

## NYS-CRI Individualized Action Plan (Treatment Plan)

Enter a treatment plan in Avatar:

Name	Menu Path
NYS-CRI Individualized Action Plan	Avatar CWS / Treatment Planning <span style="color: red;">← Form</span>
NYS-CRI Individualized Action Plan <b>Report</b>	Avatar CWS / Treatment Planning <span style="color: red;">← Report for Annual, Initial, or Interim Types</span>
NYS-CRI IAP Review/Revisor <b>Report</b>	Avatar CWS / Treatment Planning <span style="color: red;">← Report for Review or Revision Types</span>

1. Select the client and click on NYS-CRI Individualized Action Plan.
2. Choose the client’s enrolled program in which to enter the IAP.
3. If a plan already exists, choose to Add or Edit.

There are six sections to complete:

Fill in all applicable fields in each section, beginning with IAP General Information:

Plan Types	Criteria - How will the provider/individual/guardian know that care has been completed or that a transition to a lower level of care change is warranted?
<b>Annual</b>	<p><i>For OMH Housing Programs for Children and Adolescents, Include a description of the skills needed to return home or into the community.</i></p> <p>Reduction in symptoms as evidenced by</p> <p>Enter accordingly... <span style="float: right;">Enter accordingly...</span></p> <p>Treatment is no longer medically necessary as evidenced by</p> <p>Attainment of higher level of functioning as evidenced by</p> <p>Enter accordingly... <span style="float: right;">Other Criteria</span></p> <p>Enter Discharge Plan here...</p>
<b>Initial</b>	
<b>Interim</b>	
<b>Review</b>	
<b>Revision</b>	

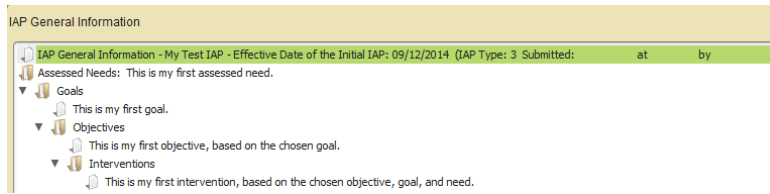
- **Tip:** To enter the IAP End Date, type t+90 (means today + 90 days), or enter the effective date+90.

**It is important to enter information into the sections in order:**

- **Assessed Needs** is the top level.
- **Goals** are based on Assessed Needs.
- **Objectives** are based on Goals and Assessed Needs.
- **Interventions** are based on Objectives, Goals and Assessed Needs.

**Note:** From any of these sections, click on **Display IAP Outline** in order to see the outline of any added items in a separate window. Click Return to exit the window.

Display IAP Outline



### Click on the Assessed Needs section

The Assessed Needs are available in the drop-down list from the NYSCRI Comprehensive Assessment\_2012.

1. Select a need and *Edit the Selected Assessed Need*. If a need is not present, *Enter a New Assessed Need*.
2. To complete entering a need, enter the date (defaulted as today) and choose a *Status* such as Active.
3. Click *Add to Plan*.

The need will appear in the drop-down list at the top.

To delete a need, select it and click *Delete the Selected Assessed Need*.

### Click on the Goals section

Be sure that the appropriate Assessed Need is chosen.

1. Select a goal and edit or enter a new goal.
2. To complete entering a goal, enter the date (defaulted as today) and choose a *Status* such as Active. Also enter target completion date and desired outcomes as applicable.
3. Click *Add to Plan*.

The goal will appear in the drop-down list at the top.

To delete a goal, select it and click *Delete the Selected Goal*.

### Click on the Objectives section

Be sure that the appropriate Assessed Need and Goal is chosen.

1. Select an objective and edit or enter a new objective.
2. To complete entering an objective, enter the date (defaulted as today) and choose a *Status* such as Active. Also enter target completion date and summary of progress as applicable.
3. Click *Add to Plan*.

The objective will appear in the drop-down list at the top.

To delete an objective, select it and click *Delete the Selected Objective*.

Click on the Interventions section

Be sure that the appropriate Assessed Need, Goal, and Objective is chosen.

1. Select an intervention and edit or enter a new intervention.
2. To complete entering an intervention, enter the date (defaulted as today) and choose a *Status* such as Active. Also enter target completion date, service description, frequency and staff responsible as applicable.
3. Click *Add to Plan*.

