



PA Department of Drug and Alcohol Programs

Getting Started in the PA WITS SOR Module / GPRA Tool Data Collection

September 10, 2019

Welcome

- DDAP Presenters
 - Jennifer Newell, Director of Administrative & Program Support Services Division
 - Kayla Nailor, Training Coordinator
 - Rob Rounce, Director of Specialty Grants Division
- This webinar will be recorded.
- Please submit questions using the chat feature. Direct your chat to everyone, not just the host.
- Please mute your phone.

Meeting Objective

- The objective of this webinar is to provide an understanding of the changes that have been made to PA WITS to address the requirements of the State Opioid Response (SOR) Grant received by PA and the steps that must be taken to use the new SOR module, which includes the GPRA data collection tool.
- This webinar is only to address data entry requirements related to the SOR Grant. All other PA WITS requirements delineated in DDAP's Grant Agreement with SCAs remain in effect.

Agenda

- Agency/Facility/Program Structure in WITS
- SOR User Responsibilities
- SOR Workflow
- SOR Walkthrough
- Additional Resources
- Questions



PA WITS Agency Set Up Model



Agency Set Up Models

- **AGENCY**

- The legal entity that a provider operates within. Some people refer to this as an “umbrella” under which facilities fall. (Example: White Deer Run, Inc.)

- **FACILITY**

- The physical location (building) that an agency / provider uses to deliver services. A provider can have one or more facilities under one agency. (Example: White Deer Run Lancaster, White Deer Run Lebanon, etc.)
- License number is maintained at the facility level (i.e. IBHS #, Facility ID, facilities that aren’t licensed by DDAP are identified by all 9’s)

- **PROGRAM**

- The services offered by a facility. (Example: Outpatient Treatment, Case Management, SOR DHS Housing, SOR DOC, etc.).

Agency Set Up Models

Structure of the patient records and SOR clinical process

- AGENCY LEVEL
 - Client Profile is created when a new individual who has never been entered in the system comes to the agency.
 - Client Profile lives at the Agency level. This means that there can be only one Profile, per client, per Agency. (requires accurate information i.e. SSN in order to generate an accurate unique client number)
- FACILITY LEVEL
 - The Intake, SOR Program Enrollment, and GPRA interviews are created at the Facility level.

PA WITS – SOR Responsibilities

PA WITS – SOR Responsibilities

- **DDAP**
 - PA WITS Service Desk provides tier 2 support for all users
 - Monitor entry of GPRA data and analyze data related to SOR funds.
- **SCA**
 - Staff administrator provides tier 1 support for own agency
 - Maintain accurate agency, facility and staff member records in PA WITS
 - Coordinate the administration of the GPRA.
 - Monitor contracted providers and ensure services are entered in accordance with DDAP's requirements
 - Enter GPRA data
- **Providers (SCA-contracted, DHS grantees, PCCD, DOC, etc.)**
 - Staff administrator provides tier 1 support for own agency
 - Maintain accurate agency, facility and staff member records in PA WITS
 - May enter GPRA data



Staff Administrator

- What does it mean to be a Staff Administrator?
 - As a **Staff Administrator**, your role is to create and manage staff accounts in PA WITS. This includes setting up new employees and assigning their user accounts the appropriate roles.
 - Roles needed are Clinical (Full) and GPRA (Full Access)
 - Directions for setting up staff accounts are in the PA WITS SOR Admin User Guide
 - Provide **Tier 1 Support** for your agency
 - Escalate complex issues to PA WITS Service Desk (Tier 2 Support)

