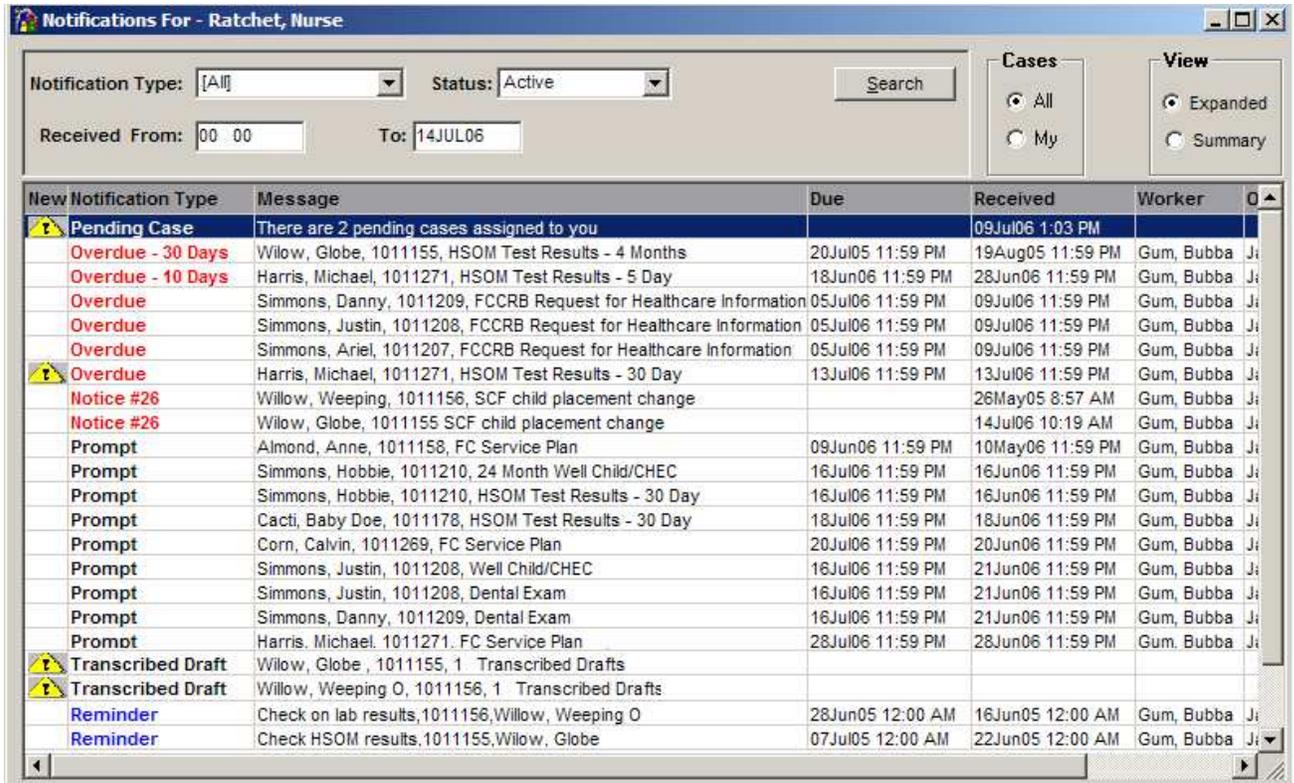


Utah Division of Child and Family Services & Fostering Health Children  
 SACWIS System (SAFE) Screen Prints  
 May 5, 2009

**Notification window**



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

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

The screenshot shows a software window titled "Case List - [my case list]". At the top, there is a search bar and a "Region/Office/Worker:" field. Below that are radio buttons for "Primary Client Only" (selected), "All Clients", "All Persons", and "All Workers". A "Case Type:" dropdown menu is set to "[ALL]". A "Select" button is on the right. The main area is a grid with the following columns: Case ID, Case, Name, Role, Client ID, Start Date, O/D, DOB, IV-E Elig, Med Elig, Primary Worker, and Relat. The grid contains several rows of case data. A context menu is open over the row for Case ID 1011207, Name "Simmons, Ariel", Role "Foster Child". The menu items include "Print", "Sort...", "Filter...", "Save Grid Settings", "Reset Grid Settings", "Go to Action Items For Case", "Go to Action Items For CaseList", "Go to Activities For Case", "Go to Activities For CaseList", "Go to Case", "Go to Case Creation", "Go to Document Index For Case", "Go to Process Guide For Case", "Go to User Action Item", "Go to Worker Assignment", "Go to Person Health" (highlighted), and "Go to Print Home to Home Packet".

