Magellan Healthcare of Idaho

Outcomes and Assessments System – Wraparound process and expectations for Wraparound providers

Overview

One of the primary features of Magellan's outcomes and assessments system (accessed via Availity Essentials) is the coordinated ability to complete assessments. Assessments refer to each time a member completes a questionnaire, or each time the member is assessed. The Wraparound assessment process is only used by Wraparound providers. The Wraparound COE trains and coaches on the Wraparound process. Wraparound providers use the outcomes and assessments system for Plan of Care (POC) documentation in the Wraparound process. All other providers can use the Person Centered Services Plan (PCSP) in their planning process.

The Plan of Care documents the services and supports identified as medically necessary in the child and family team meeting. All services and supports funded by the IBHP must be identified in these sections of the POC as the services request. For more information on completing a Person Centered Services Plan or Plan of Care within the outcomes and assessments system, see the Adding a Person Centered Services Plan/Plan of Care Step-by-Step Guide on the <u>Outcomes and Assessments Systems Training page</u>.

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Coach access to the wraparound Plan of Care

Locate the youth

Finding the youth in the outcomes and assessments system will depend on if a consent has already been signed for Wraparound agency access. If a consent form has been signed for access to the youth's record in the system, the Wraparound agency will appear on the youth's Profile page under the **Collaborations** header, with a start and end date.

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If you cannot find the youth's name via one of the first three search options below, use the advanced search feature and follow the <u>Adding consent</u> section further below. Note that if the youth was assessed through Liberty, the youth will have an account in the outcomes and assessments system.

There are four ways to locate a youth's name in the outcomes and assessments system:

- 1. Using the Search Bar at the top of the page.
- 2. Using the Individuals module on the left navigation ribbon.
- 3. Using the Individuals table on the Dashboard.
- 4. Using the Advanced Search feature.

Option 1: Locate the member via the Search Bar

1. From the Dashboard, type the youth's name into the **Search Bar** at the top of the page.

NOTE: The Search Bar will appear at the top of the page, regardless of the module you're viewing. You can enter the youth's entire name or just part of it. For example, if you are trying to locate "John Smith," you can type in "John Smith," "John," "Jo," "Smith," "Sm," "S,", etc.

- 2. Click the magnifying glass icon or press Enter on your keyboard.
- 3. Locate the appropriate youth within the Search Results and click the hyperlinked name to navigate to their profile.

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Option 2: Locate the youth via the Individuals module

- 1. From the Dashboard, select the **Individuals** module on the left side navigation ribbon.
- 2. Locate the appropriate youth within the Individuals list and click the hyperlinked name to navigate to the youth's profile.

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Option 3: Locate the member via the Individuals table on the Dashboard

- 1. From the Dashboard, scroll down to the Individuals section.
- 2. Locate the appropriate youth within the Individuals list and click the hyperlinked name to navigate to their profile.

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Option 4: Locate the youth via an advanced search

If you cannot find the youth via one of the three search options above, perform an advanced search to locate the youth. Upon locating the youth via the advanced search, proceed to the <u>Adding consent</u> section to obtain full access to the youth's profile.

- 1. From the Dashboard, type the youth's name into the **Search** bar at the top of the page.
- 2. Click the magnifying glass icon or press Enter on your keyboard.
- 3. The search results will display **No data found** as the youth is not yet assigned to your caseload.
- 4. Click the **Advanced search** button.
- 5. Search by first name, last name, date of birth, and Identifier Type.
 - A. Be sure the **Identifier Type** field is set to **Magellan ID.**
 - B. Add the youth's ID number in the **Identifier ID** field.
- 6. Click Search.

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0			6 Q. Search Co	ancel

- 7. The outcomes and assessments system will automatically direct you to the youth's profile.
- 8. On the youth's profile, verify that there is a phone number and/or email address within the **Contact Info** section.

NOTE: To send the consent form to the youth/guardian, there must be an email address and/or a phone number on file, *and* the Texting Permitted and/or Email Permitted box(es) must be checked.