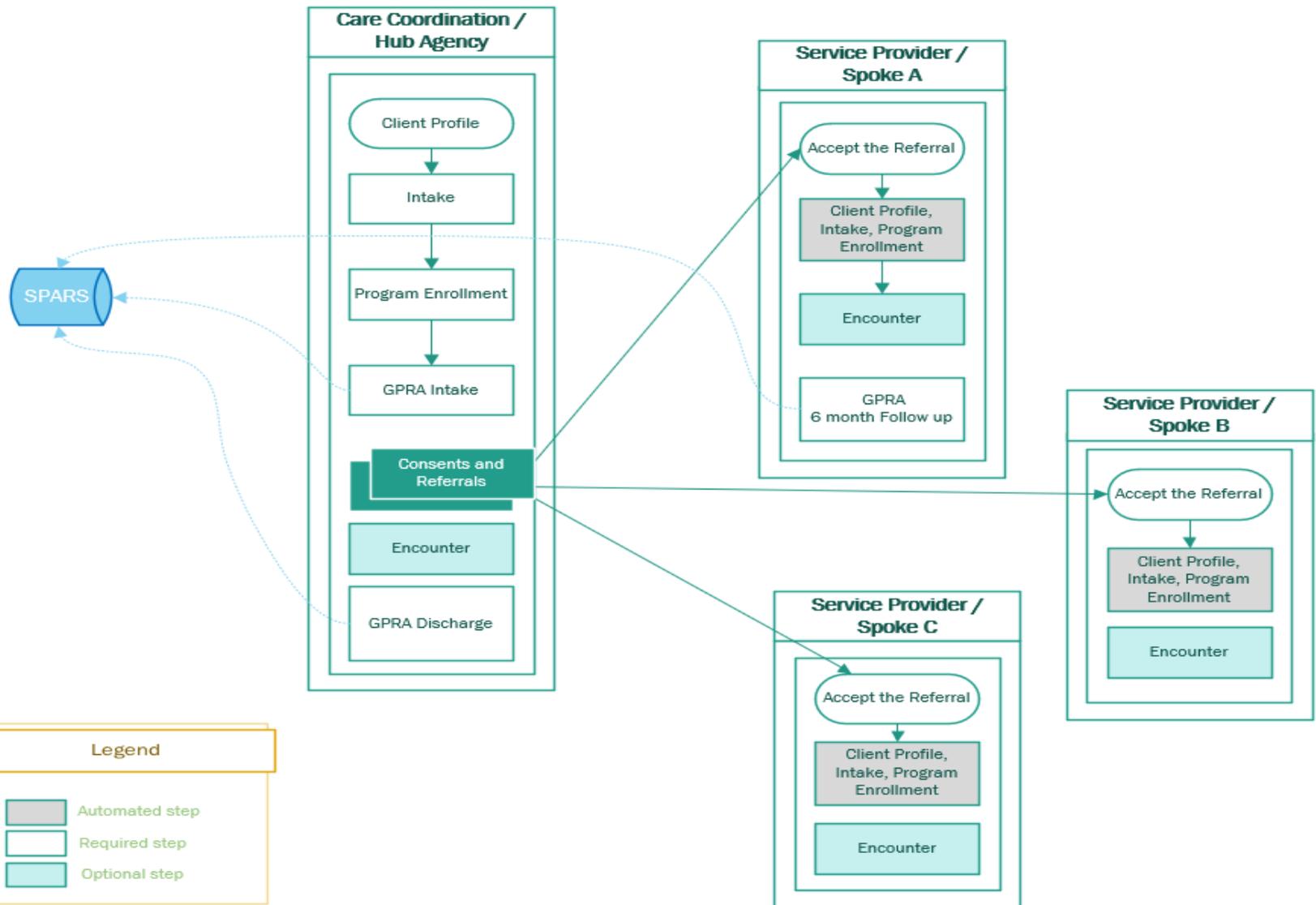
PA WITS Support Structure

- **Tier 1 Support: Staff Administrator at SCA or Provider**
 - Be available to address user issues during normal operation hours
 - Create new staff accounts, reset passwords, lock/unlock accounts, change user account permissions/roles
 - Ensure new users complete on-demand self-service training (ddap.pa.gov)
 - Escalate system errors or complex issues to PA WITS Service Desk (Tier 2 Support)
- **Tier 2 Support: PA WITS Service Desk**
 - Available Monday-Friday, 8 AM – 4:30 PM (except on State Holidays) to answer calls or emails from SCA/Provider Tier 1 support. Email: RA-DAPAWITS@pa.gov Phone: 717-736-7459
 - Work with SCA/Provider staff administrator or staff member to see the issue through to resolution. Only DDAP escalates issues to Tier 3 support
- **Tier 3 Support: FEi Systems**
 - Work with PA WITS Service Desk to resolve system defects or availability issues



PA WITS SOR Workflow

SOR Workflow

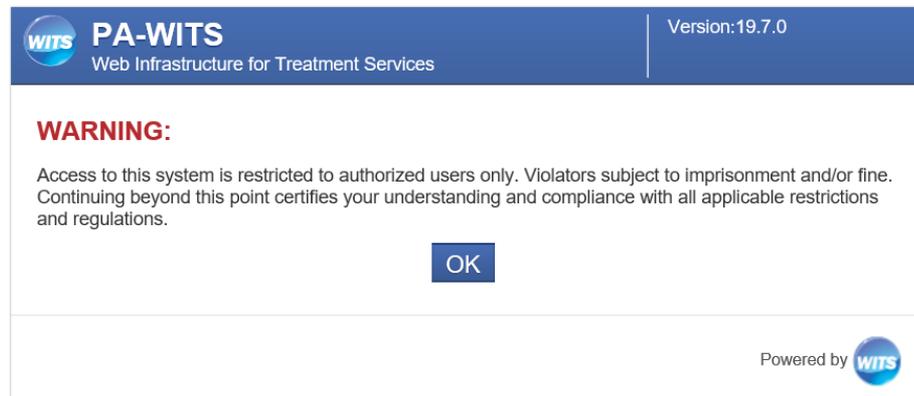




PA WITS SOR Walkthrough

▶ PA Web Infrastructure for Treatment Services

Website: <https://pa.witsweb.org>



The screenshot shows a web application interface for PA-WITS. At the top, a blue header bar contains the WITS logo, the text "PA-WITS Web Infrastructure for Treatment Services", and "Version: 19.7.0". Below the header is a white warning dialog box with a red "WARNING:" heading. The text inside the dialog reads: "Access to this system is restricted to authorized users only. Violators subject to imprisonment and/or fine. Continuing beyond this point certifies your understanding and compliance with all applicable restrictions and regulations." A blue "OK" button is centered below the text. At the bottom right of the dialog, it says "Powered by" followed by the WITS logo.

