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ARIES Workflow Summary

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In the last month Architier met with service providers in San Diego, San Bernardino/Riverside, Dallas, and Houston to discuss their business processes or flow of work. If ARIES is to become the primary information system for service providers, then it has to support them in effectively and efficiently working with clients. The goal of these meetings was to explicitly define the step-by-step process in arranging client appointments, handling phone calls, conducting intake meetings, generating reports, and managing contracts.

Fortunately, the meetings showed there were more similarities than differences in client workflows for these diverse service providers. This document discusses the similarities, differences, and how ARIES will support agencies in providing client services.

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Client with Case Management Appointment

This workflow represents the delivery of in-person case management services, including the first part of client intake. Agencies may or may not have receptionists and they may or may not follow up with clients that miss appointments. If they don't have receptionists, then the case manager would use the lookup screens. If they don't follow up on missed appointments, then these follow-ups will not be added to the client to-do or task list.

Note this workflow (and all the others) encourages an interactive approach with the case manager looking up and reviewing the electronic case file while the client is present. Some agencies currently prefer to defer data entry or hand it off to another person. While ARIES will support this approach, it won't be the optimal use of the system—it makes it much more difficult to review client history, remind clients of upcoming appointments, use the client to-do list, etc.

Drop-in Client or Provision of Ancillary Services

The process for working with drop-in clients is very similar to the provision of ancillary services. If it is a repeat client, a simple agency search brings up the record. The service provider may review eligibility, then provide the service, and finally record the units of service. If the agency does provide case management, then the workflow continues with the reminders of appointments, the client to-do list, etc.

Client Intake

There are five clearly identified steps in the process for getting a client connected with services. These may all be done in one session with one case manager, or with several different individuals in several sessions.

- **Scheduling** an appointment involves minimal demographic information (rarely enough to create the URN). Agencies may enter an individual's name, date of birth, social security number, telephone number, county of residence, type of insurance coverage, if the individual has an HIV Letter of Diagnosis, if the individual has identification, if it is OK to call the client, and whether the agency should stay anonymous in the call. ARIES will accommodate the collection of all of this information. Some agencies may choose to use only a few of these fields while other agencies may choose to use all of the fields.
- **Registration** is the point at which Eligibility Documents are collected from the client and basic demographic information is gathered. This includes the information needed to create the URN. ARIES will support both rapid data entry by a registration person who sits at the front desk in a large medical facility, as well as the mouse, hunt, and peck data entry of a case manager in a smaller agency who is new to computers.

- **Intake** is the point at which a client provides answers to all of the HRSA required fields. The same individual generally completes Registration and Intake during the client's first appointment. A decision still needs to be made by the Partners about the different security levels in ARIES. Once this decision is made, the Intake function may then be divided into multiple functions. For example, one level user may be able to enter basic HRSA information into ARIES but not Case Management or Medical level information. Another level user may be able to enter the basic HRSA information and Case Management level information into ARIES but not Medical level information. A third level user may be able to enter all of the HRSA required information into ARIES, including the basic HRSA information, Case Management level information and Medical level information.

- **Assessment** – Social Workers or Clinicians perform psychosocial client assessment to gather baseline information about a client. It is recorded in narrative form. The Assessment consists of the client's Presenting Problem/Need, a basic Medical history, a Financial overview and assessment, a Housing history, an Education and Work history, a Family and Social Support history, a Legal history, a Mental Health history, a Substance Use history, and finally the clinicians Impression of the client.

  The Partners will need to make a decision regarding how the narrative information will be collected and which of the information will be shared among the users of the ARIES system. Three ideas from the visits to the Partners are:

  1. The first idea was to have a blank narrative screen in which the user would type the information. Next to the narrative screen, there would be a checkbox labeled "Private." If the user checked the box, the note that was entered would not be shared among agencies and would remain private to the agency that entered it.
  2. A second, more flexible approach is to have two blank narrative boxes. The top box would be for the entry of the notes that could be shared among agencies. The bottom box would be for the entry of the notes that stay private to that agency.
  3. Finally, the third idea is to break down the narratives into categories, similar to those categories mentioned above (Medical, Financial, Housing, etc.). The security designed into the narrative function of the ARIES system would automatically determine which notes or which parts of notes were shared and which notes were kept private to the agency that entered them. For example, a Financial note may be viewable to all agencies while a Mental Health or Substance Use note would only be viewable to the agency that entered it.

- **Care Plan or Treatment Plan –** The Social Worker or Clinician generally starts a Care/Treatment Plan with the client and then others may add to it. ARIES will allow a pre-determined level user access to both create and edit Care/Treatment Plans. The Care/Treatment Plan will be developed with enough flexibility for each Partner so that each Partner can determine the types of client-level outcomes to be tracked. The Social Worker or Clinician will choose an action category or an action item from a pre-determined list on the Care/Treatment Plan. The details of that will then be entered in narrative format. For example, a client may agree to go to a primary medical provider for a follow-up appointment and then report back to the case manager that the appointment was kept. In this example, Medical may be selected as the action category. The case manager would then enter the specifics of that appointment into a narrative field. Finally, there would be another field to record the Outcome of this action, for example, whether the client kept or did not keep the appointment. This Outcome feature will be designed so that if the referral were being made to another agency that also uses ARIES, that agency would be able to open the client's Care/Treatment Plan and enter the Outcome.