- 9. Does the youth/guardian have a phone number and/or email address on file?
 - A. If yes, then proceed to the <u>Adding consent</u> section.
 - B. If no, then proceed to *Step 10*.
- 10. Click Edit Individual.

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11. Enter a phone number into the **Phone 1** field and/or enter an email address into the **Email** field.

NOTE: When editing the youth's profile, it is important to not edit anything other than phone number and/or email address. All other fields must remain untouched.

- 12. If a phone number appears, check the box for **Texting Permitted**.
- 13. If an email address appears, check the box for **Email Permitted**.
- 14. Click Save.

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tmai email@email.com		

15. Proceed to the <u>Adding consent</u> section.

Adding consent - youth/guardian is not present

If the youth or family is self-referred, use the consent process below. Once consent has been completed and returned, the Magellan Healthcare of Idaho Compliance team will review it. Upon review and approval, you will have access to the youth's profile in the Outcomes and Assessments System. This process may take up to 48 hours.

NOTE: If the Wraparound agency has documentation outside of the Outcomes and Assessments System, such as the Combined Behavioral Health Assessment and the CANS, and can make a determination of Wraparound need, do not interrupt the Wraparound process waiting for access to the youth's record.

The following steps apply if the youth/guardian is not present to sign the consent form with you. If the youth/guardian is present, you can refer to the Adding an Assessment Step-by-Step Guide on the <u>Outcomes and Assessments Systems Training page</u> for further steps.

- 1. From the youth's profile, click the **Assessment Templates** tab.
- 2. Click the radio button to open the Idaho Consent Form assessment.
- 3. Click the **ADD** button.

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- 4. Complete the fields of the Add New Assessment screen.
 - A. **Date** Auto populates the **current date** and can be changed if needed.
 - B. **Data Source** Select the appropriate option. In this situation, indicate either the individual or the natural support person, depending on who completes the assessment.
 - C. **Reason** Select the appropriate option.
 - D. Notes Optional and can be used to provide additional information as needed.
- 5. Click the **Invite to Complete** button. This will send a link to the youth, or their natural support (support person/family member/guardian) person's email or phone number indicated in the youth's profile.

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Assessment Templates		
	Add New Assessment	
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6. A **Thank You!** window will appear indicating that the natural support person has been sent a link to complete the consent assessment.

Assessment Templates				
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7. Once the Consent Form has been completed and returned, the Magellan Healthcare of Idaho Compliance team will review it. Upon review and approval, you will have access to the youth's profile in the outcomes and assessments system. This process may take up to 48 hours. If the Wraparound agency has documentation outside of the system such as the Combined Behavioral Health Assessment and the CANS, and can make a determination of Wraparound need, do not interrupt the Wraparound process waiting for access to the youth's record in the system.

Complete the Crisis Plan

Follow the Wraparound process for the Crisis Plan in the initial meeting. If an online connection is available, complete the Crisis Plan within the outcomes and assessments system as shown in in the steps below, and send the PDF to the family and youth. If unable to connect online, complete the Crisis Plan and leave a handwritten copy with the family and youth. Within 24 business hours, and preferably the same day, document the Crisis Plan in the outcomes and assessments system and submit it. The Crisis Plan is then available to other consented providers and a PDF of the plan is sent to Magellan Care Management. In the event of a crisis, this plan is then available.

- 1. Locate the youth via one of the search methods above.
- 2. From the youth's profile, click the Assessment Templates tab.
- 3. Select the radio button next to the Person Centered Services Plan (PCSP) assessment.
- 4. Once the assessment template opens, click the **ADD** button.

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- 5. Complete the fields of the Add New Assessment screen.
 - A. Date Auto populates to the current date and can be changed if needed.
 - B. Data Source Select Communimetric.
 - C. Reason Select Initial.
 - D. Notes Optional and can be used to provide additional information as needed.
- 6. Click Start Blank.

Profile Assessment Templates	Notifications Reports		
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1 selected / 1 total	Notes		
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- 7. Complete the **PLAN TYPE** section.
 - A. Is this a Wraparound Plan of Care? Select Yes.
 - B. Type Select Initial Crisis Plan.