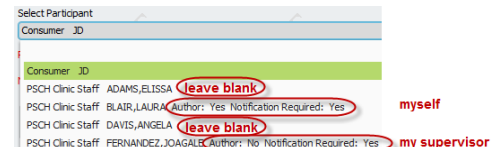
The intervention will appear in the drop-down list at the top.

To delete an intervention, select it and click *Delete the Selected Intervention*.

Click on the Participation section

**Following these steps is important to ensure that the printed report is signed accordingly.**

1. Choose a *Role* and enter the *Name* of the person participating.
  - If “Consumer,” “Family Member,” “Guardian,” “Other,” “Non-PSCH Staff,” or “State Representative” is chosen, type in the name of the consumer.
  - If “PSCH Clinic Staff” is chosen, *Select Staff Member* to populate the Name field.
2. Plan Author and Notification Required:
  - a. For **Completed By** signature: The person completing the IAP should choose **Yes** to Plan Author and **Yes** to Notification Required for their own name.
  - b. For **Supervisor** signature: The person completing the IAP should choose **No** to Plan Author and **Yes** to Notification Required for their supervisor’s name.
  - c. For any other Participant, leave the Plan Author and Notification Required fields blank.
    3. Click *Add*. Continue to select and add all applicable parties.



To make any changes to a participant, select the *Participant*, make the changes and click *Add*.

**Signatures for non-staff:**

Click *Sign* and use the signature pad attached to the computer to capture the client’s electronic signature. Any others’ signatures will be electronically signed on the printed form, so there is no need for any others to physically sign.

Save the Plan as Draft or Final

In the IAP General Information section, click Draft or Final status. Click Submit.

View and Print the treatment plan

Run the *NYSCRI Individualized Action Plan Report* (or *NYSCRI IAP Review/Revision Report* for Review or Revision types).

Double-click on a client to view the chart. Click on the *Individualized Action Plan* link.

## Routing the IAP for Approval

After clicking Submit, click Accept and Route in the *Confirm Document* screen. Enter Avatar password to begin the document routing process.

Approver	Final Approver	Notify	Title	Name
<input checked="" type="checkbox"/>		<input type="checkbox"/>	Supervisor	WILMA J FIVES (001867)
<input checked="" type="checkbox"/>		<input type="checkbox"/>	Staff	KYRA J PETERSBURG (001833)
<input checked="" type="checkbox"/>		<input type="checkbox"/>	Staff	LYDIA V EISENSTIEN (001877)
<input checked="" type="checkbox"/>		<input type="checkbox"/>	Staff	ZOE B EMERSON (001854)
<input checked="" type="checkbox"/>		<input type="checkbox"/>	Staff	ROBERTA F EVANS (002535)
<input checked="" type="checkbox"/>		<input type="checkbox"/>	Staff	LISA X FAUST (001862)
<input checked="" type="checkbox"/>		<input type="checkbox"/>	Staff	BELINDA Q FRITH (001847)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Staff	DOCTOR'S NAME (002716)

- A. Add a supervisor in the **Supervisor** field. The person will be denoted in the list by the Title of “Supervisor.” The Approver check box is automatically selected.
- B. Add other Staff members in the **Add Approver** field. They will be denoted by a Title such as “Staff” or “Caseload Practitioner.” The Approver check box is automatically selected.
- C. Select **Final Approver** next to the MD in the list.
- D. Select **Notify** next to anyone in the list who should receive additional notification after final approval.

### Approval Process after clicking Submit in the *Route Document To* screen:

1. A To-Do Notice is sent to the Supervisor only. The document can be accepted or rejected.
2. If the document is approved by the Supervisor, a To-Do Notice is sent to all Approvers included in the check box. The document can be accepted or rejected.
3. If the document is approved by all Approvers, a To-Do Notice is sent to the Final Approver. The document can be accepted or rejected.
4. If the document is accepted by the final approver, a notification is sent to staff members identified in the ‘Notify’ column.

The Chart View will indicate the document routing status:

Example of Final (ALL accepted):

Document Routing	
Status:	Final
Approvers:	
	HELOISA G ADAMS-Supervisor (Accepted)
	KYRA J PETERSBURG-Staff (Accepted)
	ALEXANDRA D ADAM-Final Approver (Accepted)

Example of Pending (not yet accepted by ALL):

Document Routing	
Status:	Pending
Approvers:	
	HELOISA G ADAMS-Supervisor (Accepted)
	KYRA J PETERSBURG-Staff (Pending)
	ALEXANDRA D ADAM-Final Approver (Pending)