

# ORCHIDS-MDE Release Information

## August 3, 2009

### Why am I receiving this information?

A new version of ORCHIDS-MDE will be released in FamilyNet. We are making some improvements and fixing a few “bugs” in the data system. To access the new version, you do not have to do anything. FamilyNet will update itself automatically when you log in for the first time on or after Monday, August 3, 2009.

With each new release of ORCHIDS, you will receive this notice that describes new improvements and fixes in the system. Some of the improvements may have policy and practice implications and these improvements are identified under the section called “Policy/Practices Implications with System and Form Improvements”.

### How is this information relevant to me?

Information addressed in these release notes will be relevant to all ORCHIDS users, because the information given can be applied to nursing practice or the ORCHIDS-MDE System.

The information in this document will be broken into sections, and within each section items will be grouped, respectively, by “All Programs” or individual programs.

These sections are:

- Policy/Practice Implications with System and Form Improvements - This section includes policy/practice implications followed by any system and/or form improvements that are affected by a policy change. This section will be most relevant to the Nurses and Data Entry Staffs.
- System Improvements - This section addresses additional improvements in the system that were not affected by policy changes. This section will be most relevant to the Data Entry Staffs.
- Form Improvements - This section addresses Form Improvements that were not specified in the Policy/Practice Implications or System Improvements’ section. This section will be most relevant to the Nurses and Data Entry Staffs.
- Known Issues in the System - This section addresses known issues in the system. With each issue a solution or a workaround is provided. This section will be most relevant to the Nurses and Data Entry Staffs.

If there is no information to address within the section, it will be noted with “NO INFORMATION TO REPORT”.

## **Policy/Practice Implications with System and Form Improvements.**

### **Babies First!**

A new Risk filter category called “All Babies First Risks except X99”.

#### **Policy Implications:**

This filter option was added to improve capacity to review implementation of the High Risk Infant Screening Protocol. Using this new filter option will prevent data about clients who are enrolled in the HRI screening protocol from being diluted by data about clients whose plan of care did not include the HRI screening protocol. Using this new risk code filter option, in combination with the "Age(s) at Last Visit" filter, can show you which HRI protocol components are being provided for each outcome. Although this is an improvement to the report, this report remains challenging to interpret. Please do not hesitate to contact your regional nurse consultant or application support for guidance on interpreting the IOI Summary report.

#### **System Changes:**

In the IOI Summary Report, a new category, “All Babies First Risks except X99” appears in the “Risk(s)” filter. When a user selects this new category in the “Risk(s)” filter, the report will not include data about cases that have X99 recorded as a risk factor. Even when other risks are selected in combination with X99, such as X00 or A1, the case will not be included in the results. To see data about clients that were not enrolled in the HRI protocol (X99), but later were enrolled in the HRI protocol (X00), users must select only X00 in the “Risk(s)” filter.

### **Babies First! and CaCoon**

Case Closure Reason “10-Transfer to CaCoon”.

#### **Policy Implications:**

Previously, cases that transferred to CaCoon were closed with the reason “90 – Other”. Begin recording “10-Transfer to CaCoon” as the case closing reason whenever a client starts as a Babies First! client, but later becomes a CaCoon client. This will give us much better data about the number of babies who transition from Babies First! to CaCoon.

#### **System Changes:**

In the March 2, 2009, release, the case close reason “10-Transfer to CaCoon” appeared as an option in both the Babies First! and CaCoon Program. Although no CaCoon cases have been closed with reason “10- Transferred to CaCoon”, the system was fixed so that the case close reason only appears as an option to select in the Babies First! program.

### **MCM/MOP**

MCM V-Code changes.

