

# Alcohol and Other Drug Services SmartCare Residential User Guide

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### A. Locate an Available Bed

1. Open the chart for the individual you would like to admit by clicking on the **Client Search** icon at the top of the screen, typing in the client's name and choosing them from the drop down list.

۹ \star 🏝	)
Dashboar	test
Tes	t, Test (400000660) <b>01/02/2000</b>

- 2. Levels 3.1, 3.3, and 3.5 clients should be in the system. Contact Access if you are unable to find an individual with one of those levels.
- 3. Detox 3.2 providers can create and enroll new clients and should notify AODS of the possible need to merge duplicate clients in the system by emailing <u>AODSMerges@cchealth.org</u> with name, ID#, DOB, and SSN if available.
- 4. With the client's chart open in SmartCare, access the Residential screen using one of these two methods:
  - a. Click on the magnifying glass icon at the top left of your SmartCare screen and type residential in the form search box; click on **Residential (My Office)**



b. Follow this menu path: My Office > Inpatient/Residential > Residential



5. Once you have the Residential screen open, from the All Statuses drop down list, select Open to see all available beds. Make sure that the date in the filter is today's date so that you can see all available beds as of today. Make sure the correct program is selected from the All Programs drop down list. Choose any other desired filters and click on Apply Filter.

R	esidential (2)				
	Open 🗸	01/30/2024	RESIDENTIAL TEST $\sim$	Other	✓ Apply Filter
	All Units	All Rooms 🗸	All Beds 🗸		

6. From here you can see all the available beds.

Residential (2	.)														
Open V All Units			~	01/30/2024 All Rooms	<b>₩ *</b>	~	RESIDENTIAL TEST All Beds		~ ( ~	Other		✓ Apply Filter	-		
Client Name	$\nabla$	Note	Flags		Bed	St	atus			Admitted	Discharged	Program		Room	Unit
					RES TEST 2	Op	ben	$\sim$						RES TEST 2	RESIDENTIA
					RES TEST 3	Op	ben	$\sim$						RES TEST 3	RESIDENTIA

# B. Admit to a Bed

1. Once you've identified an Open bed, in the Status column click on the **Open** drop-down list and select **Admit.** 

Residential	(3)											
All Statuses ∨ All Units			~	01/30/2024 All Rooms	<b>₩ *</b>	~	RESIDENTIAL TEST All Beds		~ 01	her		✓ Apply Filter
Client Name	$\nabla$	Note	Flags		Bed	S	tatus			Admitted	Discharged	Program
<u>Test, Test</u>					RES TEST	<u>0</u>	ccupied	~	Ŕ	01/29/2024		RESIDENTIAL TEST
					RES TEST 2	0	pen	$\sim$				
					RES TEST 3	A	dmit chedule Admission					
						<u> </u>						

- 2. Some information will be auto-populated in the **Census Management Admit** screen. Verify the following information is correct: **Admit Date** and **Time**, **Program**, **Bed**.
- 3. Enter Client Type and Admission Type.

Activity								
4000006€	<u>Test, Test</u>	DOB:	01/02/2000	Gender:	Schedule	ed Date/Time:		
Action:	Admit				🗌 Firm	🗌 Non-Billable		lold Bed
Admit Date:	01/30/2024 🛗 🕶	Time:	4:23 PM	Expected Discl	harge Date:	<b></b>	Time:	00:00
Arrival Date:	<b>□ ▼</b>	Time:	00:00	Admit Decisior	n Date:	<b>iii -</b>	Time:	00:00
				Emergency Ro	om Arrival:	<b>iii -</b>	Time:	00:00
				Emergency Ro	om	<b>iii -</b>	Time:	00:00
Program:	RESIDENTIAL TEST		~	Departure:				
Bed:	RES TEST 2		~	Bed Search	Overflow			
					Only show beds	for selected progra	m	
Unit:	RESIDENTIAL TEST				Client Type:			
Room:	RES TEST 2	_			Comments:			
Admission Type:	~	Admission	~					
		Source:						
Assignment Type:	~	Reason:	~					
Location:	Residential Substan $\backsim$	Billing Procedure:	Residential Treatm 🗸					
Clinician	×	Bhysisian						

