Conditions tab

Medical Event Detail window – Vitals / Labs tab

👔 Medical Event Detail 23	03712 [Symms, Hobbie - 076002892]			-	
Person: Symms, Hobbie	Client ID: 076002892	Person ID: 2303712	Age:2 DO	B: 06Mar2007	Gender:F	
Case Worker Vic Valley Event Type(s):	Phone Number Health Worke Nurse Ratchet	r	Phone Number (801) 655-4322	Date of Visit: Received:	22May08 13Jun08	
Well Child/CHEC	Prof (L,F): LINDSAY, R Facility: PCMC Prof Spec: Pediatrician	:08	Primary	Status: 🖡 : 🗖 🔞	final	•
Conditions	Vitals / Labs		Immunizations Given /	Other		
Ht: 36 in Temp: 98.6 Lab HGB: 39.6 Results Urine negative	Wit: 30 lbs OFC: BP: 100/60 HR: 90	RR: 16				

Medial Event Detail window –Immunization/Other tab

Case Worker Phone Number Health Worker Phone Number Date of Visit: Subba Gum (801) 333-3598 Nurse Ratchet (801) 655-4322 Received: 14 Swent Type(s): Prof (L,F): ASHTON, DENNIS Status: Final Pacility: WILLOW CREEK PEDIATRICS Primary: Status: Final Prof Spec: Pediatrician Primary: Status: Final Conditions Vitals / Labs Immunizations Given / Other At Visit Diphtheria, Tetanus and Pertussis Never completed full searies as a child Assistant Caseworker Assistant Caseworker Measles, Mumps, Rubella Immunizations Given Instaral Parent On-call Worker Natural Parent	Case Worker bubba Gum (801) 333-3598 Phone Number Nurse Ratchet Phone Number (801) 655-4322 Date of Visit: went Type(s): Prof (L,F): ASHTON, DENNIS Received: Prof (L,F): ASHTON, DENNIS Status: Final Facility: WILLOW CREEK PEDIATRICS Primary: Prof Spec: Pediatrician Immunizations Given / Other Conditions Vitals / Labs Immunizations Given Comments At Visit	14Jul06
Prof (L,F): ASHTON, DENNIS Status: Final Facility: WILLOW CREEK PEDIATRICS Primary: Prof Spec: Pediatrician Immunizations Given / Other Conditions Vitals / Labs Immunizations Given Comments Diphtheria, Tetanus and Pertussis Never completed full searies as a child Hepatitis A Measles, Mumps, Rubella Foster Parent Natural Parent On-call Worker 	Prof (L,F): ASHTON, DENNIS Status: Final Facility: WILLOW CREEK PEDIATRICS Primary: Prof Spec: Pediatrician Immunizations Given / Other Conditions Vitals / Labs Immunizations Given Comments At Visit	
Facility: WILLOW CREEK PEDIATRICS Prof Spec: Pediatrician Conditions Vitals / Labs Immunizations Given Comments Diphtheria, Tetanus and Pertussis Never completed full searies as a child Hepatitis A Immunizations Measles, Mumps, Rubella Immunizations	Facility: WILLOW CREEK PEDIATRICS Prof Spec: Pediatrician Conditions Vitals / Labs Immunizations Given Comments At Visit	
Prof Spec: Pediatrician Conditions Vitals / Labs Immunizations Given Comments Immunizations Given At Visit Diphtheria, Tetanus and Pertussis Never completed full searies as a child Hepatitis A Immunizations Measles, Mumps, Rubella Foster Parent Natural Parent On-call Worker	Prof Spec: Pediatrician Conditions Vitals / Labs Immunizations Given / Other Immunizations Given Comments At Visit Diabthering Telepure and Deducation Visit Immunizations Given	
Conditions Vitals / Labs Immunizations Given / Other Immunizations Given Comments At Visit Diphtheria, Tetanus and Pertussis Never completed full searies as a child ✓ Assistant Caseworker Hepatitis A ✓ Caseworker Measles, Mumps, Rubella ✓ Foster Parent Natural Parent On-call Worker	Conditions Vitals / Labs Immunizations Given / Other Immunizations Given Comments At Visit	
Conditions Vitals / Labs Immunizations Given / Other Immunizations Given Comments At Visit Diphtheria, Tetanus and Pertussis Never completed full searies as a child Assistant Caseworker Caseworker Measles, Mumps, Rubella Foster Parent Natural Parent On-call Worker 	Conditions Vitals / Labs Immunizations Given / Other Immunizations Given Comments At Visit Disbilitaria Talapus and Datussia Musics completed full pageige as a child Musics completed full pageige as a child	
Immunizations Given Comments At Visit Diphtheria, Tetanus and Pertussis Never completed full searies as a child ✓ Assistant Caseworker Hepatitis A ✓ Caseworker Caseworker Measles, Mumps, Rubella ✓ Foster Parent Natural Parent On-call Worker ✓ On-call Worker ✓	Immunizations Given Comments At Visit	
Diphtheria, Tetanus and Pertussis Never completed full searies as a child Hepatitis A Measles, Mumps, Rubella Keasles, Mumps, Rubella Keasle	Dishtharia, Tatapus and Bartuania	
Hepatitis A Measles, Mumps, Rubella Measles,	Dipinitetia, relatius and Percussis	
Measles, Mumps, Rubella	Hepatitis A	
On-call Worker	Measles, Mumps, Rubella 💽 Foster Parent	
On-call Worker	🔲 Natural Parent	
	On-call Worker	
Residential Treatment Staff	Residential Treatment Staff	
Tracker	Tracker	
Transporter	Transporter	
Unknown	Unknown	