#### **Policy Implications:**

The MCM V-Codes that have been approved to use by DMAP are:

- V22.0 - SUPERVISION OF NORMAL FIRST PREGNANCY
- V22.1 - SUPERVISION OF OTHER NORMAL PREGNANCY
- V23.3 - GRAND MULTIPARITY

- V23.41 - PREGNANCY WITH HISTORY OF PRETERM LABOR
- V23.49 - PREGNANCY WITH OTHER POOR OBSTETRIC HISTORY
- V23.81 - ELDERLY PRIMAGRAVIDA
- V23.82 - ELDERLY MULTIGRAVIDA
- V23.83 - YOUNG PRIMAGRAVIDA
- V23.84 - YOUNG MULTIGRAVIDA
- V23.9 - UNSPECIFIED HIGH-RISK PREGNANCY
- V24.1 - LACTATING MOTHER
- V24.2 - ROUTINE POSTPARTUM FOLLOW-UP
- V25.09 - OTHER FAMILY PLANNING ADVICE

**System Changes:**

Thirteen other MCM V-Codes (or Diagnosis Codes) are discontinued. Any old entry that shows these discontinued codes will continue to display on the screen. However, if these older visits are rebilled, ORCHIDS will prompt with a validation message stating that the V-Code is no longer available and the system will force the user to choose a valid V-Code. For new entry, discontinued V-Codes will not appear in the drop down menu.

**The following V-Codes are discontinued:**

- V23.0 - PREGNANCY WITH HISTORY OF INFERTILITY
- V23.1 - PREGNANCY WITH HISTORY OF TROPHOBLASTIC DISEASE
- V23.2 - PREGNANCY WITH HISTORY OF ABORTION
- V23.5 - PREGNANCY WITH OTHER POOR REPRODUCTIVE HISTORY
- V23.7 - INSUFFICIENT PRENATAL CARE
- V24.0 - IMMEDIATELY AFTER DELIVERY
- V25.01 - PRESCRIPTION OF ORAL CONTRACEPTIVES
- V25.02 - INITIATION OF OTHER CONTRACEPTIVE MEASURES
- V25.03 - ENCOUNTER FOR EMERGENCY CONTRACEPTIVE COUNSELING AND PRESCRIPTION
- V25.40 - CONTRACEPTIVE SURVEILLANCE, UNSPECIFIED
- V25.41 - CONTRACEPTIVE PILL
- V25.49 - OTHER CONTRACEPTIVE METHOD
- V25.9 - UNSPECIFIED CONTRACEPTIVE MANAGEMENT

**System Improvements...**

**Reports - All Programs:**

1. Client Population Summary Report: No changes were made to this report other than a few label changes and a new footnote. These changes were made to add some clarity on the data reported. The changes are:
  - The field, “Days Since Last Visit,” is now named, “Most Recent Visit by Client.” The word “Days” has been inserted in this field’s rows that show client counts and percentages.
  - The field, “Number of Visits,” is now named, “Number of Cases With\*.” The word “Visits” is inserted in the rows of data that show visit counts and percentages.
  - The new footnote, “\*These visit counts will change on cases that are still in progress,” is linked to the “Number of Cases With\*” field.

2. Unduplicated Client List: Changes were made to the Unduplicated Client List Report based on feedback from both local and state staff. See Figure 1 below.

- The column, “Date of Last Visit,” was relabeled “Most Recent Visit by Case.” The label change clarifies the term “Last Visit.” Users were assuming this column shows the *final* visit date for the case, when it actually shows the date of the *most recent* visit.
- You can now filter this report by individual staff. A new column, “Most Recent Visit by Staff” was added to the report. Filtering by a specific staff person then comparing “Most Recent Visit by Case” with “Most Recent Visit by Staff” shows if the selected staff person was the last to see a client.

Example: See Figure 1. Let’s assume this report was filtered for staff person Abby Addison. For Client A, you can tell Abby was the last staff person to see this client because the dates in the “Most Recent Visit by Case” column and the “Most Recent Visit by Staff” column *match*. For Client B, you can tell another staff person has seen this client more recently than Abby, because the date in the “Most Recent Visit by Case” column *is more recent* than the “Most Recent Visit by Staff” column.

Note: The default for this report is to show all staff.

