# 8 Entering and Working with People

CFAL contains two data entry forms and several associated sub-forms to use for recording our one-to-one work with people. The two data entry forms used for entering and working with people are the Parent to Parent form and the People form. The Parent to Parent form is a customized form that accommodates the needs of Parents to Parent of New York State. Nearly all of the information we need to enter and work with people can be accessed through the Parent to Parent form.

### 8.1 The Parent to Parent form

The Parent to Parent form allows basic intake to be accomplished quickly. It allows the user to enter/view information about the Person with Special Needs (PWSN) on the same screen as the Parent/Caregiver. Referral information can also be entered/viewed from the Parent to Parent form.

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Our most frequently used sub-forms, such as case Notes, can be easily accessed from the Parent to Parent form. When necessary, quick and easy access to the People form is possible by a click of the button.

### 8.1.1 Search for a Person

The first step to working with people in CFAL is to see if the person is already in the database. Use the top section of the Parent to Parent form to search for people. Search for the person either by viewing a drop-down list all the people in your database or by typing in the person's last name and viewing all the records returned with a matching last name.

#### To view the drop-down list of all the people in the database

either hit the F5 key on your keyboard or click the [F5] Find button on the screen to open the Find Person window. Only the selected record will be displayed. (Type the first few letters of the name in the box to speed navigation in the drop-down list.)

| Find Person   |                |
|---|----------------|
| Type the first few characters of<br>the person's last name or select it | <u>0</u> K     |
| from the dropdown list.   | <u>C</u> ancel |
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|   |                |

To search by last name click in the box next to "Last Name" at the top of the form, type the last name and hit the Enter key on your keyboard.

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| Contact <u>T</u> ype         | First Name                        |                                 | Last Name        | P <u>W</u> SN First Name | Last Na | ime C                | ate of Birth      | Age <u>F</u> emale             |
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| African-American             | ✓                                 |                                 | ×                |                          |         | v smp                | ~                 | Add PW/SN                      |

All the records in your database that match will be returned. Scroll through the records by clicking on the right arrow located next to the record number until the desired record is displayed.

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|---------|------|----------|
| Recora: | 14 4 | * OF 8   |

"Last Name" searches can utilize the wildcard character "\*", and are not casesensitive. For example, a search for "sm\*th" will return all records with last names "Smith" and "Smythe." You can enter as many wildcard characters in the search string as you wish. "Sm\*th\*" will return all "Smiths," "Smythes," and "Smithsons."

### 8.1.2 Entering People

If a person is not found in the database, follow these steps to enter them into CFAL:

- 1) In the Parent to Parent form, click the **New** button on the bottom right hand corner of the screen.
- 2) Select a Contact Type. When the Contact Type of Parent/Caregiver is selected, the field for First Name changes to Caregiver First Name and the fields for PWSN (Person with Special Need) First Name and Last Name become available.



Carol Coordinator says,

"If the person is both a professional and a parent/caregiver select parent/caregiver as the contact type. DO NOT make duplicate entries for the same person."

3) Enter the person's First Name and Last Name



Carol Coordinator says, "When entering a support parent, add an asterisk (\*) after their last name to help identify which parents are support parents when viewing the Excel spreadsheet for a possible match."

(See section 8.1.5.1 Search for Potential Support Parents)



Some users may prefer to continue entering information moving left to right using Tab or Enter while others choose to enter all the information for the Person with Special Need (see page 8-4) and then continue filling in the information for the Parent/Caregiver.

- 4) Address Notes:
  - a) The cursor will skip city and state fields and jump into the zip code field. After a zip code is entered into the database the city, state, and county or borough will automatically be entered in the record.
  - b) If Zip Code is not known, the State must first be selected and then the County can be selected from a drop-down list.
- 5) If an organization is selected from either the "Organization" or "Acronym" drop-down boxes, the address and telephone information for that organization will be used when running mailing labels. This should only be used with the contact type of Professional. Note that acronyms reference the same list as organizations; the list is provided as a shortcut method for ease of use.

