

Avatar Process Improvement Meeting Agenda

9/23/2021

9:00-10:00 AM

Microsoft TEAMS Meeting Agenda

Meeting Identity and Mission: Inclusive, collaborative, **agenda driven** Continued *Process Improvement* meeting focused on new state and federal requirements, as well as improving client care and staff experience.

Opportunity to: Share both our voice and needs to impact processes & procedures, create and modify forms and workflows, develop reports and widgets

Commitment to: Bring information back to the groups we represent, gather input and test current projects to ensure they meet our needs

Meeting Website [Avatar Resources / Meetings](#)

Get Involved!

- To add agenda items, contact David.chicoine@santacruzcounty.us
- **Housekeeping items** – Please use the raise hand function or the chat box if you have questions, comments, concerns.

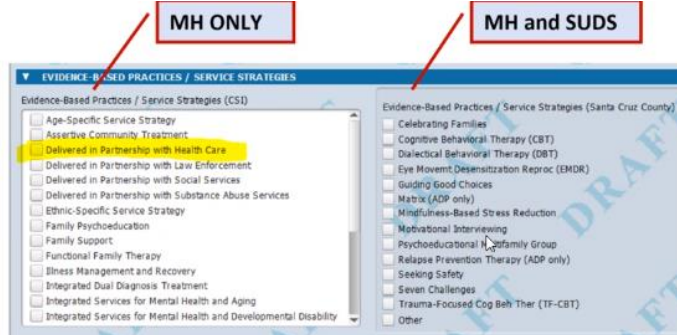
Agenda Items	Time	Comments	Staff
1. What's going on?	15	I. Co-facilitators? Can we ID some staff who might be able to do this?	Dave

2. Project Status and updates

15

Casey Swank /All

- I. DMC-ODS Pre-Admit Workgroup Report Out - Casey Swank – Group is developing 2 workflows/options with eye on what state needs for data collection as well as what will work for the various programs that would use this functionality. Developing full pre-admit episodes vs. using SRDL with some modifications to the form and new reports.
- II. Release of Information Form – Report out from Gian Wong
 - A. Next steps are identifying the workflows, finishing final details on the form, and thinking through the training needs around this new form.
 - B. You can see all of this in UAT.
<https://santacruzuat.netsmartcloud.com> Contact county IT or County QI for a UAT PW reset. You will need it if you have not been in UAT for a while.
- III. Data Cleanup Initiative Workgroup
 - A. Client Alerts Cleanup – Dave – **do we have the resources?**
 - 1. There are both clinical use alerts and administrative alerts, which are the majority and create clutter that makes it easy for a user to miss critical clinical alerts.
 - 2. We have reports and spreadsheets build with alert info to help with cleanup.
 - 3. Can alerts be specific to the form?
- IV. Use of evidence-based practices in the General Purpose Progress note to meet the state requirement of Documenting Coordination of Care –DHCS for MH requires demonstration of coordination of physical and mental health care.



- V. Coordination of Care: create a radio button for Coordinated Care (Cybele)
 - A. Discussion of possible changes to the two lists.
 - 1. FOR SUDS - Workgroup is forming to review DMC requirement/training needs/fidelity. Workgroup needs stakeholders and a start date.
 - 2. FOR MH LIST ON LEFT and SUDS Items on right, the state sets MH CSI requirements and EBP's that SUDS should use.
- VI. EBP Claire Presentation/ workgroup start date/ stakeholders. Spend some time defining what curriculums fall under each of the EBP's we say we do, if we clean up that as well. (IE: Seeking Safety would be under Trauma Informed Care for example).

OTHER ITEMS:

		<p>VII. TELECARE PHF (Robert) would be especially helpful for line staff to know if their client has been hospitalized. Episode opening/closing should be made a regular event (currently hit or miss).</p> <ol style="list-style-type: none"> 1. Cybele to look at Telecare Avatar access. 2. Gian to bring up in meeting with Netsmart and HIE to see about this being part of the external documents console. <p>VIII. Problems with printing multiple notes - Avatar used to allow printing multiple notes from the chart at the same time, but not anymore. Problematic to print only 1 at a time when you might be printing a whole chart with hundreds of notes.</p> <ol style="list-style-type: none"> A. Discussion of using Disclosure Management, but this has limitations. Difficult to use and is risky in terms of accidentally releasing sequestered SUDS info. B. For large batches of notes, the progress note viewer will print multiple notes. Other types of documents will have to be printed individually until we find a solution. <p>IX. Group Count – This is not visible in the chart view, which led to a recent state audit finding re the missing group count. Currently people need to put it in the text of the note. Nancy to investigate whether the group count can be visible in the chart view.</p> <p>X. Progress Note Aging Report: w/Client-level parameter (Michael Garcia)</p> <p>XI. I-pads cannot be used for Avatar. – Gian</p> <p>XII. New LEs (Robert): Adding Facilities (Hospitals and other outside programs) to AVATAR to allow for episode opening/closing.</p> <ol style="list-style-type: none"> 1. Adriana approves/builds the Facility / NPI billing piece. 	
3. Action Items	5	<ol style="list-style-type: none"> I. Convene New Workgroup, led by Claire Friedman (Sobriety Works) to review DMC requirement/training needs/fidelity. Workgroup needs stakeholders and a start date. II. Everyone please look at the new ROI form, the Revocation form, and the widget in UAT. If you need your UAT password reset, ask your supervisor, county IT or county QI. https://santacruzuat.netsmartcloud.com 	All
4. Parking Lot		Enrollment Process / AVATAR intake forms: Do we use it or eliminate it?	All

Next Meeting:	TBD
Attendees:	9/9/21 Attendees: David Chicoine (County QI), Nancy Mast (County QI), Kayla Gray (County Psychiatry), Michael J. Garcia (County HSA IT), Maya Jarrow (Janus), Gian Wong (County HSA IT), Lisa Gutierrez Wang (County Children's), Linda Cosio (QI PVPSA), Erica Ortiz (County BH Accounting), Casey Swank (County SUDS), Chris McCauley (County Psychiatry/Admin), Sarah Tisdale (Encompass QI), Jorge Fernandez (County HSA IT), Dagny Blaskovich (Vo Ctr), Adriana Bare (County Admin), Briana Kahoano (County SUDS), Cynthia Nollenberger (County MH)