Intake Redesign – Changes to the Intake Screen / Tabs

Knowledge Base Article

Intake Redesign – Changes to the Intake Screen / Tabs

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Ohio | Department of Job and Family Services

Last Revised: 09/21/2016

Intake Redesign – Changes to the Intake Screen / Tabs

Overview

This article provides an overview of changes to the **Intake** screen as a result of the **Intake Redesign** that will be implemented in **SACWIS Build 3.06**.

This article also describes the new **Intake Workspace** screen for recording intake **Narrative** comments, and includes instructions for using the **Scripts & Templates** screen in the Intake Workspace.

The changes will include:

- A SACWIS-wide **Recent** button for navigating to the most **Recently Accessed** Cases, Persons, Providers, and Intakes you have viewed or accessed during the current session.

- The **Reporter** tab of the Intake screen will display first upon clicking the **Add Intake** button.

- The **Additional** tab will no longer display; its content will be moved to other tabs.

- The **OHC/Third Party Involvement** tab will be renamed as the **Specialized** tab and will focus on Specialized A/I information. The **Third Party Involvement** fields will be moved to the **Basic** tab.

- A new **ACV/AP Detail** tab will record/display ACV/AP information within the Intake and streamline the gathering of this information.

- A new **Intake Workspace** screen will assist with capturing and displaying Narrative comments. By default, the **Intake Workspace** will display on the left side of the Intake screen when viewing an Intake tab.

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"Recent" Button

A new **Recent** button will display next to the **Home** button on SACWIS screens to help users with navigation. You can click the **Recent** button to display the most **Recently Accessed** Cases, Persons, Providers, and Intakes you have viewed or accessed during the current session.

- Each item in the list is a hyperlink; click a link to access that item again.

- Click the **See More** link at the bottom of the list to display a full list of the last 50 records you have recently viewed or accessed. These items are clickable hyperlinks, and will be sorted by Person, Case, Intake, and Provider.

Note: This button will be available throughout SACWIS, not just on the Intake screen.
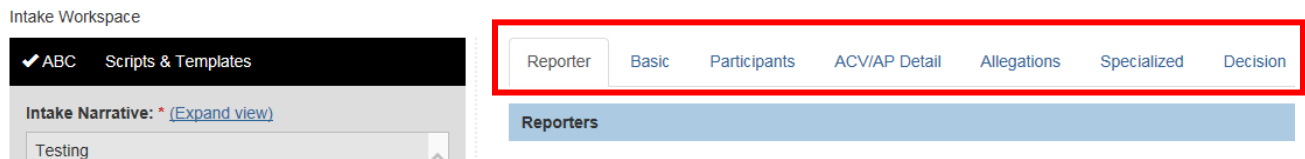
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Intake Redesign – Changes to the Intake Screen / Tabs

General Changes to Tabs / Functionality

Intake Screen Tabs

The Intake screen will divided into the following tabs (as applicable for a specific intake):

- Reporter
- Basic
- Participants
- ACV/AP Detail
- Allegations
- Specialized
- Decision

Major changes at the Tab level include:

- The **Additional** tab will no longer appear in the Intake screen. The information on the **Additional** tab will be moved to other tabs (these changes are noted under the relevant tabs later in this document).

- The **OHC/Third Party Involvement** tab will be renamed as the **Specialized** tab and will focus on Specialized A/I information. The Third Party Involvement fields will be moved to the **Basic** tab.

- A new **ACV/AP Detail** tab will record/display ACV/AP information within the Intake and streamline the gathering of this information.

Initial Tab Display

The Intake screen's **Reporter** tab (not the **Basic** tab) will display first when a Screener clicks the **Add Intake** button. This change will help with the flow of the referral call. You can select another tab, if desired.

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AutoSave Functionality

The system will automatically save the intake when you:

- Exit the intake

    OR

- Move from one Intake tab to another Intake tab or another screen. For example, if you are working in an intake and you click a Person hyperlink to look at the Person record, the system will AutoSave the intake for you.

    Note: The system may display validation messages requiring you to enter more information before it can save the record and move to another tab/screen.

The system will also AutoSave the **Intake Narrative** you enter. This is discussed later in this article.

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Header Area

The header area of the Intake screen will display additional information, including:

- **Received Date/Time** entry fields – Will display in the header for increased visibility and to aid in backdating the intake, if needed.

- **Method** entry field – Will default to **Phone** but you can select another option from the drop-down list.

- **Intake Category** field – Will display the **Intake Category** value selected on the Intake **Basic** tab. Display only.

- **Intake Types** field – Will display the **Intake Type** value(s) selected on the Intake **Basic** tab. Will display up to four Intake Type values. Display only.

- **Indicators** – The following indicator icons will display in the header area of an intake as applicable:
  - **High**, **Med**, or **Low** priority – Will display when a **Screening Priority** has been selected on the **Basic** tab, and the intake has not yet been screened.
  - **[R]** – Will display when an intake has been marked as **Restricted**.
  - **Emergency** – Will display when the Intake has been Screened and marked as an Emergency.
  - **Specialized** – Will display when **Yes** is selected for the Specialized A/I question on the Intake tab, and the Intake changes are then applied/ saved.