Case ID	Case	Name	Role	Client ID	Start Date	O/D	DOB	IV-E Elig	Med Elig	Primary Worker	Relat
1011136	CPS	Almond, Anne	Alleged Victim	040744532	15Apr06 15:42	1a	12Aug1992	NO		Winkle, Peri	Primary
1011158	SCF	Almond, Anne	Foster Child	040744532	28Apr06 00:00	1a	12Aug1992	XX		Gum, Bubba	Primary
1011178	SCF	Cacti, Baby doe M	Foster Child	020102082	18Jun06 00:00	1a	03May2006	XX		Gum, Bubba	Primary
1011269	SCF	Corn, Calvin	Foster Child	040102007	05Jun06 00:00		10Aug1993	XX		Gum, Bubba	Primary
1011271	SCF	Harris, Michael	Foster Child	040101831	13Jun06 00:00	2a	25Nov1997	XX		Gum, Bubba	Primary
1011272	SCF	Pansy, Patrick T	Foster Child	030102497	06Jul06 00:00		01Oct1989	XX		Gum, Bubba	Primary
1011207	SCF	Simmons, Ariel	Foster Child	030499033	19Jun06 00:00	4a	02May1998	XX		Gum, Bubba	Primary
1011209	SCF	Simmons,			09Jun06 00:00	2a	28Sep2001	XX		Gum, Bubba	Primary
1011210	SCF	Simmons,			09Jun06 00:00	1a	15Jun2004	XX		Gum, Bubba	Primary
1011208	SCF	Simmons,			09Jun06 00:00	3a	20May1999	XX		Gum, Bubba	Primary
1011156	SCF	Willow, W			07Mar05 00:00	1a	06Mar2005	XX		Gum, Bubba	Primary
1011155	SCF	Willow, Gli			07Mar05 00:00	1a	27Sep1999	XX		Gum, Bubba	Primary
Total Cas											
Total Ove											

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 Ariel Simmons SCF case, click the right mouse button (RMB) and select "Go to Person Health". The health windows for Ariel 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

Person Health 2303712 [ Symms, Hobbie - 076002892 ]

Person: Symms, Hobbie      Client ID: 076002892      Person ID: 2303712      Age: 2      DOB: 03Apr2007      Gender: F

Case Worker: Vic Valley      Phone Number:      Health Worker: Nurse Ratchet      Phone Number: (801) 655-4322

Summary | HSDM | Conditions | Allergy/Meds | Immunizations | History | MI706 | HC Professionals

Event	Appt Due	Appt Date	Visit Date	Comments	Source	Status
A Laboratory	08Aug09			Labs ordered at PCMC	REF	
A Dentist	08Aug09	06May09			REF	
Ages and Stages			01May09	FOSTERING HEALTHY CHILDREN, A Specialist,	HVR	Final
Dental Exam			30Apr09	RONALD ASHTON, Dentist	HVR	Final
DEC - Meth			18Apr09	SAFE AND HEALTHY FAMILIES - PCMC, Clinic	HVR	Final
Well Child/CHEC			22May08	ROB LINDSAY, Pediatrician	HVR	Final

New Health Event

Medical  
 Dental  
 Mental

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
  - 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.
- 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 Health – HSOM tab

Person Health 2303712 [ Symms, Hobbie - 076002892 ]

Person: Symms, Hobbie      Client ID: 076002892      Person ID: 2303712      Age: 2      DOB: 06Mar2007      Gender: F

Case Worker: Vic Valley      Phone Number:      Health Worker: Nurse Ratchet      Phone Number: (801) 655-4322

Summary    HSOM    Conditions    Allergy/Meds    Immunizations    History    MI706    HC Professionals

HSOM Date	HSOM Test Interval	Score	A	B	BC	C	Comments
20Jan09	8 Months	2	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
23Nov08	6 Months	5	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
20Aug08	3 Months	2	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
20May08	30 Day	6	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	

Information that would be found in the Activity log for the HSOM entry on 23Nov08.

RHCT: Talked to foster mom, Jinny, at (123) 456-7890. She reports that Hobbie is currently in the hospital at PCMC for acute appendicitis. He has been there for 3 days and is on IV antibiotics and breathing treatments. They anticipate discharge in 2 more days.