4. When information is complete, click the Save & Close icon at the top right.



# C. Request Additional Beds or a Bed Program Change

- 1. To request additional beds or to request a bed change, send requests to the SmartCare Support Team at <a href="mailto:smartcaresupport@cchealth.org">smartcaresupport@cchealth.org</a>. The SmartCare Support Team will coordinate requested changes with the AODS QM Team.
- 2. When request is approved, the SmartCare Support Team will make the change in SmartCare.

### **D. Client Leave – Bed Holds**

1. To hold a bed while an individual is on leave from the facility, from the Residential screen find the beneficiary/corresponding bed and click the **Status** drop down that says **Occupied**.

Client Name	$\nabla$	Note	Flags	Bed	Status		Admitted	Discharged
			?	La Casa Bed 07	Occupied	×.	12/04/2023	

2. Choose On Leave from the dropdown list. Do not use Bed Change or Transfer.

	Occupied	~
	Bed Change	
	<u>Transfer</u>	
(	On Leave	
	Discharge	

3. Enter/verify Leave Start Date and click Save & Close icon at top right.

Census Mana	agement -	On Leave						
Activity								
		DOB:	02/22/1985	Gender:	Female	Initial Admit [	Date/Time: 12/0	04/2023 01:12 PM
Action:	On Leave	Leave Start Da	ite: 01/02/2024	Time:	00:00	Firm	🗌 Non-Billab	ole 🗌 Hold Bed

4. Back on the Residential screen, you will see two lines for the individual who is on leave. The first one that says Went on Leave is the original and no actions can be taken on this one while the individual is on leave. The second one is the one you will use when the individual returns from leave.

<u>Test, Test</u>	<b>s</b> ı	RHWC Bed 14	Went On Leave	~	11/30/2023
Test, Test		RHWC Bed 14	<u>On Leave</u>	~	11/30/2023

5. When the individual returns from leave, click on the **On Leave** dropdown and choose **Return from Leave**. Enter/verify return from leave data and click **Save & Close** icon at top right. If the individual doesn't return from leave and is being discharged, choose **Discharge**, enter/verify **Discharge Date**, and click **Save & Close** icon.

	<u>On Leave</u>	~
<	Return From Leave	
	Schedule Return From Leave	
	<u>Discharge</u>	

6. **On Leave, Return From Leave,** or **Discharge** are the only options you should choose from the **Status** dropdown when the bed is occupied.

### **E. Residential Services**

- 1. For each day an individual is in a residential bed, <u>complete one daily Service Note for each individual</u>.
- 2. To ensure you complete a note for each person, you can start from the Residential screen and click on the person's name to open their chart. You can also start by going directly to a **Service Note (Client)** and selecting a client.
- 3. In the magnifying glass form search box type service note and select Service Note (Client).
- 4. Complete the information in the **Service** tab. Select **Residential Daily Note** for the **Procedure** and **Residential Substance Abuse** for the **Location**.
- 5. Enter **Start Date, Start Time**, and 1 day for **Service Time**.

Service Note	Billi	ng Diagnosis Warnings					
Service							
Status					Start Date	01/09/202	24 🛗 🕶
Program		DISCOVERY HOUSE 3.3 RES DMC	$\sim$		Start Time	12:01 AM	
Procedure	0	Residential Daily Note	$\sim$	Modifier	Travel Time		Days
Location		Residential Substance Abuse	$\sim$				
Clinician		Crowder, Traci		•	Documentation Time		Days
Mode Of Delivery	Face-	to-face 🗸			Service Time	1	Days
Cancel Reason					Attending		

6. Click on the **Note** tab to complete the daily note.

7. You can add a Problem to the **Problem List** if appropriate by entering a code or description in the **Problem Details** section and selecting the problem. Click the **Insert** button when information is complete to populate it into the **Problem List** box.