User Access

The screenshot shows a login interface with the following elements:

- Title:** Login
- User ID:** A text input field with a vertical cursor.
- Password:** A text input field with the placeholder text "Password".
- PIN:** A text input field with the placeholder text "Pin".
- Buttons:** A blue "Login" button and a blue link "Forgot Password?".
- Footer:** "Powered by" followed by the WITS logo.

Reminders:

1. For each account, you should get 2 emails from noreply@witsweb.org: one with your user id and one with a link to set up your password and pin.
2. You need to set your credentials as soon as possible as the link will expire after 24 hours from the time the email with the link was sent.

Search Client in WITS

- Home Page
- Agency
- ▾ Client List
 - Client Profile
 - Linked Consents
 - Activity List
 - Episode List
- System Administration
- My Settings
- Reports
- Support Ticket

Add Client

Client Search

Agency:

First Name:

SSN:

Massachusetts Training Client Id:

Unique Client Number:

Treatment Staff:

Case Status:

Other Number:

Include Only Active Consents:

Facility:

Last Name:

DOB:

Provider Client ID:

Primary Care Staff:

Intake Staff:

Number Type:

Client List (Export)

Actions	Unique Client #	Full Name	DOB	SSN	Gender
	P402930ED339433	Abare, Donald	1/7/1966	001-27-0007	Male
	P902188RG881433	Doe, John	6/7/1988	564-78-5555	Male

Profile
Activity List
Linked Consents

Clients with Consents from Outside Agencies

Actions	Agency	Unique Client #	Client Name	DOB	SSN	Gender



▶ Add Client in WITS

Home Page

- ▶ Agency
- ▼ Client List
 - ▶ Client Profile
 - Linked Consents
 - Non-Episode Contact
 - ▶ Activity List
 - Episode List
- ▶ System Administration

Client Search

Agency Facility

First Name Last Name

SSN DOB

Standard SOR QA Client Id Provider Client ID

Unique Client Number Primary Care Staff

Treatment Staff Intake Staff

Case Status Number Type

Other Number

Include Only Active Consents

Client List (Export)  [Add Client](#)

Actions	Unique Client #	Full Name	DOB	SSN	Gender

Create Client Profile / Demographics

The screenshot shows a web application interface for creating a client profile. On the left is a navigation menu with the following items: Home Page, Agency, Clinical Dashboard, Client List (expanded to show Client Profile, Alternate Names, Additional Information, Contact Info, Collateral Contacts, Other Numbers, Client Group Enrollment, Authorization, History, Linked Consents, Non-Episode Contact, Activity List, Episode List), and System Administration. The main content area is titled 'Profile' and contains the following fields:

- Current First Name (highlighted in yellow)
- Middle Name
- Current Last Name (highlighted in yellow)
- Mother's Maiden Name
- Suffix
- Birth First Name (highlighted in yellow)
- Birth Last Name (highlighted in yellow)
- Gender (dropdown menu, highlighted in yellow)
- DOB (calendar icon)
- SSN (highlighted in yellow)
- Driver's License (text input with dropdown)
- County (dropdown menu, highlighted in yellow)
- Provider Client ID (text input)
- Unique Client Number (text input)
- State Client ID (text input)
- Record Created By (text input)
- Last Updated By (text input)
- Created Date (text input)
- Last Updated Date (text input)
- Has paper file (Yes/No dropdown)
- Administrative Actions (text input)

If the SSN is unknown, enter all zeros – 000-00-0000

Create Client Profile / Additional Information

<ul style="list-style-type: none">Home Page▸ AgencyClinical Dashboard▾ Client List<ul style="list-style-type: none">▾ Client Profile<ul style="list-style-type: none">Alternate NamesAdditional InformationContact InfoCollateral ContactsOther NumbersClient Group EnrollmentAuthorizationHistoryLinked ConsentsNon-Episode Contact▸ Activity ListEpisode List▸ System Administration	<h3>Additional Information</h3> <p>Ethnicity <input type="text"/></p> <p>Races</p> <table border="1"><tr><td>Alaska Native</td><td rowspan="4">^ > v <</td><td rowspan="4">Selected Races</td></tr><tr><td>American Indian</td></tr><tr><td>Black or African American</td></tr><tr><td>White</td></tr><tr><td>Asian</td><td></td><td></td></tr></table> <p>Special Needs</p> <table border="1"><tr><td>None</td><td rowspan="4">^ > v <</td><td rowspan="4">Selected Special Needs</td></tr><tr><td>No Response</td></tr><tr><td>Developmentally Disabled</td></tr><tr><td>Major Difficulty in Ambulating or Nonambulation</td></tr></table> <p>General Client Comments <input type="text"/></p> <p>Sexual Orientation <input type="text"/></p> <p>Religious Preference <input type="text"/></p> <p>English Fluency <input type="text"/></p> <p>Preferred Language <input type="text"/></p> <p>Interpreter Needed <input type="text"/></p> <p>Veteran Status <input type="text"/></p> <p>Citizenship <input type="text"/></p>	Alaska Native	^ > v <	Selected Races	American Indian	Black or African American	White	Asian			None	^ > v <	Selected Special Needs	No Response	Developmentally Disabled	Major Difficulty in Ambulating or Nonambulation
Alaska Native	^ > v <	Selected Races														
American Indian																
Black or African American																
White																
Asian																
None	^ > v <	Selected Special Needs														
No Response																
Developmentally Disabled																
Major Difficulty in Ambulating or Nonambulation																