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| Parent / Caregiver   | <ul> <li>Sandra</li> </ul>   | F                                      | eters                                | Emily            | У                                    | Peters                        |                    | 1/19/1995  | 13                             | Male             |
| Home Phone   | Work Phone   | Ext                                    | Other Phone                          | PW               | VSN Primary Dis                      | ability                       | Secondary Disa     | ability  | E <u>m</u> aii<br>speters6@ama | ail.com          |
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### 8.1.2.1 Entering a Person with Special Need (PWSN)

- a) Enter the PWSN First Name and Last Name. By default, the Caregiver's Last Name is copied into the Last Name field for the PWSN. It can be overwritten when necessary, by simply deleting the supplied last name and typing in the correct name.
- b) Enter either the PWSN date of birth <u>OR</u> their age. When date of birth is entered, CFAL automatically calculates the age. When the date of birth is left blank and an age is entered, CFAL enters and estimated date of birth using 01 as the month and 01 as the day.
- c) To enter disabilities, select the most appropriate choice from the drop down list. The choices include some more common specific diagnoses and some broad umbrella categories.

#### If there is an OMRDD eligible disability, make sure it is entered as the Primary Disability.

You may need to consult a medical dictionary or do a quick online search to translate what a parent indicates into a diagnosis category if the specific diagnosis is not on the list.

Here are some examples:

| Parents indicates: RENT PAR | Enter in CFAL as:            |
|-----------------------------|------------------------------|
| Atrophy of the cerebellum   | Brain Reduction or Deformity |
| Speech therapy OFNYS        | Developmental Language       |
|                             | Disorder                     |
| ADHD suspected              | Unknown – Presently          |
|                             | Undiagnosed                  |
| Legally blind               | Visual Impairment            |
| VATER syndrome              | Birth Defect                 |
| Hypothyroidism              | Disease/Medical Disorder     |
| Partial Trisomy 14          | Genetic Anomalie/Syndrome    |
| Batten Disease              | Metabolic Disorder           |

In these circumstances the specific information the parent indicated can be added as "Notes" under Additional Disabilities as described below.

Complete list of disabilities currently in CFAL can be found at the end of this section.

- d) Click the PWSN button. This creates a separate People Form for that PWSN which will be needed in the future.
- e) In instances where it is necessary to enter more specific diagnosis information or more than two disabilities, go to the People Form and use the search features to find the PWSN's People Form.
- f) On their People Form, click the "Additional Disabilities" button.

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| Last Name   | SSN  | Home Phone                    | Work Phone  | Last Search:  | Show All                   |
| 5] Find [F9] Peters   | [F10]  | [F11] [!                      | F12]  | ast Name: 2 records   |                            |
| Prefix First Name   | Lost Nome  | Organization                  | Date of Birth   | Ane Fet E   | nale St <u>a</u> ff        |
| Emily   | Peters   | v                             | 1/19/1995   | 13 🗆 🛛 Ha   | 🖌 smp 🔽                    |
| OCH 207 Have Dises  | West Direct  | Ed. Other Dhana East          | TRATO   | In East   | ans/Unknown                |
| (315) 347-3945  | (315) 379-1538   | Ext Other Phone Fax           | THYIOL  | speters@@ar   | nail.com                   |
| (010)011 0010   | (010) 010 1000   |                               |   | 00000000339   |                            |
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| Person with Special Need Ce   | rebral Palsy   | MM                            | ×   | <u>×</u>  | *                          |
| (Walver net Signed) Notes (F6) CFALID 207 Parent/Caregiver: Sandra Peters ID: 1- Notes Additional Duagaties Sandra Peters Logoption: Turnday, Hay 27, 200 | 2 Chr<br>Opened: 52708<br>43<br>Assistance<br>Exacerer Conuper Gode L<br>IUP | Letter 2 Report 3 Resurt      | GOAL STATUS - 1     Education History 1     Education History 1 | fotal: 0 Open: 0<br>dowing History Referance<br>(F3) Debries Negr | More Options               |
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| at search criteria - Name: Peters   |  |                               |   |   |                            |
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| visabilities — Emily Peters   | s  |                               |   |   |                            |
| ank Disability  | Severe Date  | Notes                         |   | Sta   | ff                         |
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| Cerebral Palsy  | S7277200   |                               |   | 31114   |                            |
| Visual Impairment   | ✓ □ 5/27/200   | 8 Cortical Vision Impairment, | legally blind   | smp   | *                          |
|   |  |                               |   |   |                            |
|   |  |                               |   |   |                            |

g) You may now edit the disabilities (remember F3 to edit) or add more disabilities by clicking the "New" button. When finished, exit back to the Main Menu and return to the Parent to Parent Form and recall the Parent/Caregiver's record to continue. h) If the Parent/Caregiver has more than one Person with Special Need, repeat steps 4a – g.

