Mental Health Assistant User Manual



December 2020 Revised: May 2024 Version 3.0

Department of Veterans Affairs Office of Information and Technology (OIT) Product Development

### **Revision History**

Date	Revision	Description	Author(s)
May 2024	3.0	YS*5.01*224 update MHA to further enhance the integration with MHC and adds new instruments. Updated Sections 1 thru 6. Replaced Section 5.3 with completely new data and associated Figures.	Booz Allen Hamilton
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June 2023	2.1	YS*5.01*208 update MHA Web to further enhance the integration with MHC and adds a new instrument.	Booz Allen Hamilton
January 2023	2.0	YS*5.01*204 updates MHA Web application to allow integration with the MHC application, adds new instruments. New sections: 3 and 7. Updated sections: 2, 3, 4, and 5. New figures: 6-9, 12-26, 30, 39-41, 46, 54-62, 79-82, 90-92, 95-102, 104-123, 135, 156-158. New figures: 6- 9, 12-26, 30, 39-41, 46, 54-62, 79-82, 90-92, 95-102, 104-123, 135, 156-158.	Liberty IT Solutions
October 2022	1.10	YS*5.01*202 enhances the MHA Web application with many updates including: MHA Dashboard is a new feature that is integrated into the MHA Web application along with new instruments, updates to graphing and other functionality. Modifying Progress Note filing to consolidate multiple instruments into a single Progress Note for Patient Entry, Adding the ability to print blank instrument/single instrument, Added category to NUDESC(Cognitive), SIP-AD-30(Sleep), SIP- AD-START(Sleep), and SWEMWBS(Quality of Life), Added Instruments EHS-14, PEB-27, WBS, ASRS and DAR-5, Added interpretive text for certain instruments in Special Reports, Update MCMI4 to allow up to 13 skipped questions, Updated favorites functionality to be included in the cog dropdown menu on MHA Web landing page, Special Reports - Added ability to create a single graph based on multiple scales. New sections are: 4.1.2 and 5. New Figures: Figure 28, 31, 34, 36, 42, 44, 51 & 94.	Liberty IT Solutions

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May 2022	1.9	YS*5.01*199 enhances the MHA Web application with many updates including: Multi- Instrument assignments consolidated into a single note in CPRS, Special Reports: Allow CAT/Non-CAT to be displayed simultaneously on Special Reports, Special Reports Stored as User Preferences, Batteries - Default the Battery group to expanded, Deactivate Print button when on Add Comments page, Staff Entry - Hide the options button, Update the Help PDF document, Add CCOW banner and icon, Graphing - Enable Personality instruments, Graphing – Dashed lines display after 10th item graphed, Graphing - Table scale group check box is non-functional, UI - Adjust instrument hover over to exclude some fields.	Liberty IT Solutions
January 2022	1.8	YS*5.01*187 enhances the MHA Web application with many updates including: Add the ability to save and get Instrument Report preferences, add Delete Instrument Administration for users with administrative access, add instrument full name and description, add user interface to configure and view Special Graph Reports, add the ability to configure batteries, Display Assignment Date in the Active Assignments, Update the High Risk/Positive response flags for instrument administrations, and Instrument graph enhancements. Updated sections are: 2.5.1, 2.5.3, 2.6.4, 2.6.5, and 2.6.6. Updated/new figures are: 59, 60, 61, 62, 63, 69, 80, 81, 82, 83, 84, 85, 86, 87, 88, and 89.	Liberty IT Solutions
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# 1. MHA