AN TYPE		(100%)
Is this a Wraparound Plan of Care?	1 👻	
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8. The Crisis Plan only requires the **CRISIS PLAN** section and the **Signature** section. If you toggle the assessment view options and minimize all, the collapsed view with the categories will have the closed (non-required) sections in gray.

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CRISIS PLAN	0.00	0%
Team Summary	0.00	•
GRADUATION/TRANSITION INFORMATION	0.00	•
PLAN OF CARE INFORMATION	0.00	•
LIVING SETTING	0.00	•
MEDICAL/PHYSICAL HEALTH INFORMATION	0.00	•
CHILD AND FAMILY TEAM MEMBERS	0.00	•

9. Open the **CRISIS PLAN** section by clicking the **caret** ▶ in the header and complete as appropriate.

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+ Name*		
+ Potential Big Behaviors *	•	
+ Triggers and Warning Signs *		
Crisis Action(s)	🖉 🖈 🛛 Yes 👻	
- Crisis Action(s) Group 1 Setting	•	
Other Setting		
Other Setting Action Step		

10. Open the **Signature** section by clicking the **caret** ▶ in the header and complete as appropriate.

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Care Coordinator Name *	·		
Signature *			
Date *			
All participants have signed for acceptance and * receipt of the plan			
eccipt of the plan	• •		
Signed for acceptance			
Y(0) = Yes (0)			

- 11. Use the **(Optional) Upload Document(s)** section to attach the signature page or signed Crisis Plan.
 - A. Click the **caret** \blacktriangleright to expand the category.
 - B. Click the (+) next to the Upload a Signed Document item.
 - C. Click **Browse**.

Optional) Upload Document(s)		
 Upload a Signed Document 	•	
Signed Document		
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D. Locate the signature page document on your computer and click **Open**.

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- 12. Click Save.
- 13. Click Submit & Approve.

(Optional) Upload Document(s)				-
 Upload a Signed Document 	•			
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- 14. Once the Crisis Plan has been submitted and approved, you can locate it by clicking the **Reports** tab in the youth's profile.
- 15. Select the radio button next to the Person Centered Services Plan (PCSP) assessment.
- 16. Click Additional Report.
- 17. Click the Idaho Care Plan hyperlink.
- 18. Under the Print Sections drop-down, select Crisis Plan.
- 19. Click View report to update the view.

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5 (1) 121	РОС	Person Centered	Services Plan (PSCP)					
Story Map	Item Detail Report	Family Report	Additional Report	16				
Idaho Care Plan				-				
→ Export ∨ 4	⊴ 1 ⊳ ⊳⊳ ∑	7 Parameters						
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Name's Crisis Plan	as of 6/11/2024							

20. When the view loads, you can create a PDF by selecting File and Print.

Story Map	Item Detail Report	Family Report	Additional Report	
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Complete the Initial Plan of Care

Wraparound agencies should follow the Wraparound process as trained and coached. This will include many activities in Wraparound process documented in agency files and not in the outcomes and assessments system, such as brainstorming strategies, the entire Family Story, and working iterations prior to the Initial POC. You can save the POC to be continued later and updated at "Date Completed/Updated." We recommend building the POC such as adding the CFT members with contact information, which once entered, can be copied to the subsequent POCs and edited as needed.

The Initial Plan of Care reflects the POC signed by the family and youth and agreed upon by the team. The Initial POC should be documented in the outcomes and assessments system within five (5) business days, and preferably within one (1) business day. Upon submission and approval, this Initial POC will upload to the Magellan Care Management clinical record. Team

members in collaboration can directly access and download the Initial POC. Family, youth, and team members not in collaboration should be given the PDF or printout of the POC as preferred.

As you complete the PCSP/POC assessment in the outcomes and assessments system, note that the Wraparound terminology may differ from this combined PCSP/POC assessment. Please see the Wraparound Outcomes and Assessments Crosswalk on the <u>Outcomes and Assessments</u> <u>Systems Training page</u> (*coming soon*) and consult your supervisor or coach for additional information.