Hobbie is in therapy with Kid Friendly at the Children's Center. He goes twice a month. No regular medications. He is doing well except for current surgery. FM has home to home binder and HVRs.

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

Person Health 2303712 [ Symms, Hobbie - 076002892 ]

Person: Symms, Hobbie      Client ID: 076002892      Person ID: 2303712      Age: 2      DOB: 06Mar2007      Gender: F

Case Worker: Vic Valley      Phone Number:      Health Worker: Nurse Ratchet      Phone Number: (801) 655-4322

Summary | HSOM | Conditions | Allergy/Meds | Immunizations | History | MI706 | HC Professionals

Show All Conditions

Condition	Exam Date	D/C Date	A	C	Display	Medical Treatment	Dental Treatment	Comments	Professional Name
Healthy, no concerns	22May08	14Apr09	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>				LINDSAY, ROB
Ages and Stages Question	09Mar08	14Apr09	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>				CASH, TRACY
Surgery, see comments	23Nov08	14Apr09	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>			Appendix	LEMONS, RICHARD
Drug Exposure	22May08		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			DEC exam	LINDSAY, ROB
Caries	30Jun08		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Refer to dentist		Due to bottle?	MULITALO, KAREN
Neglect, see comments	30Jun08	30Jun08	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			environmental	MULITALO, KAREN

Referral / Follow-up	Appt Due	Appt Date	Visit Date	Comments
A Dentist	13Jul09			
A Safe and Healthy Families - DEC Exam	11Sep08		30Jun08	
A Mental Health Therapist	14May09		09Mar08	

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'
  - Acute
- 'C'
  - 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.

**Person Health 2303712 [ Symms, Hobbie - 076002892 ]**

**Person:** Symms, Hobbie      **Client ID:** 076002892      **Person ID:** 2303712      **Age:** 2      **DOB:** 06Mar2007      **Gender:** F

**Case Worker:** Vic Valley      **Phone Number:**      **Health Worker:** Nurse Ratchet      **Phone Number:** (801) 655-4322

Summary | **HSOM** | Conditions | Allergy/Meds | Immunizations | History | MI706 | HC Professionals

Show All Conditions

atment	Comments	Professional Name	Facility	Professional Specialty	Date 1st DX	HVR Status
		LINDSAY, ROB	PCMC	Pediatrician		Final
		CASH, TRACY	FAMILY SUPPORT & TREATMEN	Licensed Clinical Social Worker		Final
	Appendix	LEMONS, RICHARD	PCMC	Other Health Care Provider		Final
	DEC exam	LINDSAY, ROB	PCMC	Pediatrician		Final
	Due to bottle?	MULITALO, KAREN	SOUTH MAIN CLINIC	Nurse Practitioner		Final
	environmental	MULITALO, KAREN	SOUTH MAIN CLINIC	Nurse Practitioner		Final

Referral / Follow-up	Appt Due	Appt Date	Visit Date	Comments
A Dentist	13Jul09			
A Safe and Healthy Families - DEC Exam	11Sep08		30Jun08	
A Mental Health Therapist	14May09		09Mar08	

- 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 1<sup>st</sup> 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

Person Health 2303712 [ Symms, Hobbie - 076002892 ]

Person: Symms, Hobbie      Client ID: 076002892      Person ID: 2303712      Age: 2      DOB: 06Mar2007      Gender: F

Case Worker: Vic Valley      Phone Number:      Health Worker: Nurse Ratchet      Phone Number: (801) 655-4322

Summary | HSDM | Conditions | Allergy/Meds | Immunizations | History | MI706 | HC Professionals

Date	Allergies	Symptoms	Source of Information	Comments
23Nov08	Drug	Difficulty Breathing	Hospital	Amoxicillin
22May08	Bee Sting	Anaphylactic Reaction	Natural Parent	
22May08	Dust	Wheezing	Natural Parent	

Date	Status	Medication	Strength	Dosage	Frequency	Prescribed By	Comments
05Feb09	Current	OTC Allergy/Cold Prepar	10 mg	1/2 tab	Every Day	Dr. Lindsay	Zyrtec for allergies
03Jan09	Completed	Zithromax	100mg/5cc	1 Tsp	Every Morning	Dr. Lindsay	x 10 Days for Otitis
03Dec08	Discontinued	Albuterol/ProAir	Inhaler	2 puffs	Four Times a D:	Dr. Lindsay	
01Jun08	No prescribed med	No prescribed medicatio					
22May08	Unknown Medicati	No prescribed medicatio					

