

# **User Guide: FSP KET**

Version 1.0 [10/26/2022]

510 E. Butler Ct., Kalamazoo, MI 49007 | Phone - (877) GO-SHS-41 | Fax - (877) GO-SHS42 www.streamlinehealthcare.com

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# **User Guide: FSP KET**

#### **General Information**

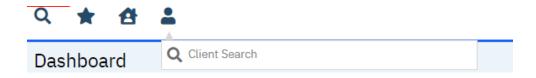
Information captured on this form is transmitted to the state of California by each County. Providers will complete the form and, if possible, data is transmitted to the county through XML format and County can transmit to the state through XML format.

The client is presented as a possible referral so Intake is completed. PAF form is completed at intake to gather the information that will be updated regularly through the KET and 3M. This document is only allowed to be completed once per Partnership enrollment for the client. If the client discharges from the program and enrolls again later, the Partnership is either re-established using a KET (when within the appropriate time frame) or a new Partnership is created by creating another PAF. The appropriate documentation workflow is validated by the system and is dependent on state defined parameters.

## Navigating to and Creating the FSP KET From the Client Search or Quick Link

You can create the document from the client tab. In order to do this, you must first search for the client or select the client from your primary list in client search drop down.

Navigate to the 'Search OR Open this Client' dropdown. Click the dropdown and select 'Client Search' or choose the client name in the drop down. If using search functionality, see below:





You will be presented with the 'Client Search' screen. On this screen you will be able to search for a client by a number of parameters.

- Broad Search Allows for the search of a client by name, partial name, sounds like.
- Narrow Search Returns for search of exact name match
- SSN Search Social Security Number search
- DOB Search Date of Birth search
- Primary Clinician Search Search by assigned primary clinician
- Authorization ID/# Search by authorization ID or number recorded in SmartCare
- Phone # Search Client phone number search
- Master Client ID Search Used in Care Management; Search by client's Master Record ID. Your organization will not use this button.
- Client ID Search
- Insured ID Search-search by insurance ID.

Upon opening the client search you will note that the only button to the bottom right that is actionable is 'Cancel.' Minimally, you must perform a one part search including first and last name, social security number, and date of birth prior to opening a client. Enter information in each of the fields you would like to use for a search parameter and click the corresponding search button for each, as shown outlined in below.



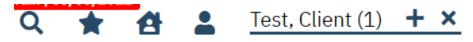
lient Search									?
01									
Clear	ch 🗌 Include (	Client Contacts	] Only I	Include Activ	e Clients (Cl	necking will not a	llow option	to create new 0	Client)
		ow Search Typ	-	ent 💽 Indiv	/idual () Or				
Last Nan			First	Name		Prog	ram		~
Other Searc	ch Strategies								
SSN	Search				Phone #	Search			]
DOB	Search		<b>i</b> •		Master Cl	lient ID Search			]
Primary	Clinician Search			~		) Search			]
Autho	rization ID / #				Insured 1	ID Search			
Records Fo	und								
ID	Master ID	Client Name	Δ	SSN/EIN	DOB	<u>Status</u>	<u>City</u>	<b>Primary</b>	Clinician
									^
				No data :	to display				
				NO UALA	to display				
4					Crea	ate New Potentia	l Client	Select	Cancel
							iry (Selecte		uiry (New Client
					_				

If the client for whom you are searching already has a record in SmartCare, you will have the ability to both select the existing record.

• Select - This will open the selected client's record

Streamline						
Healthcare Solutions						
Clear I Iame Search 🔲 Include	Client Contacts 🗌	Only Include Activ	ve Clients (Checl	king will not a	allow option	n to create new Client)
Broad Search Na	rrow Search Type	of Client 💿 Indi	vidual 🔿 Organ	ization		
Last Name		First Name		Prog	ram	~
DOB Search Primary Clinician Search Authorization ID / #	n	~	Master Client Client ID Se Insured ID S	arch		
ecords Found						
ID Master ID	Client Name	△ <u>SSN/EIN</u>	DOB	<u>Status</u>	<u>City</u>	Primary Clinician
		No data	to display			

Click the 'Select' button to open the existing client. Once the client has been opened, you will note that there is a new tab open with the client's name and ID displayed.