- 1. Locate the youth via one of the search methods above.
- 2. From the youth's profile, click the **Assessment Templates** tab.
- 3. Select the radio button next to the **Person Centered Services Plan (PCSP)** assessment.
- 4. Once the assessment template opens, click the **ADD** button.

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				Time Period	Month 1						
				Date	06/11/2024						
				Individual Score	0.00						

- 5. Complete the fields of the Add New Assessment screen.
 - A. Date Auto populates to the current date and can be changed if needed.
 - B. Data Source Select Communimetric.
 - C. Reason Select Initial.
 - D. Notes Optional and can be used to provide additional information as needed.
- 6. Click Copy Previous.

NOTE: Selecting **Copy Previous** will bring the initial Crisis Plan into the Initial Plan of Care. If you do not do this, you'll need to create the Crisis Plan from blank.

Profile Assessment Templates	Notifications Reports				
				+ Add As	sessment Template
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121 POC	5 Add New Assessment				C' i
1 selected / 1 total	6/11/2022 (A CommunimB Reson* CommunimB				
POC	Notes		▼ Data	Source	•
Assessment:PCSP	1			Last updat	ed: 13 minutes ag

- 7. Complete the **PLAN TYPE** section.
 - A. Is this a Wraparound Plan of Care? Select Yes.
 - B. Type Select Initial Plan.

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Type ⁴	*	B		2	•
Type	1(1) = Initial Crisis Plan (0) 2(2) = Initial Plan (0) 3(3) = Review/Update (0) 4(4) = Transition/Discharge (0)				

8. Complete all sections of the assessment in order.

NOTE: The assessment uses logic to pre-populate some of the later sections as you enter the initial information. For example, the information entered into the **Team Summary** section and the **CHILD AND FAMILY TEAM MEMBERS** section will be pre-populated into the **NEEDS AND OBJECTIVES** section, which appears later. **NEEDS AND OBJECTIVES** then populates into **ACTION STEPS**. You can enter the information in any order. However, the best practice is to enter the assessment details into the template consecutively. This should follow the timeline of the Wraparound process.



- 9. Document in the Plan of Care the services and supports identified as medically necessary in the child and family team meeting.
- 10. All services and supports funded by the IBPH are located under **IBHP Services**.
 - A. All IBHP services, regardless of authorization requirements, should be identified as the service and support request.
 - B. These supports are listed in the **Service** dropdown.
 - C. The user can begin typing in the **Search** field to pull up all listed services, and use the arrow keys to navigate to the correct service.
 - D. The first service request for a POC should be **80 Wraparound Intensive Services** (WInS).
 - E. If referencing a new service, or if the system does not feature any service that matches the request, use **Other** and specify the service in the field below.
 NOTE: Text boxes allow for inputting more characters than the viewable size. There is also a section later in the POC for **Additional Information** should additional notes be needed.

IBHP Services			0.00	0.00			<mark>(</mark> 15%
Is the youth receiving IBHP Services?*		•*		Yes 👻			
IBHP Services							
IBHP Services							
Yes(1) = Enter Information Below. (0)							
0 10(0) - (0)							
 Is the youth receiving IBHP 	Services? Group 1						
for day 1	_						
Service -	80 Wraparound	I Intensive Serv	ices (WInS) 🔻				
If Other, specify: *							
n oner, speeny.							
Status *			-				
	_						
Provider *							
	-						
MIC # #	_						
MI3 # "							
Start Date *	Date	-					
End Date *	Date						
6 b	_						
Contact Person *							
Contact Number *							
	_						
Total Units *							
Unit Type per Month *							
			•				
Ad noc needed *							
Add Is the youth receiving	IBHP Services? G	roup					
							+ Add Note

11. All services and supports funded outside of the IBHP are located under the **COMMUNITY SUPPORTS AND SERVICES** header.