Create Client Profile / Address

The screenshot shows a web application interface for creating a client profile. On the left is a blue navigation menu with the following items: Home Page, Agency, Clinical Dashboard, Client List (expanded), Client Profile (expanded), Alternate Names, Additional Information, Contact Info, Collateral Contacts, Other Numbers, Client Group Enrollment, Authorization, History, Linked Consents, Non-Episode Contact, Activity List, Episode List, and System Administration. The main content area is titled 'Address Information' and contains the following form fields: Address Type (dropdown menu), Confidential (No dropdown), Address Line 1 (text input), Address Line 2 (text input), County (dropdown menu), City (text input), State (dropdown menu), and Zip (text input). A red arrow originates from the text below and points to the 'Address Type' dropdown menu.

If the individual is homeless, select “homeless” as the address type and no further address information is required to be entered.



Create Client Profile / Collateral Contacts

- Home Page
- ▶ Agency
- Clinical Dashboard
- ▼ Client List
 - ▼ Client Profile
 - Alternate Names
 - Additional Information
 - Contact Info
 - Collateral Contacts
 - Other Numbers
 - Client Group Enrollment
 - Authorization
 - History
 - Linked Consents
 - Non-Episode Contact
 - ▶ Activity List
 - Episode List
- ▶ System Administration

Collateral Contacts			
Actions	First Name	Last Name	Relation

First Name

Last Name

Relation

Custodian

Gender

Home Phone

Work Phone

Mobile

Fax

Other

Legal Guardian

Active Date

Inactive Date

Address 1

Address 2

City State Zip

Email

Can Contact

Consent On File

Notes

Created

Last Update

Collateral contacts will be important to GPRA in order to locate the individual for the follow-up GPRA).



Create Client Profile / CGE

- Home Page
- ▶ Agency
- Clinical Dashboard
- ▼ Client List
 - ▼ Client Profile
 - Alternate Names
 - Additional Information
 - Contact Info
 - Collateral Contacts
 - Other Numbers
 - Client Group Enrollment
 - Authorization
 - History
 - Linked Consents
 - Non-Episode Contact
 - ▶ Activity List
 - Episode List
- ▶ System Administration

Payor List

Actions	Priority	Plan	Group	Subscriber/ Acct#	Subscriber/ Resp Party

Government Contract Billing Information

Plan Type: Government Contract Payor Priority Order: 1

Contract: [Yellow] Start Date: [Yellow] [Calendar]

Plan-Group: [Yellow] End Date: [Calendar]

Subscriber #: S60009049987770

Administrative Actions: _____

Start New Episode

SOR, No Name | S60009049987770

- Home Page
- Agency
- Clinical Dashboard
- Client List
 - Client Profile
 - Linked Consents
 - Non-Episode Contact
 - Activity List
 - Episode List
- System Administration

Please select a case, or click Start New Episode.

Episode List

Actions	Case #	Status	Facility	Intake By	Intake Date

Create Client Intake

Home Page

- Agency
- Clinical Dashboard
- Client List
 - Client Profile
 - Linked Consents
 - Non-Episode Contact
 - Activity List
 - Intake
 - Screening Tool
 - Assessments
 - ASAM
 - PCPC Summary
 - Admission
 - Outcome Measures
 - Program Enroll
 - Diagnosis List
 - Encounters
 - Notes
 - Tx Team
 - Treatment Plan
 - Discharge
 - Recovery Plan
 - Consent
 - Referrals
 - Episode List
 - System Administration

Intake Case Information

Intake Facility	CMSU SCA	Case #	1		
Intake Staff	manager, case	Case Status	Open Active		
Initial Contact	Referral	Initial Contact Date	08/01/2019		
Is Client Public Funded?		Intake Date	08/01/2019		
Funding SCA	None / Unknown	Pregnant	Not Applicable	Due Date	
Source of Referral	Court/Criminal Justice - Drug Court/Treatme...	Prenatal Treatment			
Referral Contact		Injection Drug User	Yes		
Add Collateral Contact		Problem Area			
Scheduled Assessment Date	08/01/2019	Presenting Problem (In Client's Own Words)			
Assessment Date	08/01/2019				
If assessment cannot be scheduled within 7 days, why?					
Did client complete scheduled assessment?	Yes				
Why was scheduled assessment missed?					
Scheduled Admission Date	08/01/2019				

Special Initiatives/Populations: None, Buprenorphine, Student Assistance Program, Veteran, Vivitrol

Special Initiatives/Populations Selected: Methadone

Inter-Agency Service: Child Protective Services (OCS), Court/Legal Interface, Developmental Disabilities, Domestic Violence

Inter-Agency Service Selected:

Assessment and Admission Dates should be the same as the INTAKE DATE.