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- o **Hazard** – Will display when a **Participant** with an **Environmental Hazard** or **Safety Hazard** on their Person record is added to the Intake, and the Intake changes are then applied/saved.
- o **LEP** – Will display when a **Participant** is added whose Person record shows that an interpreter is needed, and the Intake changes are then applied/saved.

Footer Area

The footer in the Intake screens will be a "sticky footer". It will always be visible, so you will not have to scroll to the bottom of the screen to click the **Apply** button or **Save** button, etc.

- The **Intake Status** field will also be located in the footer area.
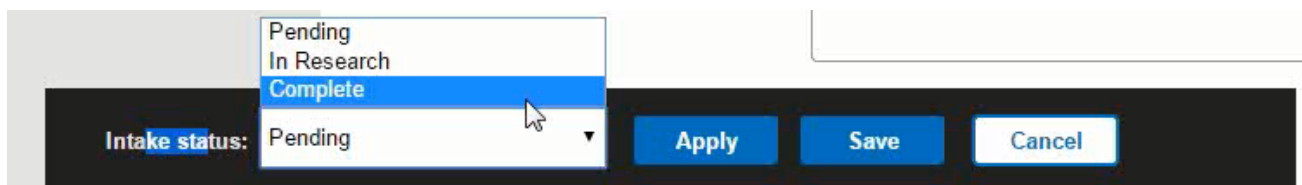
New Intake Workspace Screen

The Intake screen will display a new **Intake Workspace** for Narrative text boxes. This screen will allow users to record and view intake-related narrative and comments in multiple text fields. By default, this screen will display to the left of the Intake tabs as shown below.
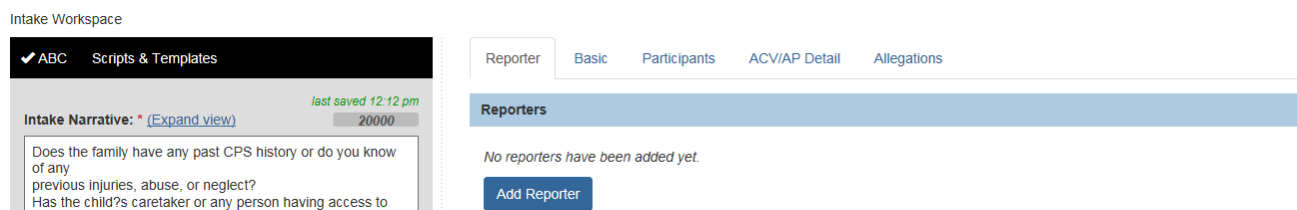
Note: Refer to the section **Using the Intake Workspace** below for information about the Narrative fields and additional features/functionality of the Intake Workspace.

Intake Redesign – Changes to the Intake Screen / Tabs

Key Changes by Intake Tab

The sections below summarize the major changes for each Intake tab.

Note: Refer to the Knowledge Base article **Recording Child Fatalities and Near Fatalities** for information regarding the Child Fatality / Near Fatality functionality mentioned under relevant tabs below.

Reporter Tab

Key changes include:

- This tab will display first (instead of the **Basic** tab) when the **Add Intake** button is clicked.
- Reporters will be displayed in a list format (instead of a grid).

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Basic Tab

Key changes include:

- New expandable section titled **Other Intake Designations** for capturing other intake designations and drug types. (Fields moved from the **Additional** tab.)

- **Information** icons (ⓘ) added to several questions to display information that will help the user determine how to answer the question.

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- A question for capturing **Child Fatality or Near Fatality** information added in build 3.05. Answering **Yes** to this question will cause additional Child Fatality / Near Fatality fields to display on certain other Intake tabs.

- A **Specialized A/I** question added to this tab; answering **Yes** will display the **Specialized** tab.

- **Third Party Involvement** fields added to this tab (moved from the current **OHC/Third Party Involvement** tab).

Does this report allege a child fatality or near fatality? ℹ	○ Not Answered ◉ No ○ Yes
Does this report require a Specialized Assessment/Investigation? ℹ	Yes ▾
Does this report require Third Party involvement due to a potential conflict of interest? ℹ	Yes ▾
Select type of Third Party:	▾

