## **Client Status Review**

Path: Client List  $\rightarrow$  Select or Create Client  $\rightarrow$  Activity List  $\rightarrow$  Outcomes  $\rightarrow$  CSR FY2011

## Prerequisite: You <u>must</u> have;

- $\checkmark$  Logged into the system.
- ✓ Selected a facility.
- ✓ Searched and retrieved an existing client record or created and saved a client profile if none existed.
- $\checkmark$  Completed a client intake.

## Introduction

The **Client Status Review** (**CSR**) measures the level of client function in several different life domain areas. The CSR was completely revised in 2010, and is labeled now in AKAIMS with FY 2011. If your agency uses a paper form, the text in the footer should say "Version Date: June 21, 2010." If it does not, all copies should be discarded and the new one printed to replace it. Blank forms are available in AKAIMS under Help - Forms.

1. From the Activity List, select Outcomes, and then select CSR FY2011, which will take you to the Client Status Review List screen. If you have completed any reviews previously you will see them listed here. Note: As a Condition of the Grant Award, all agencies receiving grants from the Division of Behavioral Health are required to complete Client Status Reviews (CSR FY2011) on every client. Types of CSRs in one Episode of Care must include one Initial CSR, one or more Follow Up CSR(s) Every 90–135 Days, and/or one Discharge CSR.



2. Click the <u>Add New Client Status Review</u> <u>Record</u> link to create a new review. You will be placed in the **Identifying Info** screen, the first of four related screens.

**Note**: You can review previous CSRs from this list or the Client Activity List. Click the link <u>Add New...</u> to create a new one.

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## AKAIMS

- 3. Type of Review: Select the appropriate choice from the drop-down list; the first CSR in a client file is "Initial". There can only be one Initial CSR in one Episode of Care.
- 4. Method of Administering: Select as appropriate from the drop-down list.
- 5. Administered By: This defaults to the user currently logged in. Select a different name if needed from the drop-down list.

- 6. Date Administered: This defaults to today's date - change if needed.
- 7. **Printing**: To print a *blank* form, on the first screen, click on PDF Version. To print a *completed* CSR for a paper file, click on Print Report.
- 8. Navigate to the other screens using the arrows or the left menu, and continue to enter the responses until you have filled in all of the required fields on all four screens.
- 9. All fields that allow numeric answers will accept "97", which counts as "unknown".
  - Save or Finish is not possible until all required fields on the four screens of this document are completed.
  - o Cancel erases all data entered and takes you back out to the CSR **FY2011** List.

**Note**: You can click the PDF Version link to open and print a blank paper copy of the form; this form is also available under Help – Forms. Clicking Print **Report** produces a PDF of the filled in form for printing and adding to a paper file. Check your paper CSRs for the date June 21, 2010 in the footer.

	User: Good, Liza, BHS Loc: State of Alsska, Administrative Facility Client: Silty, Rabbit I MS959915995100 I Case #: 3
$\smile$	Print Report Frint View Videos Help
Home Page	Identifying Info for Silly, Rabbit
Agency Services	Name: Silly, Rabbit Disks 00503 Dois: 55/1955
Group List	Audress, Izz Aliguest, Ali
Client List ▼	
Client Profile 🕨	Type of review makes
Linked Consents	Method of Administering in-person Uate Administered 9/20/2011
Emergency Services	Date of Last Review Date of Discharge
Activity List	<u>PUF Version</u>
Intake	Cancel Save Finish
Drug Testing 🕨	
Wait List	To print a completed
Tx Team	document, click here.
AST FY2011 Assessments	
Admission ►	To print a blank CSR
ECourt 🕨	form, click here.
Notes >	
Outcomes V	
GPRA ►	
CSR FY2011 V	
Identifying Info	
General2	
General3	
Discharge >	Date completed: / / Name
Referrals	Vale completed/ / / Ivanie Ivanie
Payments	If you are filling this out for someone else, please answer from their view. # of Days
Episode List	1. How many days during the past 30 days was your physical health (including physical illness and/or injury)
System Administration  My Settings	not good?
Reports	2 How many days during the part 20 days was your mental health (including depression and/or problems with
Support Ticket	2. How many days during the past so days was your mental neuron including depression and/or problems with emotions, behavior, or thinking <b>not</b> good?
	<ol> <li>now many days during the past so days did poor physical or mental health keep you from doing your usual activities, such as taking care of yourself work or recreation?</li> </ol>
	A How many days during the past 30 days have you had thoughts about suicide or hurting yourself?
	5. How many days during the part 30 days have you used alcohol?
	5. The many deployment past 50 days have you used account
	b. How many days during the past 30 days have you used illegal drugs (including medications not as prescribed/directed)?
	<ol> <li>In the past 30 days, how many times have you used emergency medical services such as the hospital, emergency room, emergency medical technicians or health aides for physical, substance abuse, or mental health problems?</li></ol>
	8. Which one of the following best describes your living arrangement in the past 30 days? (please check one)
	Adult in private residence – independent living     Crisis residence (short term stabilization)
	(house, apartment, trailer, hotel, room, etc.) 🛛 Residential care facility (assisted living halfway house, group homes
	Adult in private residence – dependent living
	(house, apartment, trailer, hotel, room, etc.)
	Child living with family/extended family or with
	two