NOTE: Once the "Add PWSN" button is clicked in step 4d that PWSN information is safely stored in it's own record making it safe to delete the information on the first PWSN and enter a new PWSN in that section of the Parent to Parent Form. Once you have typed all the information for the new PWSN remember to click the "Add PWSN" button.

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| Contact Type Caregiver Eirst Name              | Last Name                      | P <u>W</u> SN First Name | Last Name                       | Date of Birth Age                    | • <u>F</u> emale |
| Parent / Caregiver 🖌 Janet                     | Wentling                       | Angela                   | Wentling                        | 10/1/2000 7                          | Male             |
|  |                                |                          |                                 |                                      |                  |

When more than one PWSN has been entered for a Parent/Caregiver, a note will appear in red at the top of the Parent to Parent Form alerting the user "Multiple PWSN".





When both parents are to be entered into CFAL, each parent must be entered individually. The PWSN gets entered on the Parent to Parent form of one parent, then when entering the second parent just go to "Relationships with Others" and select the PWSN from the drop-down list and type in the relationship.

### 8.1.2.2 Add Person to a Mailing List

If mailing labels need to be run for a group of people on a regular basis, one tool that CFAL provides to assist is Mailing Lists. Mailing Lists can also be used to send email to everyone on a mailing list. Some mailing lists have already been configured in CFAL and are available to use immediately. (i.e. Christmas Card, Newsletter)

To add a person to a mailing list, simply click the button labeled "Mailing Lists" and make the selection from the drop-down list. A person can be added to multiple mailing lists. When finished, click Exit.

| Cfal<br>Client Sandra Peters<br>Logged on: 04/28/2010 1 | <u>82</u>        | Mailing<br>Lists | R <u>e</u> lationship<br>s w/ People | <u>K</u> eywords | People<br>Form | N <u>o</u> tes | <u>R</u> eferrals | New | E <u>x</u> it |  |
|---|------------------|------------------|--------------------------------------|------------------|----------------|----------------|-------------------|-----|---------------|--|
| Record: 1   | <b>]</b> ▶* of 1 |                  |                                      |                  | -              | -              |                   |     |               |  |

### 8.1.2.3 Add Relationships with People

The Relationships with People sub-form allows any person in the database to be associated with the individual whose record is being viewed/edited. Select a person from the drop-down list then type the specific relationship in the Relationship field, such as son, daughter or grandchild, for example. By entering other relationships with people like Referral Parent or Support Parent a researchable history is built which can be very helpful for the Coordinator.

| E | ≡ R   | elationship Info Jim Test |                          |       | ×  |
|---|-------|---------------------------|--------------------------|-------|--|
| Г |       | People                    | Relationship             | Notes | Select as many people  |
|   | ►     | Test, Child1 🛛 👻          | Person with Special Need |       | from the list as you wish  |
| L |       | Test, Child2              | Person with Special Need |       | the relationship is  |
|   | *     |                           |                          |       | optional. To remove  |
|   |       |                           |                          |       | someone from the list,<br>select their name and<br>double-click or press F8. |
|   | 0.000 |                           | ¥] af 2                  |       | E <u>x</u> it  |

### 8.1.2.4 Add Keywords for Support Parents and More

Keywords provide a way to search for people and organizations. The same keyword list is used for both people and organizations.



Support Parents are identified by selecting the keyword "Support Parent" for that person. (Also see tip on page 8-3 after item #3.)



The Keywords sub-form allows any number of keywords to be selected and associated with any person or organization. However, be selective when associated keywords with people. Think about why one might need to find this person – what reason would you call on them for help? What special expertise or knowledge do they have that might be helpful to someone in our network at some point?



The Support Parent Family Information Form has a section for the parent to check off areas they knowledge of through their parenting experience. The items in that list match the keyword list in CFAL.

### Key Facts to Remember When Entering People

- Search first to make sure they are not already in CFAL.
- Click the New button to open a new record; hit F3 on keyboard to edit an existing record.
- Enter OMRDD eligible disability as primary whenever possible.
- To delete a person or blank entry, go to the appropriate People form and click the Delete button on that form.

### 8.1.3 Entering Case Notes

Case Notes is where crucial data is entered for reporting to funders on the services we provide and the time we spend providing those services.



Throughout CFAL there are many fields names "Notes" where general information can be entered. These are not to be confused with the case Notes button that opens the case Notes sub-form.