▶ Enroll in SOR Program

Home Page	Program Enrollment Profile			
▶ Agency	Facility <input type="text" value="CMSU SCA"/>	Days on Wait List <input type="text"/>	Start Date <input style="background-color: yellow; border: 1px solid black;" type="text" value="9/6/2019"/>	
Clinical Dashboard	Program Name <input style="background-color: yellow; border: 1px solid black;" type="text" value="SOR SCA"/>	Reason for waiting? <input type="text"/>	End Date <input type="text"/>	
▼ Client List	Program Staff <input style="background-color: yellow; border: 1px solid black;" type="text" value="manager, case"/>			
▶ Client Profile	Termination Reason <input type="text"/>			
Linked Consents	Notes <input type="text"/>			
Non-Episode Contact				
▼ Activity List				
Intake				
Screening Tool				
▶ Assessments				
▶ Admission				
Program Enroll				
Diagnosis List				
		<input type="button" value="Cancel"/>	<input type="button" value="Save"/>	<input type="button" value="Finish"/>

▶ Add GPRA Intake

Fox, Juniper | J044788SJ884654 | 1 Snapshot

Home Page

- ▶ Agency
- ▼ Client List
 - ▶ Client Profile
 - ▼ Activity List
 - Intake
 - Program Enroll
 - GPRA
 - ▶ Encounters
 - Consent
 - Referrals
 - Episode List

No results match your search criteria ×

Add GPRA Intake

Action	Interview_Type	Client_Type	Interview_Date	Record_Status

Complete GPRA Intake Questions

Home Page

▶ Agency

Clinical Dashboard

▼ Client List

- ▶ Client Profile
 - Linked Consents
 - Non-Episode Contact
- ▼ Activity List
 - Intake
 - Screening Tool
 - ▶ Assessments
 - ▶ ASAM
 - PCPC Summary
 - ▶ Admission
 - ▶ Outcome Measures
 - Program Enroll
 - Diagnosis List
 - ▶ Encounters
 - ▶ Notes
 - Tx Team
 - Treatment Plan

A. RECORD MANAGEMENT

Unique Client Number: S60008219587770

Contract/Grant ID: TI081692

Client Type: Treatment Client

Interview Type: Intake

Did you conduct an interview?

Interview Date: 8/1/2019  mm/dd/yyyy

Program Enrollment: CMSU SCA/SOR SCA : 8/1/2019 -

Created Date:

Created By:

Updated Date:

Updated By:

Upload Action:

Upload Status:

Number of Upload Errors:

Upload Date:

Response Date:

Cancel 

Complete GPRA Intake Questions (cont.)

- Home Page
- ▶ Agency
- Clinical Dashboard
- ▼ Client List
 - ▶ Client Profile
 - Linked Consents
 - Non-Episode Contact
 - ▼ Activity List
 - Intake
 - Screening Tool
 - ▶ Assessments
 - ▶ ASAM
 - PCPC Summary
 - ▶ Admission
 - ▶ Outcome Measures
 - Program Enroll
 - Diagnosis List
 - ▶ Encounters
 - ▶ Notes
 - Tx Team
 - Treatment Plan
 - ▶ Discharge
 - ▶ Recovery Plan
 - Consent
 - ▼ GPRA
 - ▼ A. Record Mgmt
 - Diagnoses
 - Referrals
 - Episode List
 - ▶ System Administration

A. RECORD MANAGEMENT - BEHAVIORAL HEALTH DIAGNOSES

Please indicate the client's current behavioral health diagnoses using the International Classification of Diseases, 10th revision, Clinical Modification (ICD-10-CM) codes listed below. Please note that some substance use disorder ICD-10-CM codes have been cross walked to Diagnostic and Statistical Manual of Mental Disorders, (DSM-5) descriptors.

	Diagnosis	<input type="text" value=""/>
	Category	<input type="text" value=""/>
<input type="checkbox"/> Don't Know	Diagnosis	<input type="text" value=""/>
<input type="checkbox"/> None of the above	Category	<input type="text" value=""/>
	Diagnosis	<input type="text" value=""/>
	Category	<input type="text" value=""/>

1. In the past 30 days, was the client diagnosed with an opioid use disorder?

a. In the past 30 days, which FDA-approved medication did the client receive for the treatment of this opioid use disorder? (Select all that apply)

	Received	# of Days
Methadone	<input type="text" value="Not Applicable"/>	<input type="text" value=""/>
Buprenorphine	<input type="text" value="Not Applicable"/>	<input type="text" value=""/>
Naltrexone	<input type="text" value="Not Applicable"/>	<input type="text" value=""/>
Extended-release Naltrexone	<input type="text" value="Not Applicable"/>	<input type="text" value=""/>

