Instructional Guide to the Crisis Assessment Tool (CAT) in CYBER
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I. Introduction

Mobile Response Stabilization Services (MRSS) utilize the Crisis Assessment Tool (CAT) to document information for the youth and family with whom they are working. The initial CAT is based on assessment information gathered when MRSS is dispatched to assist in de-escalating a crisis.

The CAT documents the behavioral and emotional needs of the youth, areas of youth strength, and the risk behaviors they are exhibiting as identified in the assessment process. The CAT also documents the strengths and needs of the youth’s caregiver(s). The CAT can support clinical decision making for future/on-going treatment for the youth and caregiver(s); it assists in planning for crisis interventions and guides the assessor on how to prioritize interventions and what to focus on when planning (See References).

The current CAT design is a cohesive assessment that contains consistent, family-friendly language, which is appropriate for all of the populations served by the Children's System of Care. The assessment includes descriptions for the rated questions to guide and ensure that the assessor makes the best decisions based upon the information gathered. Modules are also included to document as much information as possible both at the initial intervention and during on-going stabilization services.

There are three different document types or versions of the CAT (See Life Domain Functioning for more details):

- **Initial CAT** – This is the first assessment completed and the assessor is encouraged to document all available information. The assessment allows the user to gather additional information as the youth and family continue services and are engaged by other supports.

- **Update CAT** – This type of assessment is completed any time there are changes to the Initial CAT; it is also completed at the time of transition planning. This assessment requires all questions to be answered within the modules so that the next providing agency has all of the information they need to begin services with the youth and family.

- **No Contact** – This type of assessment is used when the agency has lost contact with the family and is submitting a plan to transition the youth from services. There are no validations in this assessment, allowing for minimal completion.

Dec 2016 - CAT was updated with family-friendly language, improved descriptions for the rated questions, new questions were included, existing questions were updated, and additional modules were included to document as much information as possible both at the initial intervention and during on-going stabilization services. New print options were added.
II. Accessing CYBER

Users must first log into CYBER with their Username and Password. CYBER can be accessed via the PerformCare website – www.performcarenj.org. The link is available at the top and bottom of the main page.

Each provider organization has at least one CYBER Security Administrator, and your agency’s CYBER Security Administrator can set up a login for you.

Your access will be based on your login type and security levels.

Before you log in, keep in mind...

- There is no ‘back button’ use in CYBER!
- Most areas/buttons are single-click – do not double-click on a button!
- Every time you launch CYBER, you will be required to enter your Username and Password and Enter, Tab and Enter or click the LOGIN button to continue.

Above the log in area is a statement that, as a CYBER user, you acknowledge your responsibility to protect the privacy of, and to guard against, the inappropriate use of the Protected Health Information (PHI) contained within the system.

This statement will appear each time you log in.

Please also check the Providers section on the PerformCare website for the most up-to-date technical requirements (such as browser compatibility and operating systems) that a user would need to access CYBER.
III. Crisis Assessment and Treatment Plans

In order to create a new crisis assessment, navigate to the Treatment Plans and Assessments screen within a youth’s CYBER record.

Once the Treatment Plans and Assessments screen loads, the user will be able to create a new assessment by selecting the document from the Select Treatment Plan or Assessment type to create menu.

Clicking “Add New” will open the new assessment.

If there is another CAT in draft for the youth (authored by the logged-in user or another user), the user will receive an alert message but will be able to continue with the new assessment.

The assessment will automatically save upon creation; navigating between tabs will also auto-save the document, however users should periodically click the Save button at the bottom of the assessment.

Note: Assessments that belong to the user may be edited or deleted prior to being submitted.