This is the client tab. When a client is selected, the client's name will appear on the toolbar. This is where you will be able to create a FSP KET document.

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**Create New Potential Client** 

? ×

Cancel

Select

Registration Inquiry (Selected Client) Inquiry (New Client)

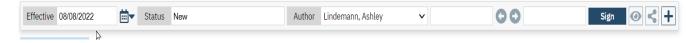


By using the magnifying glass to search for the FSP KET document you can search for the assessment or locate the assessment using a quick link.

# **FSP KET**

#### General

Under the screen name, note the information pertaining to the status of the document.



We will explore these fields more thoroughly when completing the FSP KET. However, note at this time that an effective date will be required to complete the document and it is defaulting to today's date. This default is configurable and can be changed, depending on your organization.

### Partner/Residential/Education

#### Initial

lifornia FSP KE	T - Doc				Ę	i 🖻 Goto 🚨 🛤 i	🖬 Save 🗋 🖶 💼
ffective 07/14/2022	🗮 🕶 Status In F	Progress	Author Admin, Sys	em 🗸 07/14/20	122	07/14/2022	Sign 🗿 🖍 🕇
Partner/ Residential/ E	ducation Employme	nt/ Legal Issues/ Designa	tions Emergency Interve	ntion			
nitial						_	<u>^</u>
Current FSP Program		✓ Part	nership Assessment Date	06/20/2022 🛗 🕶			
Partner County	~	KET	Completion Date	07/14/2022 🛗 🕶			
	06/02/1997	Partnership Age	25	Partnership Form Type	TAY		

**Current FSP Program Name-** This is a dropdown list of programs where the FSP ID is associated, and the client is currently and/or has been enrolled in the past. The dropdown will include the program name, enrolled date, and discharge date (if one exists). A PAF must already exist for this program/client. This Document cannot be completed unless the PAF was completed first. This should alert user that this a 3 month review/update. If this document is set up as a service note vs. standalone document AND user selected a program on the Service Details screen for the document, KET program name will be initialized from the Service details tab. This is a required selection.



**Partnership Assessment Date-** This section will populate the most recent Assessment date of the previous or most recent completed PAF date where the FSP Program selected matches the FSP Program on the PAF. This is a required selection.

**Partner County-** User is able to notate the county involved with the client. This is a searchable text box as users are able to start typing the name of the county they are searching for and a generated list will populate. If your organization only reports to one county entity, this field will not likely be visible for you based on how your administration team has configured it within SmartCare. Configuration key information is located at the bottom of this document in the Set-Up Consideration section. This is a required selection.

**KET Completion Date-** This field will initialize from the Service Details 'Start Date' field when set up as a service note. Otherwise, it will initialize as blank. User is able to select the date that they are completing the KET document.

**DOB:** This is a read-only field and cannot be edited by the user.

**Partnership Age:** This is a read-only field and cannot be edited by the user. This field will not show/be calculated until user selects 'Partnership Date.' The calculated age is the Partnership date less date of birth. For example, the client could be 15 today, but it is their birthday today and I just opened the form today, but actually saw the client yesterday, so Partnership date is yesterday's date, so the Partnership age would actually be 14.

**Partnership Form Type:** This is a read-only field and cannot be edited by the user. The read-only value will initialize. This field is dependent on the Partnership Age. If the Partnership Age is 0-15, then KET Child will show in this field. If the Partnership Age is 16-25, then the KET TAY will show in this field. If the Partnership Age is 26-59, then KET Adult will show in this field. If the Partnership Age is 60 and older, then KE Older Adult will show in this field.