2. In the past 30 days, was the client diagnosed with an alcohol use disorder?

a. In the past 30 days, which FDA-approved medication did the client receive for the treatment of this alcohol use disorder? (Select all that apply)

	Received	# of Days
Naltrexone	<input type="text" value="Not Applicable"/>	<input type="text" value=""/>
Extended-release Naltrexone	<input type="text" value="Not Applicable"/>	<input type="text" value=""/>
Disulfiram	<input type="text" value="Not Applicable"/>	<input type="text" value=""/>
Acamprosate	<input type="text" value="Not Applicable"/>	<input type="text" value=""/>

3. Was the client screened by your program for co-occurring mental health and substance use?

a. Did the client screen positive for co-occurring mental health and substance use disorders?

Cancel

Complete GPRA Intake Questions (cont.)

- Home Page
- ▶ Agency
- Clinical Dashboard
- ▼ Client List
 - ▶ Client Profile
 - Linked Consents
 - Non-Episode Contact
 - ▼ Activity List
 - Intake
 - Screening Tool
 - ▶ Assessments
 - ▶ ASAM
 - PCPC Summary
 - ▶ Admission
 - ▶ Outcome Measures

A. RECORD MANAGEMENT - SERVICES

PLANNED SERVICES [REPORTED BY PROGRAM STAFF ABOUT CLIENT ONLY AT INTAKE/BASELINE]
Identify the services you plan to provide to the client during the client's course of treatment/recovery

Modality

1. Case Management	Yes	▼	9. Detoxification (Select Only One)
2. Day Treatment	No	▼	A. Hospital Inpatient
3. Inpatient/Hospital (Other Than Detox)	No	▼	B. Free Standing Residential
4. Outpatient	No	▼	C. Ambulatory Detoxification
5. Outreach	No	▼	10. After Care
6. Intensive Outpatient	No	▼	11. Recovery Support
7. Methadone	No	▼	12. Other (Specify)
8. Residential/Rehabilitation	No	▼	<input style="width: 100%;" type="text"/>

Cancel
◀
▶

NOTE: Do not use the left arrow button, otherwise data will be lost.

- Home Page
- ▶ Agency
- Clinical Dashboard
- ▼ Client List
 - ▶ Client Profile

All entries on the last screen will be cleared. Would you like to continue?

Yes

No

Complete GPRA Intake Questions (cont.)

G. SOCIAL CONNECTEDNESS

	Yes	Times	RF/DK
1. In the past 30 days, did you attend any voluntary self-help groups for recovery that were not affiliated with a religious or faith-based organization? <i>[In other words, did you participate in a non-professional, peer-operated organization that is devoted to helping individuals who have addiction related problems such as: Alcoholics Anonymous, Narcotics Anonymous, Oxford House, Secular Organization for Sobriety, or Women for Sobriety, etc.]</i>	Yes	5	
2. In the past 30 days, did you attend any religious/faith affiliated recovery self-help groups?	No		Not Applicable
3. In the past 30 days, did you attend meetings of organizations that support recovery other than the organizations described above?	No		Not Applicable
4. In the past 30 days, did you have interaction with family and/or friends that are supportive of your recovery?	Yes		
5. To whom do you turn when you are having trouble?	Family member		
Other (Specify):			
6. How satisfied are you with your personal relationships?	Neither Satisfied nor Dissatisfied		

I. FOLLOW-UP STATUS

1. What is the follow-up status of the client?	Completed interview within specified window
If "Unable to locate, other", (Specify)	
2. Is the client still receiving services from your program?	Yes



▶ GPRA Intake in Client Activity List

Home Page	Client Activity List				
▶ Agency	Actions	Activity	Activity Date	Created Date	Status
Clinical Dashboard		Client Information (Profile)	8/1/2019	9/5/2019	Completed
▼ Client List		Intake Transaction	8/1/2019	9/5/2019	Completed
▶ Client Profile		Client Program Enrollment (SOR SCA)	8/1/2019	9/5/2019	Completed
Linked Consents		GPRA Interview (Intake)	8/1/2019	9/5/2019	Completed
Non-Episode Contact					
▼ Activity List					
Intake					
Screening Tool					
▶ Assessments					
▶ ASAM					
PCPC Summary					
▶ Admission					
▶ Compliance Monitoring					

▶ Add GPRA Follow up

Lilly, Tiger | J254875MP684644 | 1 Snapshot

Home Page Add GPRA Intake Add GPRA Followup Add GPRA Discharge

▶ Agency

▼ Client List

- ▶ Client Profile
- Linked Consents
- Non-Episode Contact
- ▼ Activity List

Action	Interview Type	Client type	Interview Date	Record Status
	Intake	Treatment Client	2/4/2019	Completed

Lilly, Tiger | J254875MP684644 | 1 Snapshot

Home Page

▶ Agency

▼ Client List

- ▶ Client Profile

You are about to enter a 6-month follow-up record for this client. Would you like to continue?