The assessment is structured in tabbed format. In order to navigate
IV. The Crisis Assessment Tool

Documentation Reminders in the Assessment

- **Unless otherwise noted, all fields in the assessment are required** for submission.
  - For the Initial CAT, the Modules are not required; all other questions within the assessment are required.
- **If a question is rated a 2 or 3, a complete comment that supports the rating is required.** Users may choose to enter a comment for a question rated 0 or 1 if it will support the rating or provide additional information to support or aid in treatment planning. **Users do not need to enter NA into the comment field if a comment is not required.**

When entering information into a comment field, users are expected to follow these guidelines:

- **Do not enter diagnosis alone as justification for a rating.** In most instances, the rated questions ask for how the youth is exhibiting the behaviors. The user should be documenting that information along with any details regarding historical behaviors or prior treatment.
- **Do not enter the same information into every comment field.** This will cause a return of the assessment and associated treatment.
- **Use complete sentences and include language from the question when entering information.** If your supporting comments do not justify the rating given, your assessment (and associated plan) may be returned.
  - If, in order to satisfy a required field validation, a user enters a period (.), a comma (,), “NA”, or other non-alpha character such as “/”, etc. the assessment and associated plan will be returned.
- **Include details if documenting an acute episode or significant event;** for example, if a youth is detained on legal charges and you are documenting reported facts about the event, include not only the charge but information about the event and alleged behaviors such as who was reportedly involved, where the event allegedly took place, status of the charge, etc.
- **Be as specific as possible in your documentation.** Include dates, information regarding who was involved, where the behaviors were exhibited, what factors may have been involved, who provided the details, etc.
- **Documentation must be specific to the youth.** Do not duplicate documentation across youth records. This applies to siblings and non-related youth, as well.

**Viewing Previous Answers**
The CAT includes functionality that allows the user to view the previous answer and comment for each rated question.

*Hovering the mouse over the asterisk (*) button will display a pop-up of the answer selected for the most recently submitted CAT from within the last 120 days (within the same episode of care).*

*Clicking on the asterisk button will bring up a pop-up window that will include the answer selected and comment from the most recently submitted CAT from within the last 120 days; the user will need manually close the window by manually clicking OK.*

**Pre-Fill Functionality**
The option to copy the *entire assessment* is not available; replacing this feature is an automatic pre-fill of certain fields in the assessment that tend to be historical in nature (see below). Generally, the answers to these questions will not change over time, but can be edited if change has occurred.

Fields that will pre-fill from the most recently submitted CAT from any user within the current episode of care are as follows:
<table>
<thead>
<tr>
<th>Domain/Tab</th>
<th>Question</th>
</tr>
</thead>
<tbody>
<tr>
<td>Life Domain Functioning</td>
<td>Developmental Delay (trigger)</td>
</tr>
<tr>
<td>Child Behavioral/Emotional Needs</td>
<td>Exposure and Response to Implicit Trauma (trigger)</td>
</tr>
<tr>
<td></td>
<td>Exposure and Response to Explicit Trauma (trigger)</td>
</tr>
<tr>
<td>Child Risk Behaviors</td>
<td>Substance Use (trigger)</td>
</tr>
<tr>
<td>I/DD Module</td>
<td>Cognitive</td>
</tr>
<tr>
<td>Trauma Module</td>
<td>What trauma treatment/services have been tried in the past and have been helpful?</td>
</tr>
<tr>
<td></td>
<td>What trauma treatment/services have been tried in the past and have not been helpful?</td>
</tr>
<tr>
<td></td>
<td>Recommendations for treatment approach</td>
</tr>
<tr>
<td></td>
<td>Sexual Abuse</td>
</tr>
<tr>
<td></td>
<td>Physical Abuse</td>
</tr>
<tr>
<td></td>
<td>Emotional Abuse</td>
</tr>
<tr>
<td></td>
<td>Neglect</td>
</tr>
<tr>
<td></td>
<td>Emotional Closeness to Perpetrator(s)</td>
</tr>
<tr>
<td></td>
<td>Medical Trauma</td>
</tr>
<tr>
<td></td>
<td>Witness to Family Violence</td>
</tr>
<tr>
<td></td>
<td>Witness to School and Community Violence</td>
</tr>
<tr>
<td></td>
<td>Natural or Man-Made Disasters</td>
</tr>
<tr>
<td></td>
<td>Witness/Victim to Criminal Activity</td>
</tr>
<tr>
<td></td>
<td>Parental Criminal Behavior</td>
</tr>
<tr>
<td></td>
<td>Disruptions in Caregiver/Attachment Losses</td>
</tr>
<tr>
<td>Substance Use Module</td>
<td>Substance Use (History column)</td>
</tr>
<tr>
<td>Problematic Sexual Behavior Module</td>
<td>Date of most recent problematic sexual behavior</td>
</tr>
<tr>
<td></td>
<td>Describe the most recent behavior</td>
</tr>
<tr>
<td></td>
<td>Was sexual act against a family member?</td>
</tr>
<tr>
<td></td>
<td>Identify</td>
</tr>
<tr>
<td></td>
<td>Is the youth currently subject to the provisions of Megan’s Law?</td>
</tr>
<tr>
<td></td>
<td>What treatment/services have been tried in the past and have been helpful?</td>
</tr>
<tr>
<td></td>
<td>What treatment/services have been tried in the past and have not been helpful?</td>
</tr>
<tr>
<td></td>
<td>Recommendations for treatment approach</td>
</tr>
<tr>
<td></td>
<td>Relationship</td>
</tr>
<tr>
<td></td>
<td>Physical Force/Threat</td>
</tr>
<tr>
<td></td>
<td>Planning</td>
</tr>
<tr>
<td></td>
<td>Age Differential</td>
</tr>
<tr>
<td></td>
<td>Type of Sex Act</td>
</tr>
<tr>
<td></td>
<td>Temporal Consistency</td>
</tr>
<tr>
<td></td>
<td>History of Problematic Sexual Behavior Towards Others</td>
</tr>
<tr>
<td></td>
<td>Severity of Sexual Abuse</td>
</tr>
<tr>
<td></td>
<td>Prior Treatment</td>
</tr>
</tbody>
</table>
The rest of this section will review each tab of the assessment, followed by the modules.