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

- Allergy area
  - Date
    - The date the information was reported to DCFS caseworker or Healthcare worker.
  - Allergies
    - Selection is made from a drop down list.
  - Symptoms
    - Selection is made from a drop down list.
  - Source of Information
    - Selection is made from a drop down list.
  - Comments
    - Text entry limited to 255 characters..
- Medication area - displays current and past medications.
  - Date
    - The date the information was reported to DCFS caseworker or Healthcare worker.
  - 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.
  - 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.
  - Strength
    - The potency the medication is dispensed as.
    - Text entry limited to 255 characters.
  - 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.
- Comments
  - Text entry limited to 255 characters.

## Person Health - Immunizations tab

**Person Health 2303712 [ Symms, Hobbie - 076002892 ]**

Person: Symms, Hobbie      Client ID: 076002892      Person ID: 2303712      Age: 2      DOB: 06Mar2007      Gender: F

Case Worker: Vic Valley      Phone Number:      Health Worker: Nurse Ratchet      Phone Number: (801) 655-4322

Summary | HSDM | Conditions | Allergy/Meds | **Immunizations** | History | MI706 | HC Professionals

Immunization Type	Given Date	Due Date	Information Source	Comments
Haemophilus Influenzae b	03Jan09		Medical Record	
Diphtheria, Tetanus, Pertussis, HepB, Poli	22May08		HVR	
Measles, Mumps, Rubella	03May08		Health Department	
Hepatitis A	03May08		Natural Parent	
Diphtheria, Tetanus, Pertussis, HepB, Poli	03May08		Health Care Provider	

- 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 [ Symms, Hobbie - 076002892 ]**

**Person:** Symms, Hobbie      **Client ID:** 076002892      **Person ID:** 2303712      **Age:** 2      **DOB:** 06Mar2007      **Gender:** F

**Case Worker:** Vic Valley      **Phone Number:**      **Health Worker:** Nurse Ratchet      **Phone Number:** (801) 655-4322

Summary | HSOM | Conditions | Allergy/Meds | Immunizations | History | MI706 | HC Professionals

Problem	Family Member	Information Source	Comments
Arthritis	Maternal Grandfather	Other Family Member	
Substance Abuse	Mother	Self Report	Opiates
Blood Disorders	Brother	DCFS Caseworker	Sickle Cell Disease
Newborn Hearing Screen	Client	Health Department	PASSED

Birth Height: 20.5 in      Pre-Natal Care: Yes

Birth Weight: 7#11oz      Birth OFC:

Birthplace: Tuscaloosa      TN

Hospital: unknown

**Special Equipment**

- C-Pap
- Nebulizer
- Pulse Oximeter

**Comments**

Tox Screen	Date	Result	Explain Abnormal
Mom	06Mar07	Abnormal	Positive for Opiates

Tox Screen	Date	Result	Explain Abnormal
Baby	06Mar07	Abnormal	postivie opiates

IQ	Instrument	Date Tested	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
  - Yes, No, Unknown
- Birth Weight
  - 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.
  - Date
    - The date the test was done.
  - Result
    - Selection is made from a drop down list.
  - Explain Abnormal

- Text entry limited to 255 characters.
- Tox Screen - Baby
  - Date
    - The date the test was done.
  - Result
    - Selection is made from a drop down list.
  - 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".
  - IQ
    - Text entry limited to 3 characters.
  - Instrument
    - Selection is made from a drop down list.
  - Date Tested
    - Date format DDMMYY
  - Comments
    - Text entry limited to 255 characters.
- Comments
  - Text entry limited to 255 characters

### Person Health – MI706 tab

Mi706 Number	Begin Date	End Date	Issue Date	Issuer	Reason	Comments
0760028921	01Jun08		30Jul08	NANCY NURSE	HMO Assignment	HEALTHY U - 0760028921
907865	22May08	22Jun08	22May08	ELISE ELIGIBILITY	No Medicaid at Removal	

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

Person Health 2303712 [ Symms, Hobbie - 076002892 ]

Person: Symms, Hobbie      Client ID: 076002892      Person ID: 2303712      Age: 2      DOB: 06Mar2007      Gender: F