- **Law Enforcement** question simplified and added to this tab (moved from the **Additional** tab).
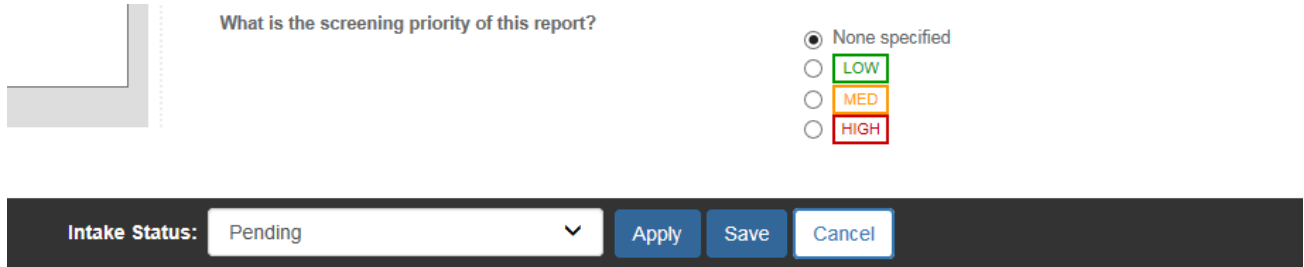
Is law enforcement involved?	Yes ▾
Identify jurisdiction and involvement:	[text area] ✔ABC 500

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- A new **Screening Priority** question will enable the Screener or SDM to indicate a **Low**, **Medium**, or **High** screening priority for the intake (optional).
    - o The selected flag will display on the **Intake Workload** screen to help with prioritizing the workload.
    - o The flag will also display in the intake header.

What is the screening priority of this report?

⦿ None specified
○ LOW
○ MED
○ HIGH

Intake Status: Pending ⌄ Apply Save Cancel

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Participants Tab

Key changes will include the following:

- Will simplify the process of adding people to the intake.

    - New **Related Persons** functionality will enable you to select Related Person(s) in the same step in which you select a Participant(s).

    - New **Participant Roles** button / functionality will allow you to assign all Participant Roles on one screen, if desired. (You can still assign roles within each Participant Details as well.)

- Will reduce double entry of Person information (in the Intake and in the Person record).

    - New **Original Participant Data / Search Criteria** section will retain information you gathered until the intake has been screened.

    - New **Reconcile** functionality will enable you to reconcile this Person information with the Person information already existing in SACWIS.

- Will display Participants in a list format (not a grid).

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- The **AP** and **ACV** roles for Participants entered after implementation of Build 3.06 will not display as hyperlinks; instead, you can refer to the **ACV/AP Detail** tab of the Intake screen.

    o For historical intakes or intakes that are in progress when Build 3.06 is deployed, the AP and ACV roles will still display as hyperlinks that will display the details screens.

- **Participant Relationships** details screen modified to make selection / display of relationships clearer.

- The **Fatality Status** field will display under each ACV / CSR participant if "Yes" was selected for the new Child Fatality / Near Fatality question on the **Basic** tab. At least one ACV/CSR will be required to have the option **Fatality** or **Near Fatality** selected in this field.

Note: Refer to the **Adding Intake Participants** Knowledge Base Article for detailed information and instructions to use this tab.

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ACV/AP Detail Tab

The new **ACV/AP Detail** tab will be required for **Child Abuse/Neglect**, **FINS – Stranger Danger**, or **Dependency** intakes.

Key features/functionality will include the following:

- Will allow you to access the relevant questions right away when recording an intake (without having to first list all of the Participants and assign Roles).

- Questions worded in a more conversational manner to help you ask the reporter for the needed information.

- The top of the screen will list ACVs recorded on the intake (if any), for reference.

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- A link will display an expando section of **Cognitive, Behavioral, and Emotional capacity questions** to aid in completing the related text field:

Describe any actions or the ability of the parent(s)/caretaker(s) to protect the child(ren): *

☐ Unknown to Referral Source

Cognitive, Behavioral, and Emotional capacity questions ⌄

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Describe any actions or the ability of the parent(s)/caretaker(s) to protect the child(ren): *

☐ Unknown to Referral Source

Cognitive, Behavioral, and Emotional capacity questions ⌃

- **Cognitive**: *Describe parent's interaction with the child. Does parent understand the child's needs? Does parent comfort the child when upset? Is age appropriate discipline used?*

- **Behavioral**: *Describe how parent cares for the child. Does the parent put the child's needs first? How does the parent keep the child safe? Is the parent's behavior different when an incident occurs?*

- **Emotional**: *Is parent willing to protect? Does parent show and reciprocate affection with the child? Do child and parent appear bonded?*

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- A link will display an expando section of **Behavioral and functioning questions** to aid in completing the related text field:

Describe the behavior and functioning of each Alleged Perpetrator/Adult Subject of Report: *

☐ Unknown to Referral Source

Behavioral and functioning questions ^

- Are behaviors violent or out of control?
- Has a credible threat of serious harm to the child(ren) been made?
- Are physical altercations escalating in the home?
- Is he/she emotionally, physically, or cognitively impaired? (cannot rationalize the behaviors of others, cannot refrain from physical aggression)
- Any physical illness or impairment?
- Any known drug or alcohol use?
- Refusing access to the child?

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Allegations Tab

Key changes will include the following:

- **Settings** and **Details** information will be combined onto one streamlined page.

- **Select Participant Address** button replaces the **View Participant Addresses** link – Will display the **Select Participant Address** screen to select a participant address.

- **Infant Positive Toxicology** question added to this tab to make it more visible. This question will now be required (moved from the **ACV Details** page).