S [Your Organization]	Name]			Search	٩	English[Maį 🛩	<u> </u>
COMMUNITY SUPPORTS AND SERVICES		0.00	0.00				10%
Is the youth receiving CSS services?	4	* .	Yes 👻				
CSS Information Yes(1) = Enter Information below. (0) No(0) = (0)							
 Is the youth receiving CSS 	services? Group 1						
Service *							
If Other, specify "							
Status "		•					
Provider *							
Start Date *	Date 💼						
End Date *	Date 💼						
Contact Person *							
	_						
Contact Number *							
Frequency *	_	_					
Add Is the youth receiving	CSS services? Group						
							+ Add Note
							+ Aug note

12. Be sure you have completed all required information before submitting. All required sections feature a percentage slider in the category header. The POC will not submit until you have completed all required sections.

P-CIS [Your Organization Name]			Search Q English(Mag 🗸
			+/- Categories D Form View
PLAN TYPE	0.00	0.00	100%
Ground Rules and Preferences	0.00	0.00	100%
CRISIS PLAN	0.00	0.00	100%
Team Summary	0.00	0.00	100%
GRADUATION/TRANSITION INFORMATION	0.00	0.00	33%
PLAN OF CARE INFORMATION	0.00	0.00	50%
LIVING SETTING	0.00	0.00	100%
MEDICAL/PHYSICAL HEALTH INFORMATION	0.00	0.00	17% >>
CHILD AND FAMILY TEAM MEMBERS	0.00	0.00	(100%)

13. Complete the **Signature** section.

gnature				100%
Care Coordinator Name *	Care Coordi	Care Coordi	Care Coordinator //	
Signature *	https://mag	https://mag		
Date *	Tue Jun 11	Tue Jun 11	6/11/2024 🔳	
All participants have signed for acceptance and * receipt of the plan	Y	Y	Y -	
Signed for acceptance				
Signed for acceptance V(0) = Yes (0)				
Signed for acceptance Y(0) = Yes (0) N(1) = No (0)				
Signed for acceptance Y(0) = Yes (0) N(1) = No (0)				

14. Use the **(Optional) Upload Document(s)** section to attach the signature page.

- A. Click the **caret** \blacktriangleright to expand the category.
- B. Click the (+) next to the Upload a Signed Document item.
- C. Click Browse.

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Signed Document				
Browse				
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- 15. Once done, click Save.
- 16. Click Submit & Approve.



Complete the monthly Plan of Care review

At each Plan of Care review, use the Copy Previous function and update the POC. Complete the signature, attach the signature page, and submit.

- 1. Locate the youth via one of the search methods above.
- 2. From the youth's profile, click the **Assessment Templates** tab.
- 3. Select the radio button next to the **Person Centered Services Plan (PCSP)** assessment.
- 4. Once the assessment template opens, click the **ADD** button.

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Golly Gee DOB:	5	2	_						
Profile	А	ssessment Templates	Notifications	Reports					
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0	121	POC	Person Centered Services Pla	n (PSCP)					2 1
POC Assessm	nent:PCSP				Select filters:	Collaboration Lifetime	Ŧ	Data Source	ated: a few seconds ago
Asse	essment De	tails	-	Time 1	Time 2	ADD 4			
			Status	Approved	Approved				
			Data Source	Communi	Communi				
			Days in Care	0	0				
			Time Period	Month 1	Month 1				
			Date	06/11/2024	06/11/2024				

- 5. Complete the fields of the Add New Assessment screen.
 - A. **Date** Auto populates to the **current date** and can be changed if needed.
 - B. Data Source Select Communimetric.
 - C. Reason Select Review/Re-assessment.
 - D. Notes Optional and can be used to provide additional information as needed.
- 6. Click **Copy Previous**.

Profile Assessment Templates	Notifications Reports		
			+ Add Assessment Template
ID * Instrument ÷	e ÷	Alert Schedule 🗧	End Date 🗧
121 POC	5 Add New Assessment		C 8
L selected / 1 total	Date" 6/11/2024 A Data Source" Review/Re-		
РОС	Notes	▼ Data	Source 👻
Assessment:PCSP	1		Last updated: 5 minutes ag

- 7. Complete the **PLAN TYPE** section.
 - A. Is this a Wraparound Plan of Care? Select Yes.
 - B. **Type** Select **Review/Update**.