V. Crisis Assessment Tool Tabs
Tabs are a design element used in assessments, plans and other areas of CYBER. It allows large quantities of information to be organized into domains, and allow the viewer to see one at a time. There are six (6) tabs in the standard CAT. Additional tabs (Modules) will appear if triggered (i.e. prompted to be opened) by answering specific questions with higher ratings (See The Modules).

Demographics
The Demographics tab pulls information directly from the Face Sheet of the youth’s record.

If the Face Sheet information changes after the assessment has been created (prior to submission), the user can update the information by clicking the “Refresh” button at the bottom of the Demographics tab.

The Demographics tab includes the following fields:

- Child Name, Address, City, County, State, Zip Code
- DOB
- Gender
- Race
- Medicaid Number
- Parent/Guardian Address, City, State, Zip Code
- Guardian Relationship
- Primary Phone
- Secondary Phone
- Assessor Username
- Assessor Name
- Assessor Agency
- Assessor Email
- Assessment Date – should be updated as needed; will automatically populate with the current date
- Assessment Completion Date – a required field
- Assessor Phone

Life Domain Functioning
The Life Domain Functioning tab, or domain, includes an Assessment Subtype menu at the top of the tab. This allows the user to select from three types of assessments:

1. **Initial** – the default assessment, the initial CAT is used at the time of the initial dispatch; the questions within any modules that are triggered (i.e. prompted to be opened) are optional with this subtype.
2. **No Contact** – used when the agency has lost contact with the family and is submitting a plan to transition the youth from services; validations have been removed from the assessment, allowing for minimal completion. Users are expected to document as much information as they have available.
3. **Update** – this assessment type is used when MRSS is preparing to transition the youth to another service or to the community; the questions within any modules that are triggered (i.e. prompted to be opened) are required unless otherwise noted.

![LIFE DOMAIN FUNCTIONING](image)

**Life Domain Functioning** includes the following rated questions/dimensions:

- Living Environment
- Interpersonal
- **Developmental Delay** - If this question is rated a 1, 2, or 3 rating, the associated I/DD module will open as a new tab.
- School Behavior
- Academic Achievement
- School Attendance
- Learning Disability
- Educational Agency Involvement
- **Medical** - If this question is rated a 1, 2, or 3, the Medical module will open as a new tab.
- **Physical** - If this question is rated a 1, 2, or 3, the Medical module will open as a new tab.
- Sleep
- Eating
- Sexual Health
- Bullied by Others
- Cultural Stress

There is a Spell Check at the bottom of this tab.