Case Worker: Vic Valley      Phone Number:      Health Worker: Nurse Ratchet      Phone Number: (801) 655-4322

Summary | HSOM | Conditions | Allergy/Meds | Immunizations | History | MI706 | HC Professionals

**Current Primary Care Professionals**

Type	Professional Name	Facility	Professional Spec	Address	City	State	Zip
Medical	LINDSAY, ROB	PCMC	Pediatrician	100 N MEDICAL DR	SALT LAKE CITY	UT	84143
Dental	MULITALO, KAREN	SOUTH MAIN CLINIC	Nurse Practitioner	3536 S MAIN	SOUTH SALT LAKE	UT	84143
Mental Health	BRUNKER, DOUG	VALLEY MENTAL HEALTH	Licensed Clinical Soc	1121 E 3900 S BLDG A ST	SALT LAKE CITY	UT	84143

**Other Health Care Professionals**

Prior PCP	Status	Type	Professional Name	Facility	Professional Specialty	Address	City
<input type="checkbox"/>	Current	Medical	BRUNKER, DOUG	VALLEY MENTAL HEALTH	Licensed Clinical Social Worker	1121 E 3900 S BLS	SALT LAKE
<input checked="" type="checkbox"/>	Previous	Referra	CASH, TRACY L	FAMILY SUPPORT & TRE	Licensed Clinical Social Worker	1255 N 1200 W	OREM
<input type="checkbox"/>	Previous	Medical	LEMONS, RICHARD S	PCMC	Other Health Care Provider	100 N MEDICAL DR	SALT LAKE

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:
  - State
  - 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.

Person Health								
Person:		Client ID:		Person ID:		Age: 14	DOB: 08Jul1993	Gender: M
Case Worker		Phone Number		Health Worker		Phone Number		
Summary	HSDM	Conditions	Allergy/Meds	Immunizations	History	MI706	HC Professionals	
Current Primary Care Professionals								
Status	Last Seen	Professional Name	Org.	Facility	Address	Telephone	Speciality	
Current	01FEB08	ASHTON, DENNIS	IHC	WILLOWCREEK PEDIATRICS	150 East Center St, Provo 84606	(801) 374-701	Allergist	
Current				WASATCH MENTAL HEALT			Dermatologist	
Current		ABBINANTI, MARTIN		IHC SOUTH SANDY CLINIC			Pediatrician	
Current		BRINLEY, DERRY		DAVIS BEHAVIORAL HEAL			Family Practitio	
Current		DAVIS, BRETT		UTAH VALLEY PEDIATRICS				
Current		SHANTEAU, RICHARD		WASATCH MENTAL HEALT				
Previous		WHITEHEAD, GORDON		FAMILY DENTAL PLAN				
Previous		ASHTON, SAMUEL		WASATCH MENTAL HEALT				
Previous		LAURET, MICHAEL		UTAH VALLEY 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		User Defined Report Subtitle	
(Place Number in Box to Indicate Sort Order)			
<input type="checkbox"/>	<input checked="" type="checkbox"/> Print Considerations	<input type="text"/>	
<input type="checkbox"/>	1 Allergies Data	<p><b>Health Care Considerations</b></p> <p>This text box allows for entry of 32000 characters and will print on the Health Data Report when the "Print Considerations" box is checked.</p>	
<input type="checkbox"/>	2 Special Equipment		
<input type="checkbox"/>	3 Current Medication		
<input checked="" type="checkbox"/>	4 <input checked="" type="checkbox"/> Medication History		
<input type="checkbox"/>	5 <input type="checkbox"/> Current PCP		
<input type="checkbox"/>	6 <input type="checkbox"/> Other HCP		
<input type="checkbox"/>	7 <input type="checkbox"/> Current Health Events		
<input type="checkbox"/>	8 <input type="checkbox"/> All Health Events		
<input type="checkbox"/>	9 Upcoming Referrals		
<input type="checkbox"/>	10 <input checked="" type="checkbox"/> Completed Referrals		
<input type="checkbox"/>	11 Health Condition Data	<input checked="" type="checkbox"/> Create Activity Record	
<input type="checkbox"/>	12 Immunization Data	<input type="button" value="Print"/> <input type="button" value="Preview"/> <input type="button" value="Close"/>	
<input type="checkbox"/>	13 Family Health History Data		
<input type="checkbox"/>	14 Psycho/Social Data		
<input type="checkbox"/>	15 Birth Data		
<input type="checkbox"/>	16 Historical Information		