		0.00 0.00	100%
is this a Wraparound Plan of Care? *	1	1 ¥	
Por			
1(1) = Yes (0)			
2(2) = No (0)			
\sim			
Type* B	🌡 🖈 🛛 1	2 3 -	
<u> </u>			
Type			
1(1) = Initial Crisis Plan (0)			
2(2) = Initial Plan (0)			
3(3) = Review/Update (0)			
A 14 1 10 10 1 10 10 10 10 10 10 10 10 10 10			

- 8. Update the POC as needed.
- 9. Complete the **Signature** section.

signature				100%
+ Care Coordinator Name *	Care Coordi	Care Coordi	Care Coordinator	
- Signature *	https://mag	https://mag		
- Date *	Tue Jun 11	Tue Jun 11	6/11/2024 🔳	
All participants have signed for acceptance and receipt of the plan	Y	Y	Y -	
Signed for acceptance () Y(0) = Yes (0)				
Signed for acceptance • Y(0) = Ves. (0) • N(1) = No (0)				
Signed for acceptance				+ Add Note

10. Use the **(Optional) Upload Document(s)** section to attach the signature page.

- A. Click the **caret** \blacktriangleright to expand the category.
- B. Click the (+) next to the Upload a Signed Document item.
- C. Click Browse.

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- 11. When done with the review, click **Save**.
- 12. Click Submit & Approve.

P-CIS [Your Organization Name]				Search	Q Er	nglish(Maį 🗸	4 • • • •
IBHP Services	0.00	0.00	0.00	0.00			100%
COMMUNITY SUPPORTS AND SERVICES	0.00	0.00	0.00	0.00			100%
BARRIERS	0.00	0.00	0.00	0.00			100%
YOUTH TRANSITION TO ADULTHOOD (16+)	0.00	0.00	0.00	0.00			100%
Additional Information	0.00	0.00	0.00	0.00			•
Signature	0.00	0.00	0.00	0.00			100%
(Optional) Upload Document(s)	0.00	0.00	0.00	0.00			•
						M	Submit Submit & Approve
					Delete	Cancel 1	 Save & Close Save & Continue Save

Complete a Crisis Plan update

If there is a triggering event requiring a Crisis Plan update, select the Triggering Event as the reason for the assessment and complete the fields for Event Date, Event Notes (required) and Notes (not required). Use the Copy Previous function to copy in the entire POC including the previous Crisis Plan.

- 1. Locate the youth via one of the search methods above.
- 2. From the youth's profile, click the **Assessment Templates** tab.
- 3. Select the radio button next to the **Person Centered Services Plan (PCSP)** assessment.
- 4. Once the assessment template opens, click the **ADD** button.

P-CIS [Your Organization Na	me]				Search	٩	English(Maį 🗸	.
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Profile Assessment Templates	Notifications I	Reports						
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ID + Instrument ÷	Assessment Template Name	e ¢	Remir	nder Schedule 🗧		Alert Schedule +	End Date 🗧	
121 POC	Person Centered Services Pla	n (PSCP)						2 8
1 selected / 1 total								
POC Assessment-DCSD			Select filters:	Collaboration Lifetime		•	Data Source	•
Assessment.rCsr							Last upda	ated: a few seconds ago
Assessment Details		Time 1	Time 2	Time 3	ADD	4		
	Status	Approved	Approved	Approved				
	Data Source	Communi	Communi	Communi				
	Days in Care	0	0	0				
	Time Period	Month 1	Month 1	Month 1				
-	Date	06/11/2024	06/11/2024	06/11/2024				

- 5. Complete the fields of the Add New Assessment screen.
 - A. Date Auto populates to the current date and can be changed if needed.
 - B. Data Source Select Communimetric.
 - C. Reason Select Triggering Event.
 - D. Event Date Select the appropriate date.
 - E. Event Notes Provide details about the Triggering Event.
 - F. **Notes** Optional and can be used to provide additional information as needed.
- 6. Click Copy Previous.