Client Telephone Call

When a telephone call is received at an agency, the call is generally transferred to a case manager. The agency Receptionist generally does not deal with client issues. When a call comes in from an existing client, the case manager determines if it is a call for the case manager or a call for the clinic. If the call is for the case manager, the question is answered and the documentation is added to the client's record, including the service data. If the call is from an individual who is not an existing client, the person answering the phone will both simply answer the question and then record the service data in the Fake Client Record. By doing this, staff can track the time they spend with "non-clients" but not count those individuals as unduplicated clients. If the questions cannot be answered, the individual is offered an appointment and instructed to present for services with all of the required documentation.

Management Reports

Management reports must balance quick access for operational reports versus flexible access for epidemiological queries. ARIES will provide reports at several levels:

1. Canned operational reports with parameters;
2. Ad-hoc selection from lists of database columns, criteria on rows, and sort orders;
3. Ability to formulate SQL queries against a sample database. The manager submits the SQL to Partner staff for review for privacy, security, and appropriateness. Partner staff run the SQL and return the results by email.

4. Partners may also provide support in formulating SQL queries for less advanced users.

The first two options display the results in the browser window from where they may be printed, exported to other file formats, or saved as named queries.

Contract Management

ARIES will improve reporting for federal funding sources. To make it successful in the agency, it should also provide tracking of other contracts, including state, county, city, and private sources. The contract management setup supports a lot of flexibility in setting up contracts, programs, and categories of service reporting.

Workflow Differences

The major differences between the diverse service providers are:

1. Some providers will turn an individual away if the individual presents for a scheduled appointment and does not have all of the required eligibility documentation. The ARIES system will be designed to be flexible with this. As long as the ARIES user can collect the information required for the creation of the URN, the individual can be entered into the system and services can be assigned to that client's record. The provider may choose, however, to not allow the individual access to any services because the eligibility documentation is missing. The ARIES system will track which documentation has already been presented and which documents are missing.
2. Most clients are seen by appointment rather than on a drop-in basis. However, drop-ins are accommodated when needed. Once again, the ARIES system will be designed with flexibility to accommodate the drop-in client. The case manager or other end user of the ARIES system will simply need to navigate to the screens that are appropriate for the contact. It may mean that the case manager or other end user will need to update some Intake information. Navigating directly to the Intake screen will be done with the click of a mouse or a keyboard shortcut. The same is true for the Care/Treatment Plan. If the case manager or other end user wants to update the Care/Treatment Plan, navigation to that screen would also be simple.
3. In most situations, a data entry staff person (not a case manager) is responsible for entering all narrative and service data into existing databases. The ARIES system will be developed so that a case manager can easily understand and navigate the system, thereby being able to enter

all of his or her own client-level information. It may mean that a case manager meets with a client and then data enters the progress note and service data after the client leaves but it will also be designed so that the case manager can do the entry in real time. Remembering that ARIES will be designed as a "live" system, the data will only be as up-to-date if the case manager enters the data quickly. The Partners may want to consider a Policy and Procedure for data entry, thereby ensuring that the data in the ARIES system is as up-to-date as possible.

4. In some cases, the Receptionist screens calls and schedules appointments. In most situations, the Case Managers screen calls and schedule the appointments. Once again, the ARIES system will accommodate both scenarios. If an agency has a Receptionist, that individual will easily have access to the information in the ARIES system that corresponds to that individual's assigned level of access. A Case Manager will have the same level of access to the information that the Receptionist has but will also have access to additional information in the ARIES system. Therefore, a Case manager will be able to screen calls and schedule appointments for clients but the Receptionist, due to the assigned lower level of access, would not have access to enter progress notes or Care/Treatment Plans.

5. Client referrals are primarily done by Case Managers. However there was one situation in which a Receptionist could refer a client to and schedule a client for transportation. It will be up to each agency to determine the level of access to client information in ARIES for each staff person. In this case, if it is the Receptionist's responsibility to refer a client to and schedule a client for transportation, that Receptionist may be assigned a higher level of access to client records because the job responsibilities require that staff person to do more in a client record.

6. A client may need to see multiple staff people before completing an Intake/Assessment if the client is not eligible for the service provided by the first contact (i.e. client presents for Case Management services, is screened and is found to not be eligible. The client is referred to a peer advocate where another screening occurs. If the client is eligible for this service, it is at this point that the Intake/Assessment is completed). The ARIES system will be developed in modules. Each agency can independently determine how those modules will be used. One agency may instruct their Registration staff to use only certain modules of the system. Access to these modules will be controlled by the user's assigned level of access. Other agencies will permit their staff to use all the different modules of the ARIES system. The ARIES system will be developed with enough flexibility to allow one user to complete all of the different information gathering steps while another agency may choose to have multiple users collect the same information.

7. Some providers will keep the basic information collected from an individual at the time an appointment is scheduled even if the client does not show for the appointment. This information may be kept on the calendar for up to three months but the person does not become a client in ARIES until the individual presents with all the URN components and all eligibility documents.

8. Some providers track anonymous contacts with individuals and the time spent on those contacts while others do not. The ARIES system will be designed to allow case managers to record service data into a "fake client record" so that the users can keep track of all of the time they spend in answering questions and providing referrals to individuals who are not registered clients. If the case manager does not collect all of the information necessary to create the URN then there would be no client record in which to enter all of the information and referral information provided. It would be advantageous to try and get the individual to become a client however, some individuals simply need a quick answer to a question and do not want to become a registered client. Again, ARIES will allow the case manager to enter the service data and time spent on the contact into a "fake client record."