The case Notes sub-form:

| otes Jim Test  |  |   |                                     |  |                              |                 |
|--|--|---|-------------------------------------|--|------------------------------|-----------------|
| Category   | Date   | Hours   | Services                            |  | Grant Type                   | St <u>a</u> ff  |
| nitiai Entry 🔽   | 1172072007 10:41 AM  |   |                                     | ×  |                              | swt 🗸           |
| _ontact Type   |  |   |                                     |  |                              |                 |
| Apply to Goal:   |  |   |                                     |  |                              |                 |
| 47 L   |  |   |                                     |  |                              | <b>~</b>        |
| Notes Click here, press ALT-   | V or [F3] to edit existir  | ng notes. Clic  | k 'New' or pre:                     | ss ALT-N to w                                    | rite a new no                | te.             |
| Do not delete this record  |  |   |                                     |  |                              |                 |
|  |  |   |                                     |  |                              |                 |
|  |  |   |                                     |  |                              |                 |
|  |  |   |                                     |  |                              |                 |
|  |  |   |                                     |  |                              |                 |
|  |  |   |                                     |  |                              |                 |
|  |  |   |                                     |  |                              |                 |
|  |  |   |                                     |  |                              |                 |
|  |  |   |                                     |  |                              |                 |
|  |  |   |                                     |  |                              |                 |
|  |  |   |                                     |  |                              |                 |
|  |  |   |                                     |  |                              |                 |
|  |  |   |                                     |  |                              |                 |
|  |  |   |                                     |  |                              |                 |
| Apply to these Core Services:  | □ <u>1</u> . Ad <del>v</del> ocacy □ ;   | 2. IL Skills  | <u>3</u> . Info & Refer             | rral 🗌 <u>4</u> . Pe                             | eer Counseling               |                 |
| Apply to these Core Services:<br>Click 'From' or press AL'   | <u>1. Advocacy</u>   | 2. IL Skills 🖂  | <u>3. Info &amp; Refer</u> ge.      | rral 🗌 <u>4</u> . Pe                             | eer Counseling               |                 |
| Apply to these Core Services:<br>Click 'From' or press AL<br>'rom 11/20/2007 Print   | ☐ <u>1</u> . Ad <del>v</del> ocacy ☐ ;<br>T-F to clear or edit rep   | 2. IL Skills  | <u>3</u> . Info & Refer<br>ge.      | rral 🗌 <u>4</u> . Pe                             | eer Counseling               |                 |
| Apply to these Core Services:<br>Click 'From' or press AL<br>rom 11/20/2007 Print<br>Preview                                 | 1. Advocacy     ;       T-F to clear or edit rep       Preview All     Preview       Notes     This Note                                     | 2. IL Skills  | <u>3</u> . Info & Refer<br>ge.<br>S | rral 🗌 <u>4</u> . Pe<br>pejl Check [F8]          | eer Counseling               | ) Exit          |
| Apply to these Core Services:<br>Click 'From' or press AL<br>rom 11/20/2007 Print<br>To 11/20/2007 Preyiew                   | 1. Advocacy       ;         T-F to clear or edit rep         Preview All Notes   | 2. IL Skills  | <u>3</u> . Info & Refer<br>ge.<br>S | rral 🗌 <u>4</u> . Pe<br>peļl Check [F8]          | eer Counseling<br>Delate     | ) E <u>x</u> it |
| Apply to these Core Services:<br>Click 'From' or press AL'<br>rom 11/20/2007 Print<br>To 11/20/2007 Preview<br>ecord: I I    | 1. Advocacy       ;         T-F to clear or edit rep         Preview All<br>Notes       Preview<br>This Notes         Notes       This Notes | 2. IL Skills ⊡<br>Fort date rang<br>Publish to<br>Web | <u>3</u> . Info & Refer<br>ge.<br>S | rral 🗌 <u>4</u> . Pe<br>peļl Check [F8]          | eer Counseling<br>Delete New | ) Exit          |
| Apply to these Core Services:<br>Click 'From' or press AL'<br>rom 11/20/2007 Print<br>To 11/20/2007 Preview<br>scord: II I I | 1. Advocacy       :         T-F to clear or edit rep         Preview All<br>Notes       Preview<br>This Notes         ▶       •              | 2. IL Skills  | <u>3</u> . Info & Refer<br>ge.<br>S | rral 🗌 <u>4</u> . Pe<br>pe <u>l</u> l Check [F8] | eer Counseling<br>Delate     | )<br>Egit       |

An "Initial Entry" record is automatically generated when an individual's data is first recorded. **Do not delete the "Initial Entry"** record, as it is used for reporting purposes.

Click the button labeled "New" to open a new case Note.