NOTE: This will copy the entire POC, including the previous Crisis Plan.

5 Add New Assessment	+ Add Assessment Template
6/11/2024 A Communim. B Rescon " Triggering EC	Alert Schedule C End Date C
	C ² 8
Event Date *	
Event Notes *	✓ Data Source ✓
	Last updated: 2 minutes ag
Notes F	
Event Notes*	Data Source Last updated: 2 min

7. Edit the **CRISIS PLAN** category as needed.

CRISIS PLAN	0.00	0.00	0.00	0.00	100%
+ Date Completed/Updated	06/11/2024	06/11/2024	06/11/2024	6/11/2024 🔳	
+ Name*	Name	Name	Name	Name	
+ Potential Big Behaviors *	Big behavio	Big behavio	Big behavio	Big behaviors	
+ Triggers and Warning Signs *	Triggers an	Triggers an	Triggers an	Triggers and warning signs //	Triggers and warning signs
🕂 Crisis Action(s)	Yes	Yes	Yes	Yes 👻	

8. Complete the Signature category.

Signature	0.00	0.00	0.00	0.00	(100%) 🗸
+ Care Coordinator Name *	Care Coordi	Care Coordi	Care Coordi	Care Coordinator //	
+ Signature *	https://mag	https://mag	https://mag		
+ Date*	Tue Jun 11	Tue Jun 11	Tue Jun 11	6/11/2024 🔳	
All participants have signed for acceptance and receipt of the plan	Y	Y	Y	Y 👻	
Signed for acceptance					
Y(0) = Yes (0)					
N(1) = No (0)					
					+ Add Note

9. Use the **(Optional) Upload Document(s)** section to upload additional signature documents.

NOTE: Do not use the upload documents section for any documents needed for other processes related to the event, such as incident reports or service requests.

- A. Click the **caret** \blacktriangleright to expand the category.
- B. Click the (+) next to the Upload a Signed Document item.
- C. Click Browse.

Optional) Upload Document(s)				
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			\odot	9/2/2022 4:17 PM	Microsoft Word D	15 KB	
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- 10. When done with the update, click **Save**.
- 11. Click Submit & Approve.



Complete the Transition Plan of Care

Follow the wraparound process in training and coaching to start the Transition Plan of Care for formal Wraparound graduation. For the Add New Assessment, select Discharge and Copy Previous to update the POC.

- 1. Locate the youth via one of the search methods above.
- 2. From the youth's profile, click the Assessment Templates tab.
- 3. Select the radio button next to the Person Centered Services Plan (PCSP) assessment.
- 4. Once the assessment template opens, click the **ADD** button.

P-CIS [Your Organization Na	ame]				Search	۵	English(Maį 🗸	4 •
Golly Gee 2								
Profile Assessment Templates	Notifications I	Reports						
							+ Add	Assessment Template
ID + Instrument ÷	Assessment Template Name	e ¢	Remi	nder Schedule 🗧		Alert Schedule 🗧	End Date 🗧	
121 POC	Person Centered Services Pla	n (PSCP)						C 🖻
Assessment:PCSP			Select fitters.	Lifetime	_		Last updat	ed: a few seconds ago
Assessment Details	-	Time 1	Time 2	Time 3	ADD	4		
	Status	Approved	Approved	Approved				
	Data Source	Communi	Communi	Communi				
	Days in Care	0	0	0				
	Time Period	Month 1	Month 1	Month 1				
	Date	06/11/2024	06/11/2024	06/11/2024				
	Individual Score	0.00	0.00	0.00				

- 5. Complete the fields of the Add New Assessment screen.
 - A. **Date** Auto populates to the **current date** and can be changed if needed.
 - B. Data Source Select Communimetric.
 - C. Reason Select Discharge.
 - D. Notes Optional and can be used to provide additional information as needed.
- 6. Click **Copy Previous**.