#### Change in Partner Information

This section will show for all Form Types except where called out differently below.

there a change in Partnership I	nformation	? 🔿 Y	es 🔷 No Change			
Is the partner currently involved	l in:					
AB2034	O Yes	O No	🔿 No Change	Date of AB2034 Change	06/21/2022	<b>iii</b> •
Governor's Homeless Initiative (GHI)	⊖ Yes	⊖ No	<ul> <li>No Change</li> </ul>	Date of Governor's Homeless Initiative change		<b>≕ ▼</b>
MHSA Housing Program	O Yes	⊖ No	No Change	Date of MHSA Housing Program Change		<b>iii -</b>
Change in Partnership Informat	ion					
New Full Service Partnership Prog	gram ID		~	Date of New Full Service Partnership Program ID		<b>iii -</b>
New Partnership Service Coordinator ID			~	Date of New Partnership Service Coordinator ID		
Indicate New Partnership Status			~	Date of New Partnership Status Change		<b>iii -</b>
Discontinuation of FSP-and/or Co	mmunity Se	envices P	ogram (indicate the reas	son).		

#### Is there a change in Partner Information?

- User is able to select 'Yes' or 'No Change.'
- If 'Yes' is selected by a user, at least one drop-down of the 'Change in Partner Information' section is required. If 'No Change' is selected by the user, this section will be hidden.
- This is a required field.

#### Is the partner CURRENTLY involved in:

- This sub-section only shows for Form Types TAY, Adult, or Older Adult
- User is able to make a selection of 'Yes', 'No', or 'No Change.' This field is NOT required.
- If user selects 'Yes' or 'No' fields, they are required to select the Date of Change for the field. This date cannot be earlier than the previously signed PAF where the FSP Program Name is the same as Current FSP Program in this document.

#### **Change in Partner Information:**

• User is able to make a selection based on information that will appear in the drop-downs. If this sub-section is showing, user must select at least one value across the first 3 drop downs.



- Date of service boxes are conditional and will appear if field drop-downs are selected.
- Values in 'Discontinuation of FSP and/or Community Service Program (indicate the reason)' field will vary based on Form Type.

#### **Global Codes**

Field Name	Global Code Category Name
Indicate New Partnership Status	XPartnershipStatus
Discontinuation of FSP-and/or Community	XPartnershipStatus
Services Program (indicate the reason).	

#### **Residential Information- includes hospitalization and incarceration**

This subsection will show for all Partnership Form Types except where called out differently below.

Residential Information- includes hosp	italizatio	n and incarcerati	on
Are there changes to residential information?	⊖ Yes	🔿 No Change	
Date of Residential Status Change		<b></b>	
Indicate the new residential status - Child/TAY:			~

#### Is there a change in Residential Information?-

- User is able to select 'Yes' or 'No Change.'
- If 'Yes' is selected by user, other fields in this section will be populated and user is required to indicate a date of Residential Status Change. If 'No Change' is selected by user, entire section below will be hidden.
- This section will show for all ages.
- This field is a required selection.

#### Indicate the New Residential Status Child/TAY:

This subsection will show for Partnership Form Types of Child or TAY.

• User is able to select the dropdown. It is a required field.

#### Indicate the New Residential Status Adult 26 and Older:

This subsection will show for Partnership Form Types of Adult or Older Adult.



• User is able to select the dropdown. It is a required field.