These windows are used to record information from a Medical visit. The foster parent, transporter, or youth takes a Health Visit Report, triplicate form, with them to the medical visit. The doctor fills out the form keeping one copy and returning the other two copies. One of the copies is placed in the child's Home-to-Home book and the third copy is given to the Health worker for entry into SAFE.

Dental Event Details window – Conditions tab

🏠 Medical Event Detail 2303712 [Sym	ms, Hobbie - 076002892]				. 🗆 🗙
Person: Symms, Hobbie	Client ID: 076002892	Person ID: 2303712	Age:2 DO	B: 06Mar2007	Gender:F	
Case Worker Pho Vic Valley Event Type(s):	ne Number Health Worke Nurse Ratchet	er	Phone Number (801) 655-4322	Date of Visit:	30Jun08 14Apr09	
Dental Exam >>>	Prof (L,F): MULITALO, Facility: SOUTH MA Prof Spec: Nurse Prac	KAREN IN CLINIC titioner	Primary	Status: [r: 🗖 👸	Final	•
Conditions	Vitals / Labs		Immunizations Given /	Other		
Condition	Noted Date A	C Display	Medical Treatm	ent		c
Caries		Refer to	dentist		Due to bottle?	
<						▶
Referral / Follow-up	Appt Due Ap	opt Date Visit Date	(Comments		
A Dentist	13Ju09					

These windows are used to record information from a Dental visit. The foster parent, transporter, or youth takes a Health Visit Report, triplicate form, with them to the medical visit. The dentist fills out the form keeping one copy and returning the other two copies. One of the copies is placed in the child's Home-to-Home book and the third copy is given to the Health worker for entry into SAFE.