The Mental Health Assistant (MHA) application is the management tool for clinicians to create assignments for Veterans (both remote and inside a clinic) to complete, create and complete administrations through a Staff Entry interface, and review completed assessment reports. The MHA application was developed to create an effective and efficient tool for Mental Health (MH) clinicians and primary care clinicians to track assessment completion and administration trending. This provides MH providers and managers tools (i.e., reports, graphs, etc.) to ensure effective MH care for Veterans. MHA supports MH instruments (e.g., psychological tests, structured interviews, and staff rating scales). Pain assessments, nursing assessments, and additional instruments that are not available elsewhere in the Computerized Patient Record System (CPRS)/Veterans Information System and Technology Architecture (VistA) systems. Overall, MHA provides clinicians with a singular point for assessment assignment and report review from VistA data within a compact and user-friendly format. Core MHA has enjoyed widespread usage among MH clinicians over the past several years, and the current revisions of MHA and Mental Health Package (MHP) initiate steps toward re-engineering VistA Mental Health functionality.

The Mental Health Checkup (MHC) Provider Application and MHA have merged to allow providers to create assignments for Veterans to complete outside of the Mental Health Clinic. This merger gives the provider flexibility to monitor the Veteran as needed, instead of only during a Mental Health visit.

## 2. MHA Overview

MHA is divided into multiple logical sections. These sections are:

- MHA Banner
- MHA Patient Plan
  - Active Assignments
  - Completed Assignments
- MHA Dashboard
  - Review Assessment(s)
  - Missed Assignments
- Logout

## 2.1. Starting MHA

MHA is launched from the **CPRS Tools** menu (Figure 1). To begin, access the **CPRS Tools** menu and select **MHA**. The VA Single Sign-On page is displayed (Figure 2).

Note: Individual site CPRS Tools menu may be set up differently than the image below.

VistA CPRS in use by:	(vista.prescott.med.va.gov)	
File Edit View Action Options	Jools Help	
ZZTESTDOE, JANE (	Veteran Health Library	
-000-00-	VistA Imaging	
	Abbreviations	,
	After Visit Summary/Pre-Visit Summary	
	Agnie	
View Orders	-	
Active Orders (includes Pending &	Audiology	>
	Calculators	>
	Clinical References	>
	CPRS/VistA Training/Tech Resources	>
White Dialay and Ordera	Document/Image Capture	
Write Delayed Orders	ROES3	
Write Orders	DRM PLUS	
Clinician Orders	Event Capture Interface	
CLC Orders	EIM	
CCU Orders DNR Order	-	
Domicilliary Orders	GroupNotes	
Emergency Department	ICD-10	>
Speciality Clinic Orders	jMedConsent Web	
MHBS Orders	MHA Web	
Respiratory Orders Nurses Orders	MOVE!11	
Clerk Orders	My HealtheVet	
Allergy/Adverse Reaction	Pharmacy	,
Diet Order		
Meds DOM LTHM	Opioid Safety	,
Inpatient Respiratory Meds ED IMO	Primary Care Almanac	
Meds, Inpatient	NATIONAL LINES	>
Non-VA Medications (Documentati	Secure Messaging	
MEDS, OUTPATIENT	TBI_VIRP Intruments	
Infusion Lab Tests	Veterans Crisis Line Consult View	
VBECS Blood Bank Orders	XERO AGFA Imaging Viewer	
Imaging Orders	Accu-Check 360 Mini Client	
Consults	More	,
Procedure VITAL SIGNS	more	,
Word Processing Order	<u>G</u> raphing	Ctrl+G
HIV Screen by MD/PA/NP	Lab Test Information	
Wound Care	Options	
Telestroke	Digital Signing Setup	
VISN 22 Tele Urgent Care Menu Return To Clinic		
TestMenu	PDMP	>

### Figure 2 Single Sign-On Page



# 2.2. CCOW Information

Clinical Context Object Workgroup (CCOW) is the mechanism that allows MHA to follow patient changes that happen in CPRS. If the CCOW icon shows broken or banner (red or yellow) MHA cannot follow the patient change notification from CPRS. There are multiple conditions that can cause this issue.

## 2.2.1. CPRS Connected Context

If context is connected, an icon on the top left of CPRS displays a blue body with a linked chain (Figure 3). MHA responds to the patient changes made in CPRS.