#### **Global Codes**

Field Name	Global Code Category Name
Indicate the New Residential Status- Child/TAY:	XResidentialChild
Indicate the New Residential Status- Adult 26 and	XResidentialChild
Older:	

#### **Education**

Education	
Is there a change in Education Information? 🔿 Yes 💿 No C	hange Date of Grade Level Completion 🛗 🔻
Level of education completed:	~
Date of SUSPENSION INFORMATION	▼ Date of EXPULSION INFORMATION (mm-dd-yyyy):
FOR YOUTH WHO ARE NOT REQUIRED BY LAW TO ATTEND S	CHOOL:
Indicate the new educational settings	
□ Not in school of any kind. □ High School / Adult Edu	cation. 🗌 Technical / Vocational School. 🗌 Community College / 4 year College.
Graduate School. Other.	
If stopping school, did the partner complete a class and/or prog	gram? Yes No No Change
Does one of the partner's current recovery goals include any kir education at this time?	nd of Ves No

#### Is there a Change in Education Information?-

- User is able to select 'Yes' or 'No Change.'
- If 'Yes' is selected by user, other fields in this section will be show.
  - o User will then be required to update at least one field in this section.
- If 'No Change' is selected by user, the entire section below will be hidden with the exception of Recovery Goals..
- This field will show for all form types.
- This is a required selection.

#### Date of Grade Level Completion:

- User is able to select a date of grade level completion.
- This field will show for all ages.

#### Level of Education completed:



- User is able to select from the drop-down.
- Information will initialize from the client information screen to this section.
- Dropdown response options vary depending on the age of the client being assessed. Values of Pre-school to 12<sup>th</sup> grade and Level Unknown (e.g., youth in non-public school) will only show for clients 26 and younger. The value of 'No High School Diploma/No GED' will not show for ages 0-25. Bachelor's Degree, Master's Degree, and Doctoral Degree will not show for ages 0-15. GED Coursework, High School Diploma/GED, Some College/Technical or Vocational Training, Associate's Degree (e.g. AA, AS)/Techinical or Vocational Degree will show for ALL ages.

#### Date of Suspension Information:

- User is able to indicate date of suspension if applicable.
- This field will only show for Partnership Form Types of Child or TAY.

#### **Date of Expulsion Information:**

- User is able to indicate date of expulsion if applicable.
- This field will only show for Partnership Form Types of Child or TAY.

#### For Youth Who Are Not Required By Law To Attend School:

• This sub-section will only show for Partnership Form Types of TAY, Adult, or Older Adult.

#### Indicate the New Education Settings:

• User is able to select the checkbox that is applicable

#### Date of Education Setting Change:

- This field will only show for Adult and Older Adult Form Types.
- User is able to select date of Educational Setting Change.
- This field is required if user selects any checkbox in the previous field.

#### If stopping school, did the partner complete a class and/or program?

- User is able to select 'Yes', 'No', or 'No Change.'
- This is not a required field.
- This field will only show for TAY, Adult, and Older Adult form types.



#### Does the partner's current recovery goals include any kind of education at this time?

- User is able to select 'Yes' or 'No.'
- If user selects 'Yes' to the first field in this section, at least one field must be updated in Education section.
- This is a required field.
- This field will only show for Partnership Form Types of TAY, Adult or Older Adult.

#### **Global Codes**

Field Name	Global Code Category Name
Level of Education Completed:	XHighestEducation

#### **Employment/Legal Issues/Designations**

#### Employment

California FSP KET - Doc				E :
Effective 07/14/2022	Status In Progress	Author Admin, System	✔ 07/14/2022	<b>G O</b> 7/*
Partner/ Residential/ Education	Employment/ Legal Issues/ Designations	Emergency Intervention		
Employment				
Are there changes to employment s Check here if the partner is not em				

#### Is there a change in Employment Information?-

- User is able to select 'Yes' or 'No Change.'
- Is user selects 'No Change' the rest of the section will be hidden.
- If user selects 'Yes' required fields are called out below.
- This is a required field.
- This field will show for all form types.

#### Check here is the partner is not employed at this time:

- User is able to check if this is applicable.
- This is not a required field.
- This field will show for all form types.