Version 4.30.2010

A case Note **must** be entered to record when a service is delivered through a 1:1 encounter with an individual. If more than one service was delivered then a case Note must be entered for each service.

### A case Note to record service delivery must have:

### Grant + Service + Time



Carol Coordinators says,

"Efforts to recruit new support parents get entered into CFAL as a case Note for the service of Information & Referral. They are not considered as recruited and in training until the completed Family Information Form is received."

A case Note may also be entered to record other information related to past or requested service such as attempts to contact or when a referral for a Parent Match has been discontinued. This type of case Note does not record any service delivery so there is no grant, service or time entered in the case Note.

A case Note that does not record service delivery = No Grant + No Service + No Time



A case Note must be entered for each contact. CFAL counts the number of case Notes as the number of contacts. If multiple contacts are grouped into a single case Note the number of contacts shown in the P2P Summary Report will not be accurate.



Multiple case Notes are required when more than one service is provided during one encounter.

To enter a case Note:

- 1) Press the New button to open a new case Note
- 2) We are currently not using the Category information in any way so it is okay to leave it as "General Case Note"
- 3) Edit the date if necessary
- 4) If this case Note is to record the delivery of a service then enter Hours, Service and Grant; if not then do not enter any of these.
- 5) Contact Type is an optional field that can be used to further categorize notes.
- 6) In the notes field enter a description of the service delivered or related information. (Keep It Short and Simple KISS.)

To delete a case Note, click the Delete button on the case Note form.



# PARENT TO PARENT

Carol Coordinator says, "Click Spell Check BEFORE exiting a note."

Key Facts to Remember About the case Notes sub-form

- Do not delete or overwrite the initial entry.
- Click the New button to open a new Note.
- To edit an existing record, hit F3 on your keyboard.
- A delivery of service = Time + Service + Grant

### 8.1.4 Entering Referrals

Use the Referral section of the Parent to Parent form to record any referrals made for an individual.

|                                  | 1 🖪 🗗 🚓 🕆 P B I             |                            | 7   🏦   🛌 🖂   🛅 🖬 🛛 🕘    | Ŧ                            |
|----------------------------------|-----------------------------|----------------------------|--------------------------|------------------------------|
| [F5] Find [F9]                   | ne Match Disabilit<br>[F10] |                            | Last Sear                | ch: <u>S</u> how Al          |
| Contact <u>Type</u> <u>First</u> | Name Last Nam               | e P <u>W</u> SN First Name | Last Name Date of Birth  | n Age <u>F</u> emale<br>Male |
| Home Phone Work                  | Phone Ext Other Ph          | one Primary Disability     | Secondary Disability Eg  | —<br><u>n</u> ail            |
| Address 1                        | Address 2                   | City                       | Chata Zia Zia0           | Country                      |
| Audīess 1                        | Audiess 2                   | City                       |                          | County                       |
| Ethnic Group Hisp                | oanic Domestic Status       | Organization               | Staff                    | Add PWSN                     |
| Notes                            |                             | •                          |                          |                              |
|                                  |                             |                            |                          |                              |
| [F6] CFAL ID (AutoN              | umber Opened: 4/30/10       | Closed: n/a                |                          |                              |
| How did you hear abou            | t us? Referred from Orga    | anization Referred to St   | aff Referred to Organiza | ition                        |
| Requested Complete               | d Service Note              | S                          |                          | •                            |
|                                  |                             |                            |                          | New Referral                 |
| Referred to Caregiver            | PWSN                        |                            | Family Mala Disability   |                              |
|                                  |                             | V Age                      | remale Male Disability   |                              |

Referral Section

### Use Referrals to:

 Flag incomplete service requests - If a request for service is not complete at the time of contact a "Referral to Staff" <u>must</u> be initiated.

**Parent Matching requests and new volunteers requesting Support Parent Training must have a referral.** The number of matches requested/completed and the number of new Support Parents is counted through referrals. Also, these services are likely to take some time to complete so it is good to utilize CFAL's reminder to follow-up on open referrals.

1) If known, enter either "How did you hear about us?" or "Referred from Organization".

- 2) Select the appropriate staff person in "Referred to Staff" (often yourself). If no one is selected then this referral will not appear as a reminder on anyone's list and is very likely to get neglected!
- 3) Enter "Requested" date
- 4) Select the "Service"
- 5) Enter descriptive notes
- 6) To make another referral, click the button to the right labeled "New Referral"



Carol Coordinator says,

"Remember to return to the referral and enter the 'Completed' date once the service has been delivered."