**Child Strengths**
This tab includes questions that look at the strengths of the youth and family or other important individuals in the youth’s life. This domain includes the following questions:

- Talents/Interests
- Optimism
- Resiliency
Note: depending upon the age of the youth, some of the questions may not apply (for example, a six-year old may not be optimistic due to their current circumstances but can understand the possibility of a future with fewer challenges; this information should be included in the comments area for the question on Optimism. Entering “youth is only six years old” is not sufficient.)

Child Behavioral/Emotional Needs
This tab will include questions on the youth’s needs in regards to their behavioral and/or emotional symptoms.

Note: Documenting only a youth’s diagnosis in the comments area for any question in this domain rated a 1, 2, or 3 may result in the return of the assessment and associated plan. For example: rating the Depression question a ‘2’ – Clear evidence of depression associated with either depressed mood or significant irritability, and entering “youth has a diagnosis of depression” is not sufficient information. The user should document how the youth is exhibiting the symptoms of depression and what the evidence is that supports the rating.

The rated questions include:

- Psychosis
- Impulsivity and Attention
- Depression
- Anxiety
- Oppositional Behavior (Compliance with Authority)
- Conduct
- Exposure and Response to Implicit Trauma – this type of trauma may not be obvious, but may be related to a situation that the youth was personally subject to or was a witness to such as multiple placements or caregiver loss.
- Exposure and Response to Explicit Trauma – this type of trauma refers to the youth’s experiences that may include abuse and/or neglect, witness to family violence and/or natural or man-made disasters.

Note: These two questions are looking for information regarding two distinct types of trauma; do not include the same information in the comments field for both

- Anger Control
- Gambling
- Technology

Child Risk Behaviors
This domain looks at the possible risk behaviors the youth is exhibiting, including suicidal thoughts/plans/actions, self-injurious behaviors and actual or threatened violence against others.

The questions in this domain are:

- Suicide Risk
- Self-Injurious Behavior
- Other Self Harm
- Danger to Others
- **Problematic Sexual Behavior** - Rating this question a 1, 2, or 3 will open the Problematic Sexual Behavior module.
- Flight Risk
- **Legal/Juvenile Justice** - Rating this question a 1, 2, or 3 will open the Legal/Juvenile Justice (JJ) module.
- Judgment
- **Fire Setting** - Rating this question a 1, 2, or 3 will open the Fire Setting module.
- **Substance Use** - Rating this question a 1, 2, or 3 will open the Substance Use module.

*Note: if the user is seeking Substance Use treatment for the youth, or if the youth is currently receiving treatment for substance use, this question must be rated a 1, 2, or 3 or the assessment and associated plan will be returned.*

**Caregiver Strengths/Needs**
This tab incorporates information targeted to communicate about caregiver strengths and needs. This domain specifically looks at the youth’s caregiver(s), where they are successful and where they have challenges and may need additional supports or assistance. The questions are:

- Natural Supports
- Caregiver Resourcefulness
- Supervision
- Involvement with Care
- Knowledge of the Youth's Strengths/Needs
- Caregiver Optimism (Hopefulness)
- Residential Stability
- Family Stress
- Physical/Medical
- Mental Health
- Substance Use
- Developmental
- Child/Adolescent Protection
- Military Transition
VI. The Modules

Additional modules may appear at the end of the CAT if they are triggered by information in the youth’s record or from responses to certain questions within the CAT. Modules will not be visible unless they are triggered. They will appear after the Caregiver Strengths/Needs tab and will remain open unless the specific, related trigger changes before the assessment is submitted (for example, if the user made an error in rating the Developmental Delay question a 1 instead of a 0 and corrects it, the I/DD module will then close and be unavailable).

The modules’ purpose is to gather additional, more detailed information to support or supplement the domains of the assessment and may indicate that additional evaluations are necessary.

For the Initial CAT, the modules are optional. The assessor should document as much information as they have available to them. Only the questions contained in the modules are optional in the Initial CAT; attempting to by-pass entering information for any questions outside of the modules will prevent the user from submitting or will cause PerformCare to return the treatment plan and assessment. For the Update CAT, the modules are required to be completed. All required questions must be completed in order for the assessor to submit the assessment.