### 2.2.2. CPRS Disconnected Context

If context is disconnected, an icon on the top left of CPRS displays multiple bodies with a broken chain (Figure 4), MHA will **NOT** respond to patient changes made in CPRS.

Figure 4 CPRS CCOW Not Connected



## 2.2.3. CPRS Rejoin/Reestablish Context

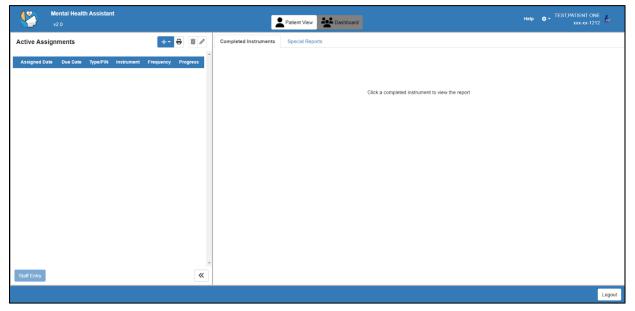
To reestablish patient context in CPRS, select File->Rejoin patient link->Use existing context. To create a new context in CPRS, select File->Rejoin patient link->Set new context (Figure 5).

_	Figure 5 Set	Context		
2	VistA CPRS in use by: (10.2	45.202.228)		
File	Edit View Tools Help			
	Select New Patient	A 2-C	No PACT assigne	
	Refresh Patient Information	der:	(Inpatient) Attendi	
	Rejoin patient link >	Set new cont	ext	
	Break patient link	Use existing (	context	
	Update Provider / Location	jies / Adverse React	tions	
	Review/Sign Changes	wberries		
	Next Notification			
	Remove Current Notification			
	Print Setup			
	Print Selected Items		nical Reminders	
	Print	Pri	epatitis C risk Factor imary Care Depress	
	Exit	SU	JICIDE HOTLINE	

## 2.2.4. MHA Connected Context

When launching MHA from CPRS, MHA will attempt to join the context session already established. If it is successful, the banner will not display any warnings (See Figure 6) and the CCOW connected icon (See Figure 6) will be displayed in the right-hand corner.

Figure 6 MHA Landing Page - CCOW Connected



## 2.2.5. MHA Unable to Connect to Context

When launching MHA from CPRS, MHA will attempt to join the context session already established. If it is unsuccessful, but not due to having multiple MHA instances open, the following window will be displayed (with the yellow banner).

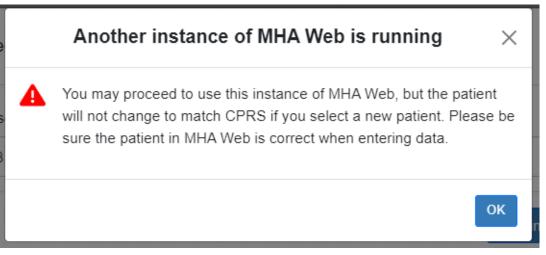
(		Mental He	alth Assi	sistant		Help	¢- <sup>TE</sup>	ST,PATIENT ONE xxx-xx-1212	64			
	Warning: This MHA Web window will not change patients with CPRS. Please verify you are working on the correct patient.											
A	Active Assignments 🕂 🖶 🗊 🖉			8 🗇 🦉	Completed Instruments	Special Reports						
	Assigned Date	Due Date	Type/PIN	Instrument	Frequency	Progress						
0	Dec 09, 2022	Dec 09, 2022	MHC	PHQ-9	Weekly	N/A		Click a completed instrument to view the report				
0	Dec 09, 2022	Dec 16, 2022	Staff	MCMI4	N/A	0%						
0	Dec 09, 2022	Dec 16, 2022	49607	ATQ	N/A	0%						
s	taff Entry					«						
							J					Logout

Figure 7 MHA Landing Page - CCOW Not Connected

### 2.2.6. Multiple MHA Instances Open

When launching MHA from CPRS, MHA will detect any other currently running instances and provide the user a warning (Figure 8) and then display a red notification on the banner (Figure 9).