#### • Record where we refer people to.

Each time you refer someone to an agency, group, organization, etc. record it as **"Referred to Organization"**.

- If known, enter either "How did you hear about us?" or "Referred from Organization".
- 2) Enter "Requested" date and the "Completed" date (usually the same date)
- 3) In the field "Referred to Organization" make the appropriate selection.

If the organization is not in the database, you may wish to exit the current record, go to Organizations and enter it, then return to recording the referral to that organization.

4) To make another referral, click the button to the right labeled "New Referral"

"Referred to Caregiver" is used to record Support Parents who have accepted a referred parent thereby completing a parent match. (See section 8.1.5.2 Record a Completed Match)

#### • Record who is referring to us

"How did you hear about us?" and "Referred from Organization" can be entered in the same referral form as referrals made out staff or an organization. Or this information can be entered alone without any outgoing referrals having been made.

- If known, enter either "How did you hear about us?" or "Referred from Organization".
- 2) Enter "Requested" date and the "Completed" date (usually the same date)
- 3) To make another referral, click the button to the right labeled "New Referral"



Carol Coordinator says,

"When unable to complete a referral for parent matching or support parent training, go to the referrals sub-form and delete the referral. Then enter a case Note (without time, service or grant) noting the deleted referral and reason."

#### Key Facts to Remember When Recording Referrals

- Make sure the Requested date is correct.
- When the work is done for a referral you must enter a completion date.
- To refer someone to more than one organization click the button labeled "New Referral"

### 8.1.5 Using the Parent Matching Features

A few special features have been added to CFAL to accommodate the Parent Matching program of Parent to Parent of New York State. These features allow the coordinator to search for potential support parents and produce required data about completed parent matches.

### 8.1.5.1 Search for Potential Support Parents

On the top of the Parent to Parent form, in the field labeled "Match Disability" select the disability for which you hope to find potential Support Parents. Double click the "Excel" button to have all potential matches displayed in an Excel spreadsheet. A single click of the "Excel" button will cause all records that match the search request to be returned. Use the record navigator at the bottom of the form to scroll through each record returned.



**Note:** The results include all caregivers not just Support **Parents.** If the tip below from section 8.1.2 was followed when entering support parents, support parents can be identified in the spreadsheet by the asterisk after the last name.



When entering a support parent, add an asterisk (\*) after their last name to help identify which parents are support parents when viewing the Excel spreadsheet for a possible match. (See section 8.1.5.1 Search for Potential Support Parents)



Carol Coordinator says, "After identifying potential support parents, look for further information in each support parent's record to help determine the best possible match."

### 8.1.5.2 Record a Completed Match

When a Support Parent has accepted a Referral Parent, record the completed match in the Referral section of the Referral Parent's Parent to Parent form. (This is where match information is pulled from for reporting.)

#### **Referred to Caregiver**

From the drop-down list, which includes everyone in the database, select the Support Parent who accepted this Referral Parent.



For matches completed by referring to a Support Parent outside the region, select "Referral, External" from the drop-down list.

| Contact Type  |   |                    |                   | V Evce                     |        | Multiple PW    | SN LastN          | lame: 3 rec | cords     |          |
|---|---|--------------------|-------------------|----------------------------|--------|----------------|-------------------|-------------|-----------|----------|
| contact Type  | Caregiver First   | Name               | Last Name         | PWSN First Name            | Last N | lame           | Date of           | Birth       | Ane       | Female   |
| Parent / Caregiver  | Jim   |                    | Test              | Child2                     | Test   | ano            | 8/9/199           | 8           | 9.        | Male     |
| Ho <u>m</u> e Phone   | Work Phone  | Ext                | Other Phone       | PWSN Primary Disability    |        | Secondary Dis  | ability           | Ema         | ail       |          |
| (502) 499-1039  | (502) 412-4000  | 111                | (502) 345-0828    | Allergies                  | ~      | Angleman syndr | rome              | ~           |           |          |
| Address 1   |   | Address 2          |                   | City                       |        | State          | Zip               | Zip9        | County    |          |
| 1827 Bonnycastle  |   |                    |                   | Louisville                 |        | KY 💌           | 40205             |             | Jefferson |          |
| Ethnic Group  | Hispanic  | Domestic St        | tatus             | Organization               |        |                | Staff             |             |           |          |
| African-American  | <ul> <li>Image: A start of the start of</li></ul> | Married            | ~                 |                            |        | ~              | smp 🔽             |             | Add P     | wsn      |
| Notes   |   |                    |                   |                            |        |                |                   |             |           |          |
| [F6] CFAL ID<br>How did you hear about u  | 101<br>ıs?  | Opened<br>Referred | from Organization | : n/a<br>Referred to Staff |        | Referre        | ed to Organizatio | n           |           | ~        |
| Bequest Date  | C   | Hour               | s Notes           | ×                          |        | ×              |                   |             |           |          |
|   |   |                    | <b>~</b>          |                            |        |                |                   |             | New       | Referrar |
| Referred to Caregiver   |   | PWSN               |                   | Ane O                      | emale  | Male           | Disabi            | itu Corob   | ral Palay |          |
| Feters, Sanura  |   | rest, t            | Jilliuz           |                            | onuc   | - Huit         | Discon            | Celeb       | nai raisy | -        |
|   |   |                    |                   |                            |        |                |                   |             |           |          |
| Record: I 2   | ••••••••••••••••••••••••••••••••••••••  |                    |                   |                            |        |                |                   |             |           |          |
| Contraction of the second s |   |                    |                   |                            |        |                |                   |             |           |          |