Some of the modules are broken into two distinct sections. For those modules, the first section (Section I) will include questions that cover historical information; this section will ask for information on the youth’s treatment history, most recent incident that initiated the most recent episode of treatment, etc. The second section (Section II) will include questions that contain outcomes measurements; areas included will be how the youth is currently coping, the behaviors the youth is currently exhibiting, the influences that are currently in place, etc. The modules that have two sections are as follows:

- Trauma
- Problematic Sexual Behavior
- Legal/Juvenile Justice (JJ)
- Fire Setting

I/DD Module

- Triggered by the Developmental Delay question in Life Domain Functioning domain with a rating of 1, 2, or 3.
- The “I/DD Eligible” checkbox at the top of the tab will auto-populate if the youth has been deemed eligible by the Department of Developmental Disabilities (DDD), CSOC or PerformCare (based upon the External ID Information creating a DD Eligible indicator within the youth’s record).

Note: If the family has not applied for I/DD Eligibility, they should be informed about the DD eligibility application process. The application process and applicable documentation are posted on the PerformCare NJ website.

- I/DD Module Includes questions that cover the following areas:
  - Self-Care
  - Communication, Receptive and Expressive Language
  - Learning
  - Home Living
  - Social/Interpersonal Skills
  - Mobility
  - Leisure
Medical Module

- Triggered by the Medical and/or Physical questions in Life Domain Functioning domain with a rating of 1, 2, or 3.
- Contains a series of open text questions to document information, such as barriers to treatment for the medical condition or anticipated future needs due to the youth’s medical condition.
- Includes the following rated questions:
  - Pain
  - Impairment in Functioning
  - Access to Health Care
  - Youth Accountability for Medical Care Plan
  - Family Management of Medical Condition

Trauma Module

- Triggered by the Exposure and Response to Implicit Trauma and/or Exposure and Response to Explicit Trauma questions in the Child Behavioral/Emotional Needs domain with a rating of a 1, 2, or 3.
- Section I of the module does not include items tracked for the measuring of outcomes. Some of the items may occur or re-occur during the youth’s involvement with CSOC and may impact areas later in the module that do affect outcomes.
- Looks to gather information regarding services that previously attempted with the youth and the success of that treatment; also asks for treatment approach recommendations.
- Includes the following rated questions:
  - Sexual Abuse
  - Physical Abuse
  - Emotional Abuse
  - Neglect
  - Emotional Closeness to Perpetrator(s)
  - Medical Trauma
  - Witness to Family Violence
  - Witness to School and Community Violence
  - Natural or Man-Made Disasters
  - Witness/Victim to Criminal Activity
  - Parental Criminal Behavior
  - Disruptions in Caregiver/Attachment Loss
  - Traumatic Stress Symptoms including Traumatic Grief, Affective and/or Physiological Dysregulation, Re-Traumatization, Hyper-Arousal, Avoidance, Numbing, Reactive Sexual Behavior and Dissociation.

Substance Use Module

- Triggered when the Substance Use question in the Child Risk Behaviors domain is rated a 1, 2, or 3.
- First section gathers information regarding the youth’s substance use, active or historical, age of first use, last use, and amount used.
- Rated questions ask about the potential for withdrawal and environmental influences.
- The following rated questions are included:
  - Acute Intoxication or Withdrawal Potential
  - Frequency
  - Duration of Use
  - Environmental Influences
  - Substance Use and Risk Behavior
Problematic Sexual Behavior Module

- Triggered by the Problematic Sexual Behavior question in the Child Risk Behaviors domain.
- Seeks information regarding the most recent behavior including activity, circumstances, reasons and results. Also seeks information regarding the youth’s status with Megan’s Law and the youth’s past treatment history.
- Includes the following rated questions:
  - Relationship
  - Physical Force/Threat
  - Planning
  - Type of Sex Act
  - Temporal Consistency
  - History of Problematic Sexual Behavior Towards Others

Legal/Juvenile Justice Module

- Triggered when the Legal/Juvenile Justice question in the Child Risk Behaviors domain is rated a 1, 2, or 3.
- Gathers information regarding the most recent incident resulting in legal charges; documents the youth’s JJC Contact Person if the youth is incarcerated or the youth’s Parole/Probation Officer.
- Prior and current interventions must be documented.
- Includes the following rated questions:
  - Seriousness
  - History
  - Community Safety
  - Peer Influences
  - Parental Criminal Behavior
  - Environmental Influences