- The historical **Allegation Description for Law Enforcement Reporting** section will only display when data exists in the Date or Time of abuse/neglect fields or related Comment field.

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- The **Pertinent to the Fatality or Near Fatality** checkbox field will display under each allegation if "Yes" was selected for the new Child Fatality / Near Fatality question on the **Basic** tab. This checkbox will allow you to check the specific allegation(s) involved and thereby also identify the specific child and alleged perpetrator involved.

Reporter	Basic	Participants	ACV/AP Detail	Allegations

Allegation Details

Add Allegation

edit **Neglect** 09/08/2016
ACV/CSR Bunny, Baby
AP/ASR Bunny, Bugs
Reported By: Anonymous (11467221) - 09/21/2016 12:41 PM
☐ Pertinent to the Fatality or Near Fatality

- Clicking a checkbox in the **Disabled Infant Allegation** section will display dynamic fields for linking in the Health Care Facility and capturing additional information:

Disabled Infant Allegation

Complete the following section for cases involving alleged withholding of appropriate nutrition, hydration, medication or medically indicated treatment from disabled infants with life threatening-conditions:

☐ Not receiving proper nutrition
☑ Not receiving proper hydration
☐ Not receiving proper medication
☐ Not receiving medically indicated treatment

Health Care Facility Name and Address:

Search Provider

Contact: [   ] Ext: [   ]

Attending Physician: [   ]

Facility Staff: [   ]

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Specialized Tab

Key changes will include:

- Renamed from **OHC/Third Party Involvement** to **Specialized**.

- **Third Party Involvement** question moved to the **Basic** tab.

- This tab will only display if the user selected "Yes" for the Specialized A/I question on the **Basic** tab.

Reporter	Basic	Participants	ACV/AP Detail	Allegations	Specialized

Out of Home Care Details

OHC Setting Type: [▼]

Search for the provider and/or facility that is indicated by this report below:

A provider has not been added yet.

[Search Provider]

Is the current behavior and functioning of the Caretaker known? [▼]

Number of children Alleged Perpetrator has access to: [   ]

Names of children Alleged Perpetrator has access to: [   ] [✔ ABC] [4000]

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- The **Search Provider** button will pull in the Provider ID and additional information if it exists on the Provider record.
    - **Licensing Authority** field may be prefilled by the system in cases where the Provider has only one Type and Licensing Authority (for example, a Foster Home).

Reporter	Basic	Participants	ACV/AP Detail	Allegations	Specialized

Out of Home Care Details

OHC Setting Type: [▾]

Search for the provider and/or facility that is indicated by this report below:

Provider ID : 15940803 [Search Provider] [Clear]

Facility Name & Address: Super Awesome Funtown Daycare
123 Play Place
Funtown, OH 12345

Contact Info: (123) 456-7890

Facility Administrator:

Licensing Authority: [▾]

- **Note**: If the intake category/type selected on the **Basic** tab is **Information and/or Referral- Licensing Rule Violation**, then the above page will display in order for the specific provider to be linked. In this event, the tab will be labeled **Provider** instead of **Specialized**.

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Decision Tab

Key changes will include:

- The Intake Workspace at left will display a **Decision Comments** narrative text field (below the **Intake Narrative** text field) for the SDM to start capturing decision comments at any point while reviewing the Intake information.

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- The **Screening Pathway** field will display when the Screening Decision for a CA/N intake is **Screened In**, for selection of the **Alternative Response** or **Traditional Response** pathway.

    o When **Traditional Response (TR)** is selected, the **Reason for not screening in AR** field displays.

- When the **Screening Decision** selected is **Screened Out**, the **Reason for screening out** field displays:

Screening decision:

Screened Out ▼

Reason for screening out:

▼

- The **Date & time of screening decision** field will no longer automatically default to the current date and time. Click the **Use Current Date/Time** button as applicable to automatically complete the field, as applicable. To record a different screening decision date/time, manually enter the date and time in the fields.

- The **Return to Screener** option will display in the **Screening Decision** field drop-down list.

Screening decision:

Return to Screener ▼

Screened In
Screened Out
Return to Screener

- Selecting the **Return to Screener** option will display a **Return Remarks** text field. Enter **Remarks** and click **Save** to return the intake to the Screener.

| Reporter | Basic | Participants | ACV/AP Detail | Decision |

Decision Details

Is this an emergency?   Response time for initiation:

▼

Screening decision:

Return to Screener ▼

Return Remarks:
Add return remarks and save to return intake to screener for consideration.

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Using the Intake Workspace Screen

This section describes the features and functionality of the new **Intake Workspace** screen for capturing / displaying Narrative comments. By default, the **Intake Workspace** will display on the left side of the Intake screen when you are viewing an Intake tab.

The **Intake Workspace** screen will contain the following text fields:

- **Intake Narrative**
- **Additional Comments about intake (internal use only)**
- **Decision Comments**
- **Post Decision Narrative Amendment**

Overview of Narrative Text Fields

Following is an overview of each Narrative field.