Dental Event Details window – Other tab

Person: Simmons, Ariel Client I Case Worker Phone Numb Bubba Gum (801) 333-3598 Event Type(s): Dental Exam >>> IV Prof Fa	D: 030499033 Person ID: 2303550 Age: 8 DOB: 02May1998 Gender: F er Health Worker Phone Number (801) 655-4322 Date of Visit: 01Mar06 3 Nurse Ratchet (801) 655-4322 Received: 17Mar06 (L,F): ASHTON, RONALD Marceived: Status: Final
Case Worker Phone Number Bubba Gum (801) 333-3598 Event Type(s): Dental Exam >>> IV Prof Fa	er Health Worker Phone Number Date of Visit: 01Mar06 Nurse Ratchet (801) 655-4322 Received: 17Mar06 (L,F): ASHTON, RONALD Status: Final
Dental Exam Prof	(L,F): ASHTON, RONALD Katus: Final
Fa	
	cility: Primary: 🗌 🎧
Prof	Spec: Dentist
Conditions	Other
	At Visit
	Assistant Caseworker
	Caseworker
	Foster Parent
	Natural Parent
	On-call Worker
	Residential Treatment Staff
	Tracker
	Transporter

Mental Health Event Details window – Axis tab

'erson: Symms, Hobbie	Client ID: 076002892	Person ID: 2303712	Age: 2	0	OB: 06Mar2007	Gender:F
	Prof (L,F): BRUNK	ER, DOUG		44	Primary:	0
vent Type(s):	VALLEY	Y MENTAL HEALTH			Date of Visit:	07Jul08
Comprehensive MH Assessment Development Assessment	Location:				Received:	14Apr09
	HCP Spec: License	d Clinical Social Worker			Status: Fi	nal 💌
Axis C	omments	Treatment / IQ		Re	ferral / Follow-up	
Axis I	eep Disorder					
Axis II		222				
Axis II No Diagnosis on Axis I Axis II Axis III Drug Exposure		222				
Axis II No Diagnosis on Axis I Axis II Drug Exposure Axis II Other Psychosocial and E	Environmental Problems	Neglected by parent				

These windows are used to record information from a Mental Health visit. The foster parent, transporter, or youth takes a Health Visit Report, triplicate form, with them to the medical visit. The doctor or therapist fills out the form keeping one copy and returning the other two copies. One of the copies is placed in the child's Home-to-Home book and the third copy is given to the Health worker for entry into SAFE.

Mental Health Event Details window – Comments tab

erson: Symms, Hobbie	Client ID	:076002892	Person ID: 2303712	Age: 2	DOB: 06Mar2007 Gender:	F
	Prof	(L,F): BRUNKE	R, DOUG		🏙 🛛 Primary: 🗔 👸	
vent Type(s):		VALLEY	MENTAL HEALTH		Date of Visit: 07Jul08	_
Comprehensive MH Assessme	nt >>> 🗸	ation			Received: 14Apr09	_
evelopment Assessment	>>>					_
	HCP	Spec: Licensed	I Clinical Social Worker		Status: Final	-
	Commonte		T		Inc. us.	
nis			riedunenu / ig			
Opiods prenatall. Recommend p	sleep difficulties. Child lay therapy bi-monthly.	well adjusted to	foster mom and plays well	with sibling	during evaluation. Was exposed to	4
Dpiods prenatall. Recommend p	sleep difficulties. Child lay therapy bi-monthly.	well adjusted to	foster mom and plays well	with sibling	during evaluation. Was exposed to	×
piods prenatall. Recommend p	sleep difficulties. Child	well adjusted to	foster mom and plays well	with sibling	during evaluation. Was exposed to	Ă
Opiods prenatall. Recommend p	sleep difficulties. Child lay therapy bi-monthly.	well adjusted to	foster mom and plays well	with sibling	during evaluation. Was exposed to	
Opiods prenatall. Recommend p	sleep difficulties. Child lay therapy bi-monthly.	well adjusted to	foster mom and plays well	with sibling	during evaluation. Was exposed to	4

Mental Health Event Details window – Treatment / IQ tab

👔 Mental Health Event Detail 23	303712 <mark>[Symms, Hobb</mark> ie - 07	6002892]		
Person: Symms, Hobbie	Client ID: 076002892	Person ID: 2303712	Age: 2	DOB: 06Mar2007 Gender: F
	Prof (L,F): BRUNK	ER, DOUG		🏙 🛛 Primary: 🗌 🙀
Event Type(s):	VALLE	Y MENTAL HEALTH		Date of Visit: 07Jul08
Comprehensive MH Assessment Development Assessment	>>> 🗸 Location:			Received: 14Apr09
	HCP Spec: License	ed Clinical Social Worker		Status: Final
Axis Con	nments	Treatment / IQ		Referral / Follow-up
Treatment Recommended	Comments			
IQ Instrument	Date Tested Comments			