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

- Print option
  - 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

Forms Service

Preview

### SAFE Health Data Report

Printed: 14Apr09 11:49 Page 1 of 6

Person: Simmons, Ariel	Client ID: 030499033	Person ID: 2303550	DOB: 28Jan1995
Case Worker Bubba Gum	Phone Number (801) 333-3598	Health Worker Nurse Ratchet	Phone Number (801) 655-4322

**Health Care Considerations**

This text box allows for the entry of 32000 characters and prints on the top of the Health Data Report when the "Print Considerations" box is checked. Unless otherwise specified only current data prints on the report.

---

**Allergies Data**

Allergy	Symptoms	Source of Information	Date
Animal(s)	Itching (Urticaria)	HVR	23Apr09
<u>Comments:</u> Allergy to cats/ HVR from PCP			
None Reported		Removal Worksheet/CPS 23	26Mar09

See additional handout for the SAFE Health Data Report.

## Entering HVR information in SAFE

### Medical Event Detail - Conditions tab

**Medical Event Detail 2303712 [ Symms, Hobbie - 076002892 ]**

Person: Symms, Hobbie      Client ID: 076002892      Person ID: 2303712      Age: 2      DOB: 06Mar2007      Gender: F

Case Worker: Vic Valley      Phone Number:      Health Worker: Nurse Ratchet      Phone Number: (801) 655-4322      Date of Visit: 22May08

Event Type(s): Well Child/GHEC      Prof (L,F): LINDSAY, ROB      Received: 13Jun08      Status: Final

Facility: PCMC      Primary:       Prof Spec: Pediatrician

Conditions      Vitals / Labs      Immunizations Given / Other

Condition	Noted Date	A	C	Display	Medical Treatment
Drug Exposure		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	DEC exam
Healthy, no concerns	14Apr09	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

Referral / Follow-up	Appt Due	Appt Date	Visit Date	Comments
A Safe and Healthy Families - DEC Exam	11Sep08		30Jun08	

### Medical Event Detail window – Vitals / Labs tab

**Medical Event Detail 2303712 [ Symms, Hobbie - 076002892 ]**

Person: Symms, Hobbie      Client ID: 076002892      Person ID: 2303712      Age: 2      DOB: 06Mar2007      Gender: F

Case Worker: Vic Valley      Phone Number:      Health Worker: Nurse Ratchet      Phone Number: (801) 655-4322      Date of Visit: 22May08

Event Type(s): Well Child/GHEC      Prof (L,F): LINDSAY, ROB      Received: 13Jun08      Status: Final

Facility: PCMC      Primary:       Prof Spec: Pediatrician

Conditions      Vitals / Labs      Immunizations Given / Other

Ht: 36 in      Wt: 30 lbs      OFC:      Temp: 98.6      BP: 100/60      HR: 90      RR: 16

Lab Results: HGB: 39.6  
Urine negative

## Medial Event Detail window –Immunization/Other tab

Medical Event Detail 2303550 [ Simmons, Ariel - 030499033 ]

Person: Simmons, Ariel      Client ID: 030499033      Person ID: 2303550      Age: 8      DOB: 02May1998      Gender: F

Case Worker: Bubba Gum      Phone Number: (801) 333-3598      Health Worker: Nurse Ratchet      Phone Number: (801) 655-4322      Date of Visit:

Event Type(s):  >>>       Prof (L,F): ASHTON, DENNIS      Status: Final

Facility: WILLOW CREEK PEDIATRICS      Primary:

Prof Spec: Pediatrician

---

Conditions      Vitals / Labs      Immunizations Given / Other

Immunizations Given	Comments	At Visit
Diphtheria, Tetanus and Pertussis	Never completed full searies as a child	<input checked="" type="checkbox"/> Assistant Caseworker
Hepatitis A		<input type="checkbox"/> Caseworker
Measles, Mumps, Rubella		<input checked="" type="checkbox"/> Foster Parent
		<input type="checkbox"/> Natural Parent
		<input type="checkbox"/> On-call Worker
		<input type="checkbox"/> Residential Treatment Staff
		<input type="checkbox"/> Tracker
		<input type="checkbox"/> Transporter
		<input type="checkbox"/> 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 [ Symms, Hobbie - 076002892 ]**