Intake Narrative field – Will allow the Screener to enter narrative comments during the phone call with the reporter. It will also display these narrative comments to the Screener while completing the intake tabs, and to the SDM while reviewing the intake tabs.

- The number of characters allotted for entry in the **Intake Narrative** field will be increased to **20,000 characters**. The character **Counter** will be displayed above the field.

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Intake ID: 10765831	Intake Status: *Pending*	Date/Time Created: *07/22/2016 10:19 AM*	Intake Category:	Intake Types:

Received: * `07/22/2016` 📅 `10:19` `AM ˅`   Method: * `Phone ˅`   *Screener:* / **Claimed:**

Intake Workspace

✔ ABC Scripts & Templates	Reporter	Basic	Participants	ACV/AP Detail	Allegations

Intake Narrative: * (Expand view)   `20000`

Reporters

No reporters have been added yet.

[Add Reporter]

- The **Intake Narrative** field will also have an **AutoSave** feature. Once you have begun typing your Narrative text, the system will automatically save the **Intake Narrative** every 30 seconds. When the **AutoSave** feature saves your comments, the screen will display the **Last Saved** time above the Intake Narrative field.

Intake Workspace

✔ ABC Scripts & Templates	Reporter	Basic	Participants	ACV/AP Detail	Allegations	Specialized

last saved Sep 16, 2016 10:25:46 am
Intake Narrative: * (Expand view)   `18831`

Reporters

Additional comments about intake (internal use only) field – This field will act as a "sticky note" that will allow the Screener and/or SDM to enter notes to communicate back and forth about the intake. It will display at the bottom of the Intake Workspace screen.

- The Screener and SDM will be able to see each other's notes and add to them if desired.

- This field will accept up to 500 characters of comments.

- This field will be editable until a Screening Decision is saved, then it will become view-only.

- This field will be internal – it will display only while the intake remains on the Intake Workload; the information will not stay with the intake after it is linked to the case.

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Additional Comments about intake (internal use only): `455`
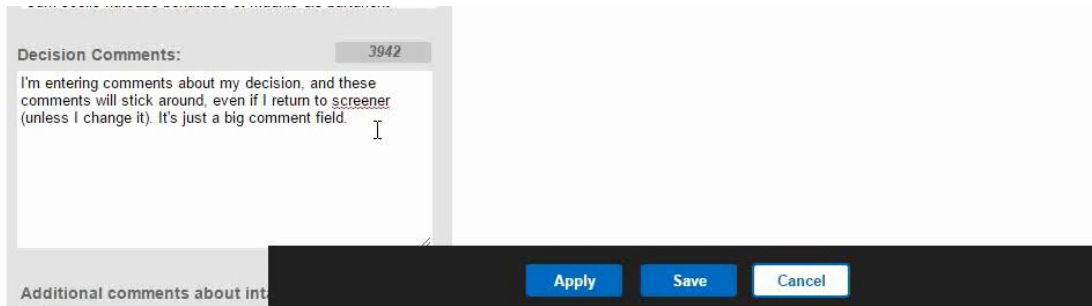
This intake could be linked to open case 1234

Intake Status: Pending ⌄ Apply Save Cancel

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Decision Comments field – This field will allow the SDM to start capturing decision-related comments at any point while reviewing an intake. It will display below the **Narrative** field when an SDM accesses a Completed intake to make a Decision.
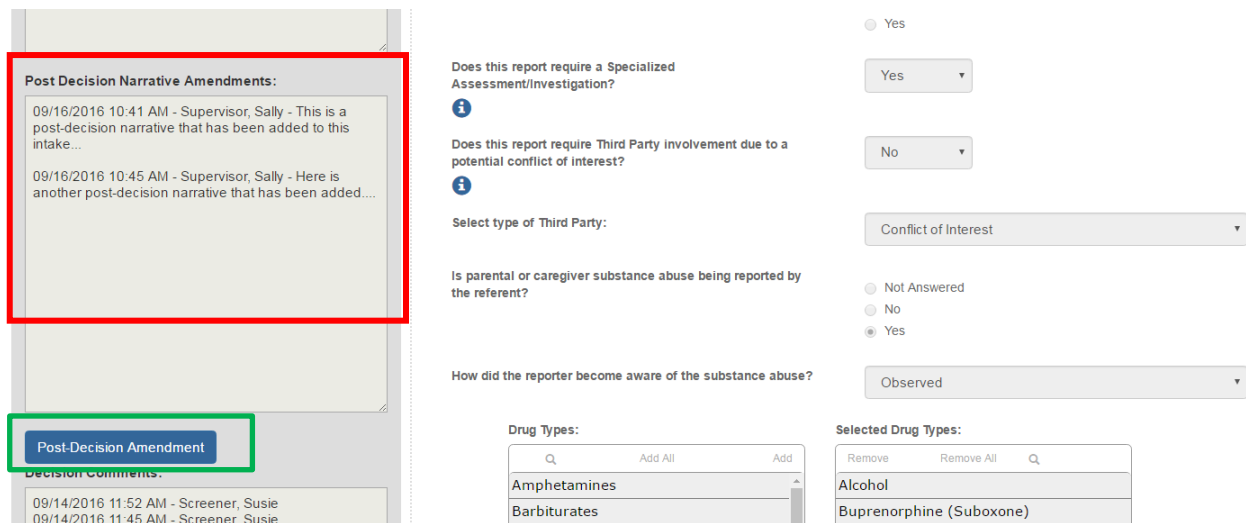
- This field will be editable until a Screening Decision is saved, then it will become view-only.