- A new column “Number of Failed Visits” was added to the report, to show the number of failed visits for each case. The failed visits are pulled from the Location field on Visit Tab 3. Any Babies First! or CaCoon visit that is recorded with Location Code “8 – Client Not Home / Failed Visit” is considered a failed visit. Failed visits are not recorded in MCM or MOP.

Note: Dates of failed visits do not display in the “Most Recent Visit by Case” and “Most Recent Visit by Staff” columns. If a client had one recorded visit, and that visit was failed, both “Most Recent Visit” columns will be blank, “Number of Visits” will be 0, and “Number of Failed Visits” will be 1 (Example: see Client C on Figure 1).

Note: Visit counts on the Unduplicated Client List and the Client Population Summary will no longer match, because of how failed visits are addressed by the reports.

	Column Relabeled	New Column		New Column
	↓	↓		↓
Name	Most Recent Visit by Case	Most Recent Visit by Staff	Number of Visits	Number of Failed Visits
CLIENT A	04/06/2009	04/06/2009	14	2
CLIENT B	5/10/2009	02/12/2009	4	5
CLIENT C			0	1

**Figure 1: Unduplicated Client List Report – New and Relabeled Columns**

3. Unduplicated Client List: For clients with more than one case (MCM and MCM or MCM and MOP), the “Staff” filter was unable to sort out which home visitor belonged with each case.

The report was corrected and now the system is able to sort out which home visitor belonged with each case.

4. In the past, when a user selects “Unknown” in the “Risk(s)” filter, the filter was not able to sort out which risk factors belonged with each case. Now, the filter is able to sort out which risks belonged with each case. The following reports are fixed: Caseload, IOI Summary, Referrals In, Referrals Out, and the Unduplicated Client List Report.
5. The Mimic Reports (Client and Case) are now correctly displaying the Written and Spoken Language. In the past, the MIMIC Reports were incorrectly displaying the Written Language as the Spoken Language and the Spoken Language as the Written Language.
6. The Medicaid Billing Report – By Staff no longer appears as an option in the report drop-down menu. All information found on the Medicaid Billing Report – By Staff can be found on the Billing Report.

### **General - All Programs**

1. Attempting to save an invalid case start date or visit date now generates one simple error message that a general end user can understand. Users who have entered an unacceptable date in a date field will no longer see a database error 247 (that contains a lot of technical language) before they see a second, simpler message. Instead, users will see one simple message, such as “Case Start Date must be after January 1, 1900, and not a future date” or “Visit Date must be after January 1, 1900, and not a future date.”
2. When a user leaves the case tab and tries to save a case and the initial visit without entering the required case start date, the user no longer receives a long database error message. Instead, the user will see a simple message that says the case start date is invalid. When the user closes the error message, the case tab re-opens on the user’s screen, and the “Case Start Date” is highlighted.

### **Forms Improvements...**

NO INFORMATION TO REPORT.

### **Known Issues in the System...**

**Issue 1:** In the Unduplicated Client List report, why does the “Risk(s)” filter not revert back to “All Risks” after one report is generated and a new program is selected in the “Program(s)” filter for the next report?

**Solution 1:** This is a known issue and we are monitoring how problematic this becomes for our users. Currently, there is no fix for this issue, but as a workaround we ask that you check the Risk Filter to make sure the risks you want are selected before you generate the report.

**Issue 2:** I ran an Unduplicated Client List Report and a Client Population Summary Report. Why don’t the visit counts match?

**Solution 2:** Visit counts on the Unduplicated Client List and the Client Population Summary will no longer match. The Client Population Summary includes failed visits in the visit counts, but the Unduplicated Client List does not.

**For more information on Previous Release Note or to download the latest forms, please visit the ORCHIDS website at <http://www.oregon.gov/DHS/ph/ch/orchids.shtml>**

**Have questions or need more information? Contact ORCHIDS Application Support, (971) 673-0382 or [orchids.app-support@state.or.us](mailto:orchids.app-support@state.or.us)**