#### **Current Employment**

Partner/ Residential/ Education Employment/ Legal Issues/ Designations Emergency Intervention

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Emp	loyment	(skin tl	hie e	ection	if there	are	0.0	handes)
cmp	toyment	(skip ti	115.2	section	ii there	arer	10 C	nangesj

Date of Employment Change	

CURRENT EMPLOYMENT					
Indicate the partner's employment status	Average Hours/Week	Hourly Wage			
Competitive Employment: Paid employment in the community in a position that is also open to individuals without a disability					
Supported Employment: Competitive Employment (see above) with ongoing on-site or off-site job-related support services provided					
Transitional Employment/Enclave: Paid jobs in the community that are 1) open only to individuals with a disability AND 2) are either time limited for the purpose of moving to a more permanent job OR are part of a group of disabled individuals who are working as a team in the midst of teams of non-disabled individuals who are performing the same work.					
Paid In-House Work (Sheltered Workshop/Work Experience/Agency-Owned Business): Paid jobs open only to program participants with a disability. A Sheltered Workshop usually offers subminimum wage work in a simulated environment. A Work Experience (Adjustment) Program within an agency provides exposure to the standard expectations and advantages of employment. An Agency-Owned Business serves oustomers outside the agency and provides realistic work experiences and can be located at the program site or in the community.					
Non-paid (Volunteer) Work Experience: Non-paid (volunteer) jobs in an agency or volunteer work in the community that provides exposure to the standard expectations of employment.					
Other Gainful/Employment Activity: Any informal employment activity that increases the child/youth's income (e.g., recycling, gardening, babysitting) OR participation in formal structured classes and/or workshops providing instruction on issues pertinent to getting a job. (Does NOT include such activities as panhandling or llegal activities such as prostitution).					

- If 'Yes' was selected from the above field, this section will show. If 'No Change' was selected from the above field, this section will be hidden.
- This section will show for all Partnership Form Types.

#### Date of Employment Change:

• User can enter a date. This is not a required field.

#### Average Hours/Week:

- At least one row is required if 'Yes' is selected to the first question in the employment section.
- Only Numeric values are allowed.
- Decimals are allowed and there is no limits to the numeric value.



#### Hourly Wage:

- This is required if, in the same row, the user indicated a value in the above field of 'Average Hours/Week.'
- Only numeric values are allowed.
- Decimals are allowed and there is no limits to the numeric value.

# Does one of the partner's current recovery goals include any kind of employment at this time?

- User is able to select 'Yes' or 'No'.
- This is a required field.

#### Legal Issues/ Designation

LEGAL ISSUES / DESIGNATIONS					
Is there a change in legal, dependency, conservatorship or payee status? O Yes O No					
Date of Parole Status Change					
Indicate new parole status	O No Change	Removed from Parole     Placed on Parole			
Date of Probation Status Change		★			
Indicate new probation status	O No Change	○ Removed from Probation ○ Placed on Probation			
Date of Conservatorship Status Change					
Indicate new conservatorship status	O No Change	○ Removed from Conservatorship ○ Placed on Conservatorship			
Date of Payee Status Change		<b>■ ▼</b>			
Indicate new payee status	O No Change	○ Removed from Payee status ○ Placed on Payee status			
Date of W & I Code 300 Status Change					
Indicate new W&I Code 300 status	O No Change	○ Removed from W&I Code 300 status ○ Placed on W&I Code 300			

#### Is there a change in legal, dependency, conservatorship or payee status?-

- User is able to make the selection of 'Yes' or 'No Change.'
- If 'No Change' is selected, hide all other fields in the section
- This will show for all Partnership Form Types.

Users are able to select the date that is applicable to the appropriate field. You are required to update at least one date field when these fields show and it will show for all ages with the



exception of 'W & I Code 300 Status' as that will only appear for Partnership Form Type of Child or TAY.

If there is a new status to the field, users are able to make the selection of 'No Change', 'Removed', or 'Placed on.' This is a required selection where user has entered a date and will show for all ages with the exception of 'W & I Code 300 Status' as that will only appear for Partnership Form Type of Child or TAY.