Post-Decision Narrative Amendments field – This field will display below the **Narrative** field if Post-Decision Narrative Amendments have been added to the intake.

- Post-decision comments can be added by clicking the **Post-Decision Amendment** button. This button will display below the **Narrative** field in an intake after the intake has been screened in and linked to a case.

- Each Post-Decision Narrative comment that has been entered for the intake will be displayed with the date/time created and the user who created it. The comments will be displayed in ascending order by date/time created.

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General Features of the Intake Workspace

Display

As mentioned previously, the **Intake Workspace** screen will display on the left side of the Intake screen when you are viewing an Intake tab. However, when you drill down to a **Detail** screen, the Intake Workspace will <u>not</u> display.

Relevant **Detail** screens will display a **Current Narrative** link. Click this link to display the **Narrative** text directly on the Detail screen. Click the link again to hide the Narrative.

Edit Reporter

Current Narrative
Current Narrative (saved 07/22/2016 10:40 am) ∨

Reporter Information

Current Narrative
Current Narrative (saved 07/22/2016 10:40 am) ∧
Testing testing. You can enter up to 20,000 characters of information in this field.

Edit

An **Edit** button will also display if the text is editable, so you can add or change the **Narrative** text without leaving the Detail screen:

Current Narrative (saved 07/22/2016 10:40 am) ∧

Testing testing. You can enter up to 20,000 characters of information in this field. I am editing this narrative text on the detail screen.
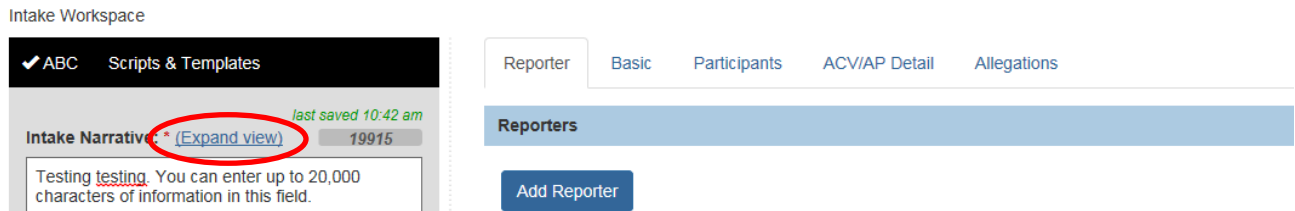
✔ ABC

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Done Editing

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Expanded View

An **Expand View** link will display above the **Intake Narrative** field. Click this link to expand the **Intake Workspace** screen to the full width of the SACWIS window.


To return to the default view, click the **Exit Full Screen** link.

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Spell Check

An **ABC** button will display in the header bar of the **Intake Workspace** screen. Click this button to access the **Spell Check** functionality. You can use this button while typing comments in any of the Narrative fields of the Intake Workspace screen.
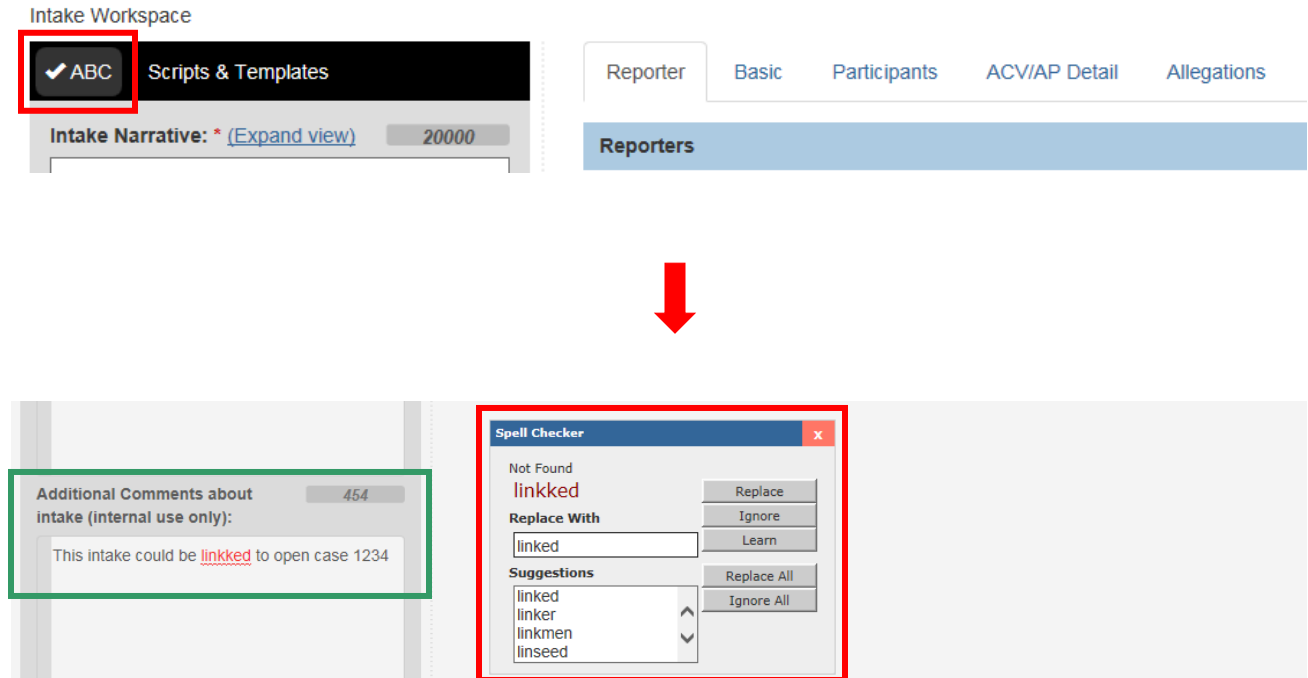