Complete 6-Month Follow up Questions

Home Page	<p>A. RECORD MANAGEMENT</p> <p>Unique Client Number S60008219587770 Contract/Grant ID TI081692 Client Type Treatment Client Interview Type 6-Month Follow Up Did you conduct an interview? <input type="checkbox"/> Interview Date <input type="text"/> mm/dd/yyyy Program Enrollment CMSU SCA/SOR SCA : 8/1/2019 - Created Date: <input type="text"/> Created By: <input type="text"/> Updated Date: <input type="text"/> Updated By: <input type="text"/> Upload Action: <input type="text"/> Upload Status: <input type="text"/> Number of Upload Errors: <input type="text"/> Upload Date: <input type="text"/> Response Date: <input type="text"/></p>
Agency	
Clinical Dashboard	
Client List	
Client Profile	
Linked Consents	
Non-Episode Contact	
Activity List	
Intake	
Screening Tool	
Assessments	
ASAM	
PCPC Summary	
Admission	
Outcome Measures	
Program Enroll	
Diagnosis List	
Encounters	

▶ Add GPRA Discharge

Lilly, Tiger | J254875MP684644 | 1 Snapshot

Home Page

▶ Agency

▼ Client List

▶ Client Profile

 Linked Consents

 Non-Episode Contact

▼ Activity List

Add GPRA Intake Add GPRA Followup **Add GPRA Discharge**

Action	Interview Type	Client Type	Interview Date	Record Status
	Intake	Treatment Client	2/4/2019	Completed
	6-Month Follow Up	Treatment Client	7/15/2019	Completed

Lilly, Tiger | J254875MP684644 | 1 Snapshot

Home Page

▶ Agency

▼ Client List

▶ Client Profile

 Linked Consents

 Non-Episode Contact

You are about to enter a discharge record for this client. Would you like to continue?

Complete Discharge Questions

- Home Page
- ▶ Agency
- Clinical Dashboard
- ▼ Client List
 - ▶ Client Profile
 - Linked Consents
 - Non-Episode Contact
 - ▼ Activity List
 - Intake
 - Screening Tool
 - ▶ Assessments
 - ▶ ASAM
 - PCPC Summary
 - ▶ Admission
 - ▶ Outcome Measures
 - Program Enroll
 - Diagnosis List
 - ▶ Encounters

A. RECORD MANAGEMENT

Unique Client Number	S60008219587770
Contract/Grant ID	TI081692
Client Type	Treatment Client
Interview Type	Discharge
Did you conduct an interview?	<input type="checkbox"/>
Interview Date	<input type="text"/> mm/dd/yyyy
Program Enrollment	CMSU SCA/SOR SCA : 8/1/2019 -
Created Date:	<input type="text"/>
Created By:	<input type="text"/>
Updated Date:	<input type="text"/>
Updated By:	<input type="text"/>
Upload Action:	<input type="text"/>
Upload Status:	<input type="text"/>
Number of Upload Errors:	<input type="text"/>
Upload Date:	<input type="text"/>
Response Date:	<input type="text"/>



▶ GPRA Sections to be Completed

GPRA data collection points
Intake/Baseline
6-month-post-intake
Discharge

GPRA sections completed
A-G
B-G, I
B-G, J, K

Completed GPRA Interviews in Client Activity List

Home Page	Client Activity List	
▶ Agency	Actions	<u>Activity</u>
▶ Group List		Client Information (Profile)
Clinical Dashboard		Intake Transaction
▼ Client List		Screening Tool
▶ Client Profile		TAP Assessment (Intake)
Linked Consents		Client Program Enrollment (SOR Program 810)
Non-Episode Contact		GPRA Interview (Intake)
▼ Activity List		GPRA Interview (6-Month Follow Up)
Intake		GPRA Interview (Discharge)
Screening Tool		Client Program Enrollment (Not a SOR Grant)
▶ Assessments		
▶ ASAM		

Consent and Referral

Add New Client Consent Record

The screenshot shows a web application interface. At the top, there is a header bar with the user name 'Fox, Juniper | F20010120092650 | 1' and a 'Snapshot' button. Below the header is a navigation menu on the left with items: 'Home Page', 'Agency', 'Clinical Dashboard', and 'Client List'. The main content area is titled 'Client Consent List' and contains a table with the following columns: 'Actions', 'Start Date', 'Disclosed To', 'Status', and 'Signed?'. A red arrow points to a button labeled 'Add New Client Consent Record' located in the top right corner of the table area.

Actions	Start Date	Disclosed To	Status	Signed?

Consent and Referral (continued)

On the Client Disclosure Agreement screen, complete the following fields:

Client Disclosure Agreement

Note: Consented information may not be redisclosed.

Client Name: poppins, mary
Unique Client Number: P15206017665430
Disclosed From Agency: Administrative Agency

Entities with Disclosure Agreements

System Agency: Yes

Disclosed To Agency: A & O RECOVERY SERVICES INC

Disclosed To Entity (Non System Agency)

Facility: All Facilities

Purpose for disclosure: Client's level of care has changed and needs to receive

Earliest date of services to be consented: 6/1/2017

Has the client signed the paper agreement form: No Date client signed consent:

Client Information To Be Consented

Expiration Type: Discharge(UD) + Days:

*Expiration type is required for disclosure activities.