Mental Health Event Details window – Referral/Follow-up

🕋 Mental Health Event Detail 230	3712 [Symms, Hobbie - 07	6002892]		_	
Person: Symms, Hobbie	Client ID: 076002892	Person ID: 2303712	Age: 2	DOB: 06Mar2007 Gender: F	
	Prof (L,F): BRUNK	ER, DOUG	<u>à</u>	🌢 🛛 Primary: 🗖 🔂	
Event Type(s):	VALLE	Y MENTAL HEALTH		Date of Visit: 07Jul08	
Comprehensive IVIH Assessment Development Assessment	>>> 🔽 Location:			Received: 14Apr09	
	HCP Spec: License	ed Clinical Social Worker		Status: Final 💌	
Axis Comm	ients	Treatment / IQ		Referral / Follow-up	
Referral / Follow-up	Appt Due App	ot Date Visit Date		Comments	

To Enter a Health Care Professional in SAFE

Health Care Professional 9	5earch		<u>? ×</u>			
Search Item	Search Type	Search Value				
Last Name	▼ Starts With	a	Search			
0	•		Clear			
0	-					
0						
,			5			
Query	Select	New <u>E</u> dit <u>D</u> elete	<u>H</u> elp			
Name	Facility	Specialty	Health			
ADAMS, DOUGLAS		Dentist	Dental			
ADAMSON, DENNIS	PINEHURST PLAZA	Oral Surgeon	Medical			
ARMSTRONG, ROBERT	IHC MANTI CLINIC	Family Practitioner	Medical			
ASHTON, DENNIS G	WILLOW CREEK PEDIATRICS	Pediatrician	Medical			
ASHTON, RONALD G		Dentist	Dental			
•			Þ			

Health Care Professional Search

Conduct a preliminary search for a Health Care Professional. If the professional's name appears, double click and it will be added to the HVR, or highlight the name and click "Select".

If the professional's name does not appear select "New". The Health Care Professional Details window will open.

Realth Care Professional Details - [New]	<u>? ×</u>
Name (Last, First, MI): KeniKeni Mari	in 🗾
Specialty: Orthopedic Surgeon	•
Facility: Orthopedic Center	
Address: 590 Wakara Way	
Zip: 84103 City: SALT LAKE CITY	State: UT
Phone: 801 587-7100 Ext:	
Fax: -	
J	
Сору	<u>N</u> ew <u>S</u> ave <u>C</u> lose

When all the information is entered select "Save".

Proposed Enhancements

The following changes have been requested and the proposed completion date is September/October2009.

Person Health – MH Summary tab, Axis view

erson: Simmons, Ariel	Client ID: 030499033	Pers	on ID: 2303550	D Age:14	DOB: 11Feb1995	Gender:F	
Case Worker Phone	Number		Health Work	er	er Phone Number		
Bubba Gum (801) 3	33-3598		Nurse Ratche	ł	(801) 655-4	322	
Summary MH Summary ASQ/ASQ-SE C	onditions Allergy/Me	ds Immuni	izations HSO	M History MI70	6 HC Professionals		
Axis O Treatment							
		Date DV	Current Dt		ammanta		
309.21 Separation Anxiety Disorder		07.1008	07.1008		omments		
315.9 Learning Disorder NOS							-
314.01 Attention-Deficit/Hyperactivity Disorde	r. Combined Type						—
294.9 Cognitive Disorder NOS		05Apr06	07Jul08				_
311 Depressive Disorder NOS		<u> </u>					
Axis II							
No Diagnosis on Axis II		07Jul08	07Jul08				
Axis III							
Diabetes		05Apr06	07Jul08	Type 1 Diabetes			
Not Otherwise Classified, see comments				Heart transplant			
Axis IV		050 00	050.00			_	
Primary Support Group; problems with Social Environment; problems related to		USApr06	USApr06	lack of family stru	icture		-
Social Environment, problems related to				cultural issues			
Axis V OAFSCORE		05.8 mr06	07.009	O 0 E (ourmont)			
35		05Apr06	07.1008	GAF (current)			
		[05Apro7	10730100				_