The primary disability of the PWSN for which the match was based will be displayed by default. It can be changed simply by selecting a different disability from the drop-down list. Make sure the disability selected here is what the match was based upon.

If the Referral Parent has more than one PWSN, select the correct PWSN from the drop-down list. Make sure to select the PWSN which this parent match was regarding.

### 8.1.5.3 Sample Steps for Recording a Parent Match

- 1) Open Parent to Parent form
- 2) Search for parent requesting match, if not in CFAL open new form and enter their information
- 3) Make a Referral to Staff (yourself) with Requested date, select Service of Parent Matching. In the notes area of the referral section, enter information about the match sought
- 4) Open a case Note to record time, service and grant for the intake
- 5) Use the Match Disability search feature at the top of the Parent to Parent form to search for potential support parents.

May be able to telephone potential support parent directly from information on the Excel spreadsheet or may have to look into their record in CFAL for more information to determine match potential.

- 6) For each potential support parent contacted, enter a case Note in their record. Include time, service, grant and a descriptive note for time spent contacting them about the referral for Parent Matching.
- 7) Contact referral parent with information about their support parent. Enter this contact (time, service and grant) as a case Note.
- 8) When support parent accepts a referral, go to the referral parent's Parent to Parent form to enter "Completed" date and "Referred to Caregiver" information. Verify that the PWSN info next to "Referred to Caregiver" is correct for this match.

#### **Cross-Region Matches**

- 1) A Parent Match is only recorded at the point of origin -the office with the Referral Parent.
- 2) Contacts made with potential support parents are recorded by creating a case Note with time, service of Parent Matching, and grant.

# 8.2 The People form

The Parent to Parent form is specially designed for our use and is a companion to the more complex People form. A navigation button is provided on the bottom of the Parent to Parent form for easy access to the People form and all of its sub-forms. All of the information that is entered in the Parent to Parent form will also be accessible through the People form. The People form contains many more sub-forms for storing a great variety of information.

Currently we use the People form to:

- Search for people by Keyword
- Record additional disabilities and/or specific diagnosis
   information
- Delete a person from the database

### 8.2.1 Search for People by Keyword

The top of the People form is used for searching for a person. The [F5] Find feature here will give you a window with choices of how to find the person.

| Find Person         |                                 |
|---------------------|---------------------------------|
|                     | Retrieve records from database: |
| <u>C</u> FAL ID:    |                                 |
| By <u>N</u> ame:    |                                 |
| By <u>K</u> eyword: | <b></b>                         |
| From <u>Q</u> uery: |                                 |
|                     | <u> </u>                        |
|                     | <u>C</u> ancel                  |
|                     |                                 |

Select a Keyword to search for records with that Keyword, and click OK. All the records with that keyword will be retrieved. Use the record navigator at the bottom left corner of the form. Scroll through the records by clicking on the right arrow located next to the record number.