Fire Setting Module

- Triggered when the Fire Setting question in the Child Risk Behaviors domain is rated a 1, 2, or 3.
- Gathers information regarding the youth’s most recent fire-setting behavior. Also includes an assessment of the youth’s likelihood of future fire setting.
- Includes the following rated questions:
  - Seriousness
  - History
  - Planning
  - Use of Accelerants
  - Intention to Harm
  - Community Safety
  - Response to Accusation
  - Remorse
  - Likelihood of Future Fire Setting
Readiness for Adulthood Module

- Triggered for any youth 14 years of age and older based on date of birth entered on the Demographics tab.
- Gathers information regarding the youth’s ability to care for themselves independently in their community.
- Includes the following rated questions:
  - Autonomy/Independent Living Skills
  - Community Resources
  - Job Skills
  - Job Attainment
  - Job Functioning
  - Resourcefulness
  - Intimate Relationships
  - Residential Stability
  - Transportation
  - Educational Attainment
  - Career Interests
  - Vocational/Technical Training
  - Maintaining Physical and Psychological Treatment
  - Knowledge of Needs
  - Medication Adherence
  - Access to Healthcare and Other Benefits

*The final question asks if the youth/young adult is a parent. Answering ‘yes’ will automatically open the Parenting Module.

Parenting Module

- Triggers when the user answers “yes” to the “Is the youth/young adult a parent?” question at the end of the Readiness for Adulthood Module.
- Gathers information regarding the youth/young adult’s skills in caring for their child(ren); looks at how involved the youth/young adult is with the child and their ability to manage the needs of their child as well as their own needs.
- Includes the following rated questions:
  - Independent Parenting Skills
  - Demonstrated Parenting Ability
  - Balance/Organization
  - Hazards
  - Supervision
  - Identification of Community Resources
  - Involvement
  - Support
  - Judgment
  - Collaboration with Other Parent

VII. Action Buttons

The functionality buttons at the bottom of the assessment will remain locked at the bottom of the screen and will not move when the user scrolls the document.

Button functions are as follows:
- **Print** – a user can print the assessment once it has been submitted. The fields will be included in the default print.
The menu button to the direct left is where the user selects which print version they want to create. Print options are:

- Default – a print version of the full assessment with each question, rating option (indicating which options were selected) and entered comments.
- Rated Summary – a printout of the questions, the ratings only (not the associated text) and entered comments.

When a user chooses to print the assessment, it will automatically generate as a PDF so the user no longer has to export the document to print or save. *Note: depending upon the user’s system, the PDF may take a minute or so to load. Once it loads, printing should be a quick process.*

- **Cancel** – cancels any actions taken within the assessment and takes the user back to the Treatment Plans and Assessments screen.
  
  *Note: Cancel does not delete the assessment; the system will automatically save the assessment upon creation.
  
  To delete an assessment, the user will need to go into the assessment and select delete using the Select an Action menu.*

- **Save and Save & Close** - Navigating between tabs will auto-save the assessment, and in addition the assessment will be saved automatically upon creation. However, when working within a tab, the user should remember to save and save often as any disruption in work may cause a loss of information.

- **Review History** - will open a pop-up window with a history of the users that have owned the document and any action taken on the assessment such as transfer, return, submit.
  
  A Plan Level 1 user may find this functionality helpful when determining if their submitted CAT and Treatment Plan has been submitted to PerformCare by their manager or supervisor (Plan Level 2 or 3 user). This is also a useful screen to utilize when checking to see if the assessment and plan have been approved or returned

- **Update Status** - The Select an Action menu button is where the user selects the action or status, which will go into effect or take place once the user clicks this Update Status button. Options include:
  
  - **Delete** – a saved assessment can be deleted before submission
  - **Return** – used when the current owner of the assessment needs to return it to the author; typically used after the assessment has been submitted for internal review prior to final submission into CYBER.
  - **Submit** – submits the assessment either to an internal reviewer or into CYBER for association with a treatment plan.
  - **Transfer** – transfers a draft assessment to another user within the agency for review or additional work.