Client Information Options

- Admission
- ASAM
- ATR Eligibility Screen
- Behavioral Health Assessment
- CAGE-AID Screening
- CONTINUUM Triage™ Assessment
- CONTINUUM™
- DENS ASI Assessment
- DENS ASI Lite
- Diagnosis List

Disclosure Selection

- Client Information (Profile) (UD, +30)
- Client Screening (UD, +30)
- Consent (UD, +30)
- Intake Transaction (UD, +30)
- TAP Assessment (UD, +30)

Comments:

Other Disclosures:

Cancel Save Finish

Consent and Referral (continued)

The screenshot shows a web application interface for a client's disclosure agreement. At the top, the user is identified as 'Fox, Juniper | F20010120092650 | 1'. There are buttons for 'Generate Report' and 'Snapshot'. A left sidebar contains navigation options: Home Page, Agency, Clinical Dashboard, Client List (expanded), Client Profile, Linked Consents, Non-Episode Contact, Activity List, and Intake. The main content area is titled 'Client Disclosure Agreement' and features a red arrow pointing to a button labeled 'Create Referral Using this Disclosure Agreement'. Below this, a note states: 'Note: Consented information may not be redisclosed.' The client information is as follows: Client Name: Fox, Juniper; Unique Client Number: F20010120092650; Disclosed From Agency: Community Counseling Center of Mercer County. The 'Entities with Disclosure Agreements' section includes: System Agency: Yes; Disclosed To Agency: Administrative Agency; Disclosed To Entity (Non System Agency): [blank]; Facility: Administrative Unit. The 'Purpose for disclosure' is: Client's level of care has changed and needs services fr

Consent and Referral (continued)

Referral

Referred By

Agency: Administrative Agency
Facility: Administrative Unit
Staff Member: Jones, Ashley
Program: [dropdown]
State Reporting Category: [dropdown]
Reason: [dropdown]
If Other: [text]
Is Consent Verification Required?: [dropdown]
Is Consent Verified?: [dropdown]
Continue This Episode of Care?: No [dropdown]

Comments: [text area]

Referral Status: Referral Created/Pending [dropdown]
Projected End Date: [calendar icon]
Created Date: 7/24/2017 2:20 PM

Referred To

Signed Consents: ALCOHOL AND DRUG ABUSE SERVICES [dropdown]
Agency: ALCOHOL AND DRUG ABUSE SERVICES
Facility: CHESTNUT ST-A&D ABUSE SRVCS
Staff Member: [dropdown]
Program: [dropdown]
State Reporting Category: [dropdown]
Non-System Agency: [dropdown]
Non-System Modality: [dropdown]
Non-System Specifier: [dropdown]
Appt Date: [calendar icon] Undetermined

Consents Granted
Consent Date: 6/30/2017
Disclosure Domains:
Admission (UD, +30)
ASAM (UD, +30)
Client Information (Profile) (UD, +30)
Client Screening (UD, +30)
Intake Transaction (UD, +30)

Cancel Save Finish

Duplicate SOR Program Enrollment

SOR, Client10 | S60008309661230 | 1 Snapshot

There is a problem creating this client program enrollment record. Please contact your system administrator to resolve this conflict.

Program Enrollment Profile

Facility: A & O RECOVERY SERVICES INC

Program Name: SOR Program 9100

Program Staff: coordinator, case

Days on Wait List:

Reason for waiting?:

Start Date: 8/30/2019

End Date:

Termination Reason:

Notes:

Cancel Save Finish

There is a problem creating this client program enrollment record. Please contact your system administrator to resolve this conflict.

Duplicate SOR Program Enrollment

- The provider/user must contact the SCA Administrator
- If the SCA Administrator knows the original agency the client was enrolled into a SOR program:
 - Work with the original agency consent and refer the client to the new agency
- If the original agency is not known:
 - SCA Administrator contacts PA WITS Help Desk to obtain the information
 - Then work with the original agency, as above
- If the client should never have been enrolled in a SOR program:
 - SCA Administrator contacts PA WITS Help Desk to have the program enrollment inactivated.



Additional Resources

▶ Additional Resources

The following resources are recommended for new WITS users:

- Treatment Clinical End User Videos 1, 2, 3, 15, 16, 21
<https://www.ddap.pa.gov/Pages/Data-System-Treatment-Clinical-End-Users.aspx>
- Treatment Agency Admin Videos 3, 6, 7, 13, 14
<https://www.ddap.pa.gov/Pages/Data-System-Treatment-Agency-Administrators.aspx>
- PA WITS Basic User Guide - available on both sites above
- PA WITS Staff Administrator User Guide – available on Treatment Agency Administrators site



Questions and Answers!

Contact PA WITS Service Desk

Email: RA-DAPAWITS@pa.gov

Phone: 717-736-7459



Thank You!