1ective 02/14/2	024	Status	New			Author	Crowder, Traci	
ervice Note	Billing Diagnosis	Warnings						
eneral	_							
roblem Deta	ils							
191811	004 (Continuous chronic alc	oholism (disorder))					~	×
				- (di				2
.ode F10.20	Descriptio	in Continuous cr	fronic alconolish	n (disorder)		1		ų
Start Date: 02/1	L4/2024 🗎 🔭 End Da	te:	<b>≣ ▼</b>	Program DISCOVE	RY HOUSE : 🗸			
							Insert	Cle
Common Psych,	Medical, and SDOH Diagr	noses						
Problem List	:							
	SNOMED Description	SNC	MED CT Code	ICD 10 Code	Start Date	End Date	Program	

8. Complete the **Information** and **Care Plan** boxes to document the daily service and plan for the client.

Problems addressed during this session	Refresh
Continuous chronic alcoholism (disorder)	
Information	
Describe current service(s), how the service addressed the beneficiary's behavioral health need (e.g., symptom, condition, diagnosis, and/or risk factors).	
Care Plan	
Indicate the goals, treatment, service activities, and assistance to address the objectives of the plan and the medical, social, educational, and other services by the beneficiary. Include how the beneficiary or their representative helped to develop the goals, and the progress toward meeting the established goals. I transition plan if the individual has achieved the goals of the care plan.	s needed ndicate

9. Ensure there is a diagnosis for the service by clicking on **Billing Diagnosis** tab at the top of the note. \*If no diagnosis see step 11 below)



10. When the note is complete, click **Sign** at the top right.



11. To add a diagnosis for residential click on the **magnifying glass** icon at the top left and type diagnosis in the form search box; select **Diagnosis Document (Client).** 

Q	*	4	-	Test,
Q	diagnosi	s		
S	Diagnos	is Docur	nent (C	lient)

a. When opening the Diagnosis Document, you will see the CDAG Program Enrollment pop-up window. Click the drop down, select the appropriate residential program and click OK.



b. In the **Diagnosis Document**, enter in the diagnosis code in the **Code** field or the diagnosis name in the **Description** field. A list of matching diagnoses will populate, click to select the appropriate diagnosis.

agno	sis Do	cume	ent				
Effectiv	e 01/08/2	024		<b>≣</b> ▼ :	Status	Ne	w
Diagno	osis						
🗌 No	Diagnosis						
Diagn	osis						
•							
						-	
Code	F10.20		Description alco	ohol use	disorder	~~~	
	F10.20*	- Alcon	ol use disorder, S	evere -	714423	00	4 - Does abstain from drinking
	F10.20*	- Alcoh	ol use disorder, N	1oderate	e - 7148	29	008 - Moderate alcohol dependence
	F10.20*	- Alcoh	ol use disorder, S	evere - '	714829	00	8 - Moderate alcohol dependence
	F10.20*	- Alcoh	ol use disorder, N	loderate	e - 7148	57	001 - Does not abstain from drinking
	F10.20*	- Alcoh	ol use disorder. S	evere - '	714857	00	1 - Does not abstain from drinking
Comr	F10.20*	- Alcoh	ol use disorder, N	1oderate	e - 7200	00	2 - Alcoholism (disorder)

- c. You must document if the diagnosis is Primary, Additional, or Provisional. Click the drop-down menu in the **Type** field and select the appropriate option.
- d. If a severity level is appropriate, click the drop-down menu in the **Severity** field and select the appropriate option, mild, moderate, or severe.
- e. Click on the Insert button to populate the diagnosis into the Diagnosis List.