#### **Emergency Intervention**

Emergency Intervention						
Is this key event related to an emergency intervention? O Yes O No						
Date of Emergency Intervention						
Indicate the type of emergency intervention: (e.g., emergency room visit, crisis stabilization unit)	<ul> <li>No Answer</li> <li>Physical Health Related</li> <li>Mental Health/ Substance Use Related</li> </ul>					

Is this Key Event related to an Emergency Intervention?

- User is required to make a selection of 'Yes' or 'No.'
- If user makes the selection of 'No,' all other fields in this section will be hidden.
- This section will appear for all Partnership Form Types.

# **Completing the FSP KET**

When all information that can be gathered has been entered into the FSP PAF, a few final steps are needed to complete the FSP PAF.

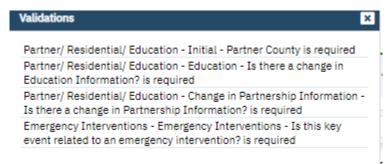
You have two options: sign or save. If there is a compelling reason not to complete and sign the document, it can be saved and returned to at a later time by clicking the save button in the toolbar.



However, keep in mind that if the document is not signed information will not initialize into the client record, where applicable. To sign the document, it is not required that you save it first. Signing will both save and sign the document. First, ensure that the document has an effective date, and then click the blue 'Sign' button.



When you click the sign button, if you have fields that are required that you did not enter data into, you will receive a validation message like the one below.



The validation message will tell you exactly where you need to go to complete the requirement. The first part of the message (e.g. FSP KET) will tell you on what tab you will find the requirement on. The second part of the message (e.g. Residential/Education) will tell you which section to find the requirement in. The third part of the message (e.g. Interventions is required) will tell you what the requirement itself is.

Once all requirements have been completed, click the sign button again (if validations occurred). You will then be presented with the signature screen. By typing in your password and clicking 'Sign' the document will be signed and applicable information initialized to the client record.



	Admin	, System is signing the Califo	rnia FSP KET	
	Admin, System	10/28/202	2 11:06 AM	
Password	O Signature Pad	O Mouse/Touchpad	O Verbally Agreed Over Phone	
Sign	Clear Cance	ł		

Once the document is signed, you should see a PDF of the document on the screen and status should change to complete.

# **Set Up Considerations**

#### **Program Details Screen**

gram Details	;					
eneral Rules	Staff	Occupancy	Reporting	Custom Fields		
lditional Inform	ation					
SP Program ID						

On the program details page, the user is able to indicate the organization's FSP Program ID for each program that is considered an FSP/MHSA Program. This is an administrative function, as it is used to send the FSP Program ID on the file based on the program selected on the 3M document.



#### **Configuration Keys**

Field Name	Configuration Key Category Name
Partner County	XSetCountyCodeForCaliforniaStateReporting

If your organization only provides services to clients within ONE county, then you should enter the County Code as defined by your state here. If nothing is entered, then on the form, user will be required to select the County every time. If something is entered here, then user will not see the field and it will prepopulate in the table for this document to be sent for reporting to the accurate county.

If your organization provides services to clients in more than one county and you report to each of those counties, then you should indicate 'None' in this key or leave it blank and users will be required to select the county each time they do the document.

The field this impacts is the 'Partner County' field below that is located on the Partner/Residential/Education tab in the Initial section.

Initial			
Current FSP Program	~	Partnership Assessment Date	
Effective Date of Assessment		Date of the most recent FSP Assessment (PAF or 3M)	
DOB: 06/20/2010	Partnership Age: 12	Partnership Form Type:	Child 3M
Partner County	~	Partnership Status	

If there are counties you do not provide services to, you can go to the DACSManagingEntity Global Code category in the Global Codes screen and deactivate any counties you do not want staff to see in the drop down. You should only do this for counties that NONE of your programs are serving. You should keep all counties that at least one program serves as active.