*Note: there is spell check functionality available at the bottom of each tab that will check the spelling all of the comment boxes within that tab.*
VIII. Plan Approval Window

Clicking the Plan Approval button displays the Plan Approval window.

The Plan Approval screen has multiple purposes depending upon how the user wants to manage their work and what the user’s role is within the system. The Plan Approval window shows the treatment plans and assessments that are in the system for the user’s agency. These are the current documents that are housed within your agency that have either not been submitted to CSA, or have been submitted and have been returned to the user’s agency and haven’t yet been resubmitted.

Users may utilize this window to manage their work. The My Plans portion of the window displays the plans and assessments that are currently assigned to the user. These may be items that are in draft and have not yet been submitted, or items that have been submitted but have been returned back to the agency (internally or by CSA) and have yet to be resubmitted. These may also include plans from a Plan Level 1 user within the agency that needs to be reviewed by a Plan Level 2 or Plan Level 3 user. Typically, individuals that are managers or supervisors are Plan Level 2 or Plan Level 3 users who utilize this window to monitor the plans and assessments that have been submitted to them for review prior to submitting them to CSA.

The Filtered Plans grid contains the PLAN, PLANTYPE, ASSIGNEDTO, RETURN HISTORY, YOUTH/CHILD, DUEDATE, REQUESTOR, AGENCY, DATESUMITTEDTOCSA, TREATMENTPLANID, CurrPGMIndicator, OrigPGMIndicator, and ASSESSMENTDATE fields. The user can click on any of the column headings (field names) to sort the records in the grid.

The My Plans grid contains the same fields as above and the records can be sorted by clicking on any of the column headings (field names).
• The PLANTYPE will indicate the name of the plan type and its status for example: “Crisis-Assmt - Assigned”, “IniICP-In Progress” Initial Individual Crisis Plan in Progress, “TICP - Returned” Transition Individual Crisis Plan Returned.
• The ASSIGNEDTO column will display the individual who started or authored the plan. If the plan or assessment was returned at all.
• The RETURN HISTORY will indicate the name of the individual who returned it to the author. Most of the times this will be a PC user’s name. If the document was returned internally within the program, it will have the name of the program manager.

Assigning Documents
Documents are assigned using the Filtered Plans grid. Keep in mind that Plan Level 1 users may assign documents only to themselves, and Plan Level 2, or 3 users can assign documents to other users in their agency. To assign a plan or assessment the user must first select the row indicating the document and then click the Assign button.

The Assign a user to the selected treatment plan document(s) pop-up window will display. Here the user can click the drop-down arrow to display a listing of provider ID’s from within their agency. Selecting the provider ID and then clicking the “Accept” button will assign the treatment plan or assessment to this individual. Clicking the “Cancel” button returns the user to the Plan Approval window. The ASSIGNEDTO column will change to the individual selected.

A user may also assign a plan or assessment to themselves by selecting the treatment plan or assessment in the Filtered Plans grid and clicking the Assign button. Once again, the “Assign a user to the selected treatment plan document(s).” pop-up window will display. Here the user can click the drop-down arrow, locate and select their name/provider ID, and then click the “Accept” button to assign the treatment plan or assessment to themselves. Clicking the “Cancel” button returns the user to the Plan Approval window. The newly assigned plan or assessment will appear in the My Plans grid for that user and the ASSIGNEDTO column will change to that user’s name.

To access the treatment plan or assessment, the assigned user can double-click on the record in the My Plans grid. This will open the treatment plan or assessment.
IX. References

PerformCare Website Training page http://www.performcarenj.org/provider/training.aspx

State of New Jersey Department of Children and Families
  o Children’s System of Care https://www.nj.gov/dcf/about/divisions/dcsc/
    • Further information regarding the philosophy, principles and purpose of the assessment tool.

PerformCare website:
  o Providers – Training Section: http://www.performcarenj.org/provider/training.aspx
    • Assessments: http://www.performcarenj.org/provider/training.aspx#assessment
  o Providers – Security Section
    • Instructional Guide for CYBER Security Administrators

PerformCare Customer Service
www.performcarenj.org/ServiceDesk/
1-877-652-7624