ffective 01/09/2024		▼ Sta	tus New			Author	Crowder, Tra	aci		
Diagnosis										
No Diagnosis										
Diagnosis										
F10.20 (Alcohol	use disorder, Mode	erate)						~	×	
Code F10.20	Description /	Alcohol use dis	order, Moderate						Q	✿
🗌 Rule Out	Туре \star	Primary		~	Specifier					
	Severity	Moderate		~	Source					
				~	Order	2		Billable	• Yes	$\bigcirc$
	Remission									
	Remission Comments									
Common Psych, Medi	Remission Comments	agnoses								
Common Psych, Medi Diagnosis List	Remission Comments ical, and SDOH Di	agnoses						Insert	CI	ear
Common Psych, Medi Diagnosis List O	Remission Comments ical, and SDOH Di rder DSM 5/ ICD 10	agnoses	R/O ICD/DSM	Descriptior SNOME	D Description Ty	/pe	Severity	Insert Source	Cl	ear ents

f. Click on the **Sign** button at the top right to sign and generate the document.

# F. Discharge

- 1. Before discharging someone from a bed, you must complete the CalOMS Discharge before the person is removed from the bed.
- 2. With the client's chart open, type CalOMS into the magnifying glass form search box and select **CalOMS Standalone Discharge/Update (Client)**. Complete the form and click Sign at the top right.

fective 02/14/2024		Status New	v	Autho	r Crowder, Tr
alOMS Information SUD, Medical & Mer	ntal Health				
alOMS Information					
lient ID	40000373				
SN		$\sim$	Transaction Type		$\sim$
dmission Date	Ē	•	Discharge Status		$\sim$
'hat is the client's gender?		~	Date of Birth	01/01/1900	<b>i</b>
'hat is the client's current first name?			What is the client's current last name?		
/hat is the clients social security number?	999999999		Zip Code at Current Residence Allowed values: 5 digit zip, 00000, XXXXX, ZZZZZ		
/hat is the client's birth first name?			What is the client's birth last name?		
'hat is the client's state of birth born within the United States?		~	What is the client's county of birth if born in California?		
or which state does the client ave a valid driver's license or state ID card?		~	What is the client's driver's license number or state ID card number? Allowed values: 13 digit ID, 99900, 99902, 99904		
			What type of disability/disabilities does the client h	ave, if any?	
/hat is the first name of the client's mother, o dividual the client considers to be their moth	r Jer?		<ul> <li>None</li> <li>Visual</li> <li>Hearing</li> <li>Speech</li> </ul>		

3. When ready to discharge an individual from a bed, click on the **Occupied** dropdown and choose **Discharge**.

Occupied	~
Bed Change	
<u>Transfer</u>	
On Leave	
Discharge	

4. Enter/verify the **Discharge Date** and click **Save & Close** icon at the top right.

Activity
4000005i         Test, Test         DOB:         01/01/2000         Gender:         Male         Initial Admit Date/Time:         11/30/2023 11:38 AM
Action: Discharge Date: 01/03/2024

- 5. Open the **Client Programs (Client)** screen by using the magnifying glass form search box.
- 6. For the program you are discharging, click on the **Discharged** link in the **Status** column.

Client Programs (2)	)		
All Programs		✓ All Statuses	
Program Name	Status	Enrolled $ abla$	Discharged
WESTCARE RICHMON	Enrolled	11/30/2023	
UJIMA LA CASA 904 M	Discharged	07/15/2023	07/16/2023

7. Click on the **Discharge Reason** dropdown, select reason for discharge and click **Save** at the top right. <u>Do</u> not use **Administrative Discharge** unless you have no ability to contact the individual.

Program Assig	nment Details		
Program Assignme	Additional Information		
General			
Program Name	UJIMA LA CASA 904 MELLUS ST 3.1 DMC PERINAT. $\sim$	Primary Current Status	Discharged 🗸
Client	Test, Test	Discharge Reason	Successful completion