Person: Symms, Hobbie      Client ID: 076002892      Person ID: 2303712      Age: 2      DOB: 06Mar2007      Gender: F

Case Worker: Vic Valley      Phone Number: (801) 655-4322      Health Worker: Nurse Ratchet      Date of Visit: 30Jun08

Event Type(s): **Dental Exam**      Prof (L,F): MULTALO, KAREN      Received: 14Apr09      Status: Final

Facility: SOUTH MAIN CLINIC      Primary:       Prof Spec: Nurse Practitioner

Conditions      Vitals / Labs      Immunizations Given / Other

Condition	Noted Date	A	C	Display	Medical Treatment	C
Caries		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Refer to dentist	Due to bottle?
Neglect, see comments	30Jun08	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		environmental

Referral / Follow-up	Appt Due	Appt Date	Visit Date	Comments
A Dentist	13Jun09			

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

**Dental Event Detail 2303550 [ Simmons, Ariel - 030499033 ]**

Person: Simmons, Ariel      Client ID: 030499033      Person ID: 2303550      Age: 8      DOB: 02May1998      Gender: F

Case Worker: Bubba Gum      Phone Number: (801) 333-3598      Health Worker: Nurse Ratchet      Phone Number: (801) 655-4322      Date of Visit: 01Mar06

Event Type(s): **Dental Exam**      Received: 17Mar06

Prof (L,F): ASHTON, RONALD      Status: Final

Facility:      Primary:

Prof Spec: Dentist

Conditions      Other

At Visit	
<input checked="" type="checkbox"/>	Assistant Caseworker
<input type="checkbox"/>	Caseworker
<input checked="" type="checkbox"/>	Foster Parent
<input checked="" type="checkbox"/>	Natural Parent
<input type="checkbox"/>	On-call Worker
<input type="checkbox"/>	Residential Treatment Staff
<input type="checkbox"/>	Tracker
<input type="checkbox"/>	Transporter
<input type="checkbox"/>	Unknown

## Mental Health Event Details window – Axis tab

**Mental Health Event Detail 2303712 [ Symms, Hobbie - 076002892 ]**

Person: Symms, Hobbie      Client ID: 076002892      Person ID: 2303712      Age: 2      DOB: 06Mar2007      Gender: F

Prof (L,F): BRUNKER, DOUG      Primary:

Event Type(s):      Location: VALLEY MENTAL HEALTH      Date of Visit: 07Jul08

Comprehensive MH Assessment >>>       Received: 14Apr09

Development Assessment >>>       HCP Spec: Licensed Clinical Social Worker      Status: Final

Axis	Comments	Treatment / IQ	Referral / Follow-up
Axis I	292.89 Opioid-Induced Sleep Disorder		
Axis II	No Diagnosis on Axis II >>>		
Axis III	Drug Exposure		
Axis IV	Other Psychosocial and Environmental Problems Neglected by parent		
Axis V	65		

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

**Mental Health Event Detail 2303712 [ Symms, Hobbie - 076002892 ]**

Person: Symms, Hobbie    Client ID: 076002892    Person ID: 2303712    Age: 2    DOB: 06Mar2007    Gender: F

Prof (L,F): BRUNKER, DOUG    Primary:

Event Type(s):  
 Comprehensive *MH* Assessment >>>   
 Development Assessment >>>

Location: VALLEY MENTAL HEALTH    Date of Visit: 07Jul08

HCP Spec: Licensed Clinical Social Worker    Received: 14Apr09    Status: Final

Axis    Comments    Treatment / IQ    Referral / Follow-up

Seen in office for evaluation of sleep difficulties. Child well adjusted to foster mom and plays well with sibling during evaluation. Was exposed to Opioids prenatal. Recommend play therapy bi-monthly.