### 8.2.2 Add Additional Disabilities

An individual's primary disability and Secondary disability can be recorded on the Parent to Parent form. If additional disabilities need to be recorded, it can be achieved by using the Additional Disabilities sub-form accessed through the People form. Select the disability from the drop-down box, assign it a rank, enter the date and any notes as applicable. If the disability is considered to be severe, check the Severe box.

| 🖽 Disa       | bilities Jim Test    |                      |               |                   |                         |     |                | × |
|--------------|----------------------|----------------------|---------------|-------------------|-------------------------|-----|----------------|---|
| <u>R</u> anl | : <u>D</u> isability | Se <u>v</u> ere      | D <u>a</u> te | N <u>o</u> tes    |                         |     | Staff          | ^ |
| 1            | Allergies            | ✓                    | 11/20/2007    | <u></u>           |                         |     | smp 💙          |   |
| 2            | Angleman syndrome    | ✓                    | 11/20/2007    | Recorded by Phone | Referral Form           |     | ~              |   |
|              |                      |                      |               |                   |                         |     |                |   |
|              |                      |                      |               |                   |                         |     |                |   |
|              |                      |                      |               |                   |                         |     |                |   |
|              |                      |                      |               |                   |                         |     |                |   |
|              |                      |                      |               |                   |                         |     |                |   |
|              |                      |                      |               | IE31 Edit         | Spell Check [E8] Delete | New | Eivit          | 1 |
|              |                      |                      |               | [i 5] Euk         | opoir check [r of bolck |     | - <u>- 0</u> K | ~ |
| Record:      |                      | _ <b>[▶ _</b> ]▶*} o | f 2           |                   |                         |     |                |   |
|              |                      |                      |               | X                 | 17. <del>1</del> .      |     |                |   |
|              |                      |                      |               |                   |                         |     |                |   |

### 8.2.3 Delete a Person from the Database

A person or a blank record can not be deleted from the Parent to Parent form – it must be deleted from the People form. Simply locate the desired record from within the People form, then click the button labeled "[F8] Delete".

### **CFAL Disabilities List**

#### Umbrella Categories are in bold

Attention Deficit Disorder Attention Deficit Hyperactivity Disorder Allergies Angleman syndrome Anxiety Disorder Apert's syndrome Apraxia, verbal Arthrogryposis Multiplex Asperger's/High-Functioning Autism Asthma Autism Batten disease Bell's Palsv Bipolar disorder **Birth Defect** Blood disorder **Brain Reduction or Deformity** Central Auditory Procession Disorder Cerebral Palsy CHARGE syndrome Cleft Lip/Palate Club Foot/Feet Club Hand(s) Conduct Disorder Cri-du-chat syndrome **Cystic Fibrosis** Dandy-Walker syndrome Depression **Developmental Delay – NOS Developmental Language Disorder** Diabetes **Disease/Medical Disorder** Down syndrome Dwarfism Dyslexia Ehlers-Danlos syndrome Epilepsy Familial Dysautonomia Fetal Alcohol syndrome Fragile-X syndrome Friedreich's Ataxia Genetic Anomalie/Syndrome Hearing Impairment Holoprosencephaly Huntington disease Hydrocephalus

Hypotonia Infantile spasms Intellectual Disability Learning Disability – NOS Leukemia **Mental Health Disorder** Metabolic disorder Microcephaly Mitochondial disorder **Multiple Sclerosis** Muscular Dystrophy Neurofibromatosis Neurological Impairment Non-verbal (NOS) Noonan's syndrome **Obsessive Compulsive Disorder Oppositional Defiant Disorder** Organ Transplant Parkinson disease Pervasive Developmental Disorder Pica Pierre Robin syndrome Post Traumatic Stress Disorder Prader-Willi syndrome **Premature Birth** Reactive Attachment Disorder Reading Disorder **Receptive Expressive Language Disorder** Rett syndrome Scoliosis Noonan's syndrome Sensory Integration Dysfunction Sotos syndrome Specific Arithmetical Disorder Spina Bifida Tourette's syndrome Traumatic Brain Injury **Treacher Collins syndrome** Tumor – Cancerous Turner syndrome Sensory Integration Dysfunction **Unknown – Presently Undiagnosed Visual Impairment** William syndrome

## Keyword List

504 Accommodation Plans Adolescent Issues **Adoptive Parent** Advocacy Skills Assistive Technology Collaboration Early Intervention Program Educational Advocacy Employment/Vocational **Financial Assistance** Foster Parent Grand Parent Health Care Resource Parent Health Care Resources Home Medical Care Home Schooling Legal Rights Medicaid Service Coordination Mental Health Military Mobility/Accessibility Occupational/Physical Therapy **OMRDD** Provider Partners in Policymaking PTIC Lay Advocacy Record Keeping Recreation Respite **Sensory Integration** Siblings **Special Education** Speech Therapy Summer Camp Support Group Support Parent Training Transitioning Transportation Volunteers