Note: Some browsers may automatically perform Spell Checking as you type.

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Scripts & Templates

A **Scripts & Templates** button will display in the header bar of the **Intake Workspace** screen. Clicking this button will display the **Scripts & Templates** screen.

- This screen allows you to access **Templates** as well as links to **Policy References**.

- The templates contain groupings of questions that you can select and **Copy** into your Narrative, if desired. Once copied into the Narrative, the questions become simple text and can be changed or deleted as desired.

- A Screener can also use the template questions as a **Script** to help structure an interview with a caller while on the phone.
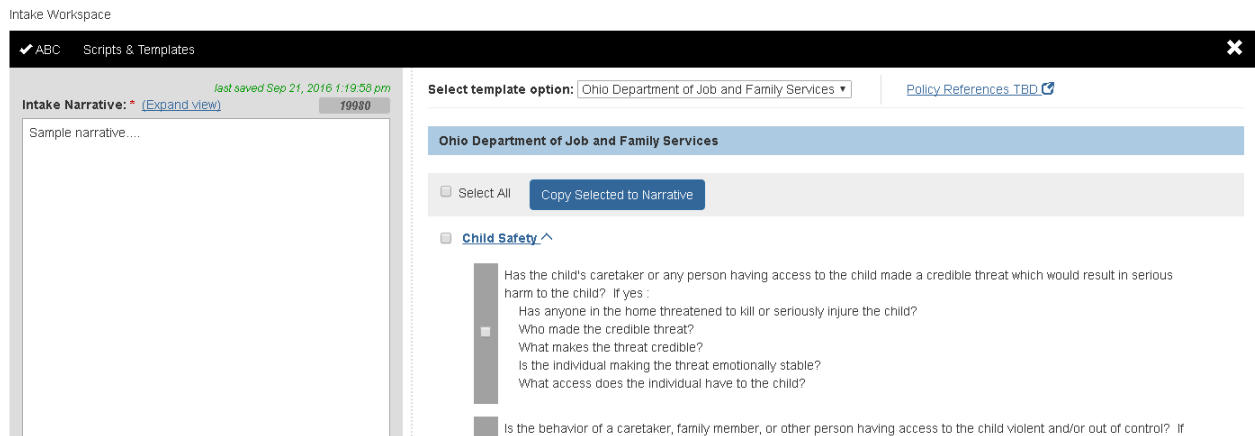
Note: Refer to the **Using the Scripts & Templates Screen** section below for instructions to use this screen.

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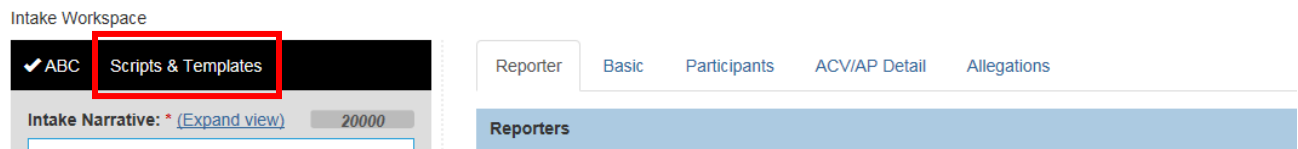# Intake Redesign – Changes to the Intake Screen / Tabs

Using the Scripts & Templates Screen

The **Scripts & Templates** screen will display a list of available **Templates** containing questions. You can either select and Copy questions into your Narrative text, or use the questions as a Script to structure your interview with the caller. This screen will also display a link to **Policy Reference** documents, including the Screening Guidelines.

Note: Initially, one ODJFS template will be available, but additional County PCSA templates may be added in the future.

Complete the following steps to select a Template and copy questions into the Narrative text.