## Mental Health Event Details window – Treatment / IQ tab

**Mental Health Event Detail 2303712 [ Symms, Hobbie - 076002892 ]**

Person: Symms, Hobbie    Client ID: 076002892    Person ID: 2303712    Age: 2    DOB: 06Mar2007    Gender: F

Prof (L,F): BRUNKER, DOUG    Primary:

Event Type(s):  
 Comprehensive *MH* Assessment >>>   
 Development Assessment >>>

Location: VALLEY MENTAL HEALTH    Date of Visit: 07Jul08

HCP Spec: Licensed Clinical Social Worker    Received: 14Apr09    Status: Final

Axis    Comments    Treatment / IQ    Referral / Follow-up

Treatment Recommended	Comments
Play Therapy	Twice monthly

IQ	Instrument	Date Tested	Comments
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## Mental Health Event Details window – Referral/Follow-up

**Mental Health Event Detail 2303712 [ Symms, Hobbie - 076002892 ]**

Person: Symms, Hobbie    Client ID: 076002892    Person ID: 2303712    Age: 2    DOB: 06Mar2007    Gender: F

Prof (L.F): BRUNKER, DOUG    Primary:

Event Type(s):  
 Comprehensive MH Assessment >>>   
 Development Assessment >>>

Location: VALLEY MENTAL HEALTH    Date of Visit: 07Jul08

Location:    Received: 14Apr09

HCP Spec: Licensed Clinical Social Worker    Status: Final

Axis	Comments	Treatment / IQ	Referral / Follow-up
<b>Referral / Follow-up</b>			
A Mental Health Therapist	>>>	14May09	09Mar08

## To Enter a Health Care Professional in SAFE

### Health Care Professional Search

Search Item	Search Type	Search Value
Last Name	Starts With	a

Records Found  
5

Buttons: Search, Clear, Select, New, Edit, Delete, Help

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

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.

Health Care Professional Details - [ New ]

Name (Last, First, MI): KeniKeni Marin

Specialty: Orthopedic Surgeon

Facility: Orthopedic Center

Address: 590 Wakara Way

Zip: 84103 City: SALT LAKE CITY State: UT

Phone: 801 587-7100 Ext:

Fax: -

Buttons: Copy, New, Save, Close

When all the information is entered select "Save".

## Proposed Enhancements

The following changes have been requested and the proposed completion date is September/October 2009.

### Person Health – MH Summary tab, Axis view

Person Health 2303550 [ Simmons, Ariel - 030499033 ]

<b>Person:</b> Simmons, Ariel		<b>Client ID:</b> 030499033	<b>Person ID:</b> 2303550	<b>Age:</b> 14	<b>DOB:</b> 11Feb1995	<b>Gender:</b> F
<b>Case Worker</b> Bubba Gum	<b>Phone Number</b> (801) 333-3598	<b>Health Worker</b> Nurse Ratchet	<b>Phone Number</b> (801) 655-4322			

Summary | MH Summary | ASQ/ASQ-SE | Conditions | Allergy/Meds | Immunizations | HSOM | History | MI706 | HC Professionals

Axis     Treatment

Axis I	Date DX	Current Dt.	Comments
309.21 Separation Anxiety Disorder	07Jul08	07Jul08	
315.9 Learning Disorder NOS			
314.01 Attention-Deficit/Hyperactivity Disorder, Combined Type			
294.9 Cognitive Disorder NOS	05Apr06	07Jul08	
311 Depressive Disorder NOS			
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			
Primary Support Group; problems with Social Environment; problems related to	05Apr06	05Apr06	lack of family structure cultural issues
Axis V GAF Score			
61	05Apr06	07Jul08	GAF (current)
35	05Apr07	07Jul08	

This view is a display only window. The Axis information displayed here is 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 – ASQ/ASQ-SE tab

SAFE 2.9.31 1014 12-17-08

File Edit View Function Module Window Help

Person Health 2303550 [ Simmons, Ariel - 030499033 ]

Person: Simmons, Ariel    Client ID: 030499033    Person ID: 2303550    Age: 14    DOB: 11Feb1995    Gender: F

Case Worker: Bubba Gum    Phone Number: (801) 333-3598    Health Worker: Nurse Ratchet    Phone Number: (801) 655-4322

Summary | MH Summary | **ASQ/ASQ-SE** | Conditions | Allergy/Meds | Immunizations | HSQM | History | MI706 | HC Professionals

Ages and Stages									Ages and Stages - Social Emotional		
Date	Months	Comm	Gross Motor	Fine Motor	Prob Solv	Pers - Soc	Ref	Months	Cuf Off Score	Child Score	Ref
22NOV06	20 months	40	30	25	30	30	<input checked="" type="checkbox"/>	18 months	50	45	<input type="checkbox"/>
15JAN07	22 months	40	30	30	40	30	<input type="checkbox"/>	24 months	50	90	<input checked="" type="checkbox"/>

Ready    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.