This view is a display only window. The Axis information displayed here if from the Mental Health Event Details window. This view allows users to see when a specific problem was first diagnosed and if it is still a problem. Currently in SAFE a user must open each Mental Health Event Detail window to view this information.

Person Health – MH Summary tab, Treatment view

宿 Person	Health 23035	50 [Simmons	, Ariel - 030	499033]					_ 🗆 ×		
Person: Si	mmons, Ariel		Client ID:	030499033	Person ID: 23	03550	Age:14	DOB: 11Feb1995	Gender:F		
Case Worker P Bubba Gum (8		Ph (80	2 hone Number 801) 333-3598		Health Nurse R	Worker atchet		Phone Humber (801) 655-4322			
Summary MH Summary ASQ/ASQ-SE			Conditions	Allergy/Meds	Immunizations	нѕом	History MI706	HC Professionals			
O Axis	O Treatment										
Date	Tx Recomme	endations	Comments						▲		
07Jul08	Individual Therap	oy 🔤									
	Family Therapy										
	Skills Developme	ent I	learn techniques and strategies to appropriately manage her health conditions.								
	Stable Placemen	rt									
16Jul07	Other	H	Hospitalization -medical treatment for heart rejection								
	Medication Mana	agement									
	Residential Place	ement I	Residential North								
	Individual Thera	py (Continuation with previous therapy Child Empowerment sevices plus added therapy with Becky Pierce								
05Apr07	Other	1	The exam provided 32 recommendations for Vai. Of these, 7 were general recommendations for the team, 17 we								
05Apr06	pr06 Individual Therapy To address depression, health issues, academic functioning and family issues.										
	Other	J	essica and Ta	iylor be given a	dequate support t	o help th	em manage Vaio	leti's many health issi	ues and appointment		
									▼		

This view is a display only window. This view displays all the Treatment Recommendations and any comments that were entered on the Mental Health Event Details windows.

Person Health – ASQ/ASQ-SE tab

7	SAFE 2	9.31 1014 1	2-17	7-08								_	8 ×
1	JIE Edit	View Functio	n N	nodule Wi	ndow Help .ହେଟାର କୋ କ		<u>∧ ⊼ ∿</u>	an the m	m	a .			
2			550		Ariol 0204	00022.1	V 141		القا				
ľ	Person Health 2303550 [Simmons, Ariel - 030499033] X												
C	Person: Simmons, Ariel Client ID: 030499033 Person ID: 2303550 Age: 14 L. DOB: 11Feb1995 Gender: F Case Worker Phone Number Health Worker Phone Number												
E	ubba Gum			(80) 	1) 333-3598			Nurse	Ratel	net	(80	1) 655-4322	
	Summary	MH Summary	ASQ	i/ASQ-SE	Conditions Alle	ergy/Meds Im	munizations	HSOM Histor	ry M	706 HC Professi	onals		
					Ages and St	ages				Ages ar	nd Stages - Soo	cial Emotiona	al
	Date	Months			Gross Motor	Fine Motor	Prob Solv	Pers - Soc	Ref	Months	Cuf Off Score	Child Score	Ref
	15JAN07	20 months	Ť	40	30		40	30		24 months 💌	50	45 90	┢
R	eady											30Apr 10:17	

This window is where the results of the Ages and Stages and Ages Stages Social Emotional Questionnaire will be entered. It also documents if a referral for services was made. Only specific Health care staff will have access to enter the results, but all users will be able to view this information.