1. In the header bar of the **Intake Workspace** screen, click the **Scripts & Templates** button.

The **Scripts & Templates** screen appears displaying the **Ohio Department of Job and Family Services** template by default.
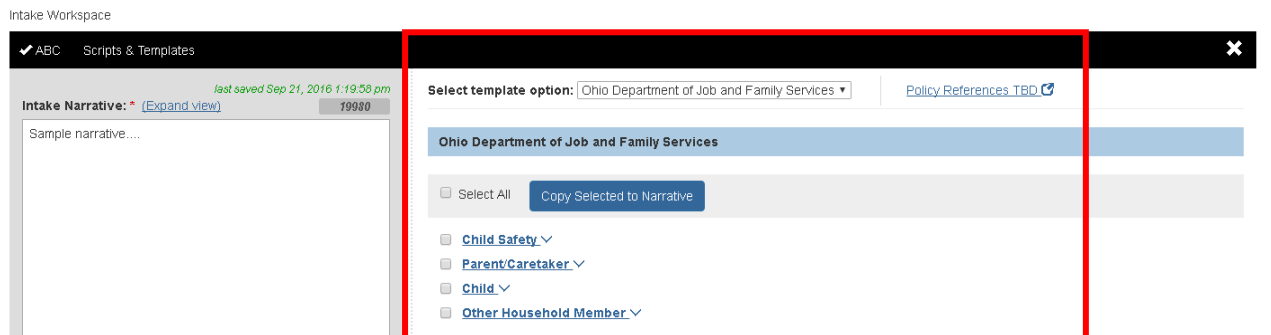
The template displays groups of questions. Each group label is a **Hyperlink** that you can click to display/hide the specific questions under it, as shown in the example below.

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☐ **Child Safety** ∧

> Has the child's caretaker or any person having access to the child made a credible threat which would result in serious harm to the child? If yes :
>> Has anyone in the home threatened to kill or seriously injure the child?
>> Who made the credible threat?
>> What makes the threat credible?
>> Is the individual making the threat emotionally stable?
>> What access does the individual have to the child?

> Is the behavior of a caretaker, family member, or other person having access to the child violent and/or out of control? If yes:
>> Are weapons used in the home to control or threaten another individual?
>> Do physical altercations occur in the home? Are the children involved? If yes to either question:
>> Are there physical altercations in which choking occurs?
>> Are physical altercations escalating in the home?
>> Does the child interfere in any physical altercations between the adults?
>> Does anyone in the home exhibit any of the following behaviors: impulsivity, physical aggression, temper outbursts, harmful reactions, bizarre and cruel punishments?

> Are there any acts of family violence that pose a serious physical and/or emotional danger to the child? If yes:
>> Do physical altercations occur in the home?
>> Are there physical altercations in which choking occurs?
>> Are physical altercations escalating in the home?
>> Does the child interfere in any physical altercations occurring between the adults?
>> Are weapons used in the home to control or threaten another individual?
>> Does anyone appear impaired emotionally, cognitively, or physically? (i.e. threaten to kill others and self, cannot rationalize behaviors of others, cannot refrain from physical aggression)

2. Click a group label hyperlink to expand that grouping and display the questions within it.

3. Follow either option below to select the desired question(s) in the group.

    a. To select **All** questions within that group: Click the checkbox next to the group label. All other checkboxes in that group will become checked as well.

☑ **Child Safety** ∧

> Has the child's caretaker or any person having access to the child made a credible threat which would result in serious harm to the child? If yes :
>> Has anyone in the home threatened to kill or seriously injure the child?
>> Who made the credible threat?
>> What makes the threat credible?
>> Is the individual making the threat emotionally stable?
>> What access does the individual have to the child?

> Is the behavior of a caretaker, family member, or other person having access to the child violent and/or out of control? If yes:
>> Are weapons used in the home to control or threaten another individual?
>> Do physical altercations occur in the home? Are the children involved? If yes to either question:
>> Are there physical altercations in which choking occurs?
>> Are physical altercations escalating in the home?
>> Does the child interfere in any physical altercations between the adults?
>> Does anyone in the home exhibit any of the following behaviors: impulsivity, physical aggression, temper outbursts, harmful reactions, bizarre and cruel punishments?

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OR

b. To select an individual question or set of questions from that group: Click the checkbox beside the desired question(s).

4. Repeat **Steps 3-4** to view and select questions from the other groups in the template.

Note: If you wish to select **All** questions in the template, click the **Select All** checkbox near the top of the screen. All checkboxes on the screen will be selected. (You may de-select individual checkboxes, if desired.)

5. When you have selected all desired questions, click the **Copy Selected to Narrative** button.

Intake Redesign – Changes to the Intake Screen / Tabs

The selected question(s) are copied into the **Intake Narrative** text. You may edit or delete them as desired.

6. To close the **Scripts & Templates** screen, click the **Close** (X) button in the **Scripts & Templates** header bar.

The Intake screen tabs display beside the **Intake Workspace**.

If you need additional information or assistance, please contact the SACWIS Help Desk.

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