Profile Assessment Templates	Notifications Reports		
		+ Add Assessm	ent Templ
ID * Instrument ÷		e Alert Schedule End Date	
121 POC	5 Add New Assessment		C' ó
1 selected / 1 total	Date" 6/11/2022 A Communim B Reason" C Discharge		
POC	Notes	← Data Source	
Assessment:PCSP	//	Last updated:	7 minuto

- 7. Complete the **PLAN TYPE** section.
 - A. Is this a Wraparound Plan of Care? Select Yes.
 - B. Type Select Transition/Discharge.

						100%
Is this a Wraparound Plan of Care? * 🛛 🗛		1	1	1	1 -	
POC						
() 1(1) = Yes (0)						
2(2) = No (0)						
Туре*	* *	1	2	3	4 👻	
Type*	*	1	2	3	4 👻	
Type *	*	1	2	3	4 -	
Type * B	\$ \$	1	2	3	4 -	
Type * B Type 1(3) = Initial Crisis Plan (0) 2(2) = Initial Plan (0)	**	1	2	3	4 -	
Type B Type 1(1) = Initial Crisis Plan (0) 2(2) = Initial Plan (0) 3(3) = Review/Update (0)	* ₽	1	2	3	4 🔻	

8. As the **GRADUATION/TRANSITION INFORMATION** category gets updated with each POC, this activity will fulfill with a more detailed Graduation/Transition Plan.

GRADUATION/TRANSITION INFORMATION	0.00	0.00	0.00	0.00
+ Projected Wraparound Graduation/Transition Date *		06/11/	06/11/	6/11/2024 🔳
🕂 Graduation Readiness Rating of Team *		6	6	6 👻
+ Graduation/Transition Plan *		grad plan	grad plan	grad plan

9. As the **YOUTH TRANSITION TO ADULTHOOD (16+)** category gets updated with each POC, this activity will fulfill with more details as well.

YOUTH TRANSITION TO ADULTHOOD (16+)	0.00	0.00	0.00	0.00	100%
+ Is the youth over 16 years old or older?	-	No	No	No 👻	
+ What are youth's transition to adulthood needs? *		None	None	None	
∓ Has youth been linked to any adult services? * 🛛 🤚 🖈		No	No	No 👻	
⊕ Barriers and Possible Solutions *		barrier	barrier	barriers and possible	

10. Complete the **Signature** category.

Signature					100%
🕂 Care Coordinator Name *	Care Coordi	Care Coordi	Care Coordi	Care Coordinator //	
⊧ Signature [*]	https://mag	https://mag	https://mag		
Date *	Tue Jun 11	Tue Jun 11	Tue Jun 11	6/11/2024 🛄	
All participants have signed for acceptance and * receipt of the plan	Y	Y	Y	Y -	
Signed for acceptance					
 Y(0) = Yes (0) N(1) = No (0) 					
<u> </u>					
					+ Add Note

11. Use the **(Optional) Upload Document(s)** section to attach the signature page.

- A. Click the **caret** \blacktriangleright to expand the category.
- B. Click the (+) next to the Upload a Signed Document item.
- C. Click Browse.

(Optional) Upload Document(s)				
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D. Locate the signature page document on your computer and click **Open**.

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			\odot	10/14/2022 12:55 PM	Microsoft Word D	15 KB	
			\odot	9/2/2022 4:17 PM	Microsoft Word D	15 KB	
			\odot	4/5/2024 4:50 PM	Adobe Acrobat D	82 KB	
			\odot	4/5/2024 4:49 PM	Microsoft Word D	15 KB	
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			\odot	9/5/2022 2:31 PM	Microsoft Word D	15 KB	
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- 12. When done with the update, click **Save**.
- 13. Click Submit & Approve.



Coach access to the wraparound Plan of Care

This process is in development and more information will be provided when available.

Quality Check History

Review Phase	Reviewer	Review Date		
ISD Review	Britta Burdett	6/7/2024		
Advisory SME Review Tori Creech		6/11/2024		
Operational SME Review Barbara Dunn		6/11/2024		