### Figure 8 MHA Context Already Joined Message



		Mental He v2.0	ental Health Assistant 20 Patient View Dashboard						TEST,PATIENT ONE xxx-xx-1212	
			War	ning: This in	stance of MH	IA is unable t	to connect context with CPRS	as another instance is already connected. Please verify you are working on the con	rect patient.	
Active Assignments										
	Assigned Date	Due Date	Type/PIN	Instrument	Frequency	Progress				
С	Dec 09, 2022	Dec 09, 2022	MHC	PHQ-9	Weekly	N/A		Click a completed instrument to view the report		
C	Dec 09, 2022	Dec 16, 2022	Staff	MCMI4	N/A	0%				
C	Dec 09, 2022	Dec 16, 2022	49607	ATQ	N/A	0%				
	Staff Entry					«				
							1			Logout

#### Figure 9 Multiple MHA Instances Running

## 2.3. Login Options

There are 3 options for signing into the application using the VA Single Sign-On page:

- VA Personal Identity Verification (PIV) card (Figure 10).
- Windows Authentication (Figure 11).
- VA Network ID (Figure 11).

### 2.3.1. VA PIV Card

The most common single sign-on used is the VA PIV card validating user credentials with their VA PIV card Personal Identification Number (PIN).

\*\*\*NOTE\*\*\* The user must have associated the PIV card with the VistA instance being used, otherwise a Division Selection error will be received. \*\*\*

		Figure 1	<u>0 VA PI</u>	V Car	d Log	in		
ActivClient Lo						?		Х
ActivID* ActivCli	ent*							
Please enter y	your PIN.							
<u>- Fin</u>								
					<u>0</u> K		<u>C</u> ance	

### 2.3.1.1. Windows Authentication Network ID

The Windows Authentication sign-on option uses user credentials that were validated on initial login to the Veterans Administration (VA) network to validate their credentials/access to the application. The sign-in method used the least is the VA Network ID option, which is disabled for most users. This option requires a PIV exemption to gain access to the application.

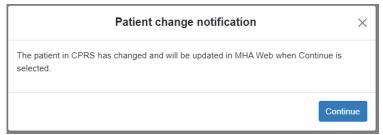


Figure 11 VA Network ID Option

## 3. MHA Banner

The MHA banner displays the **Help** and **Preferences** options, the currently selected patient's name and last 4 numbers of their social security number (SSN), and the CCOW status. All functions performed in MHA Patient View apply to the patient displayed in the banner.

Figure 12 Context Change Popup



There is an icon on the right side of the MHA banner that informs the provider of their CCOW connectivity. If the icon is blue with a connected chain link, the CCOW connection is active (Figure 13).

#### Figure 13 Connected CCOW Icon



If the icon displays 3 different colored figures with a broken chain link, the CCOW connection is inactive (Figure 14).

#### Figure 14 CCOW Not Connected



## 3.1. Help Link

Selecting the **Help** link within the MHA banner opens the MHA Quick Start Guide as a Portable Document Format (PDF) file. This PDF is used to give the provider an overview of MHA and its many features.



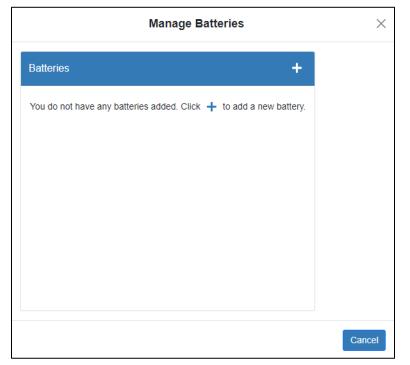
#### Figure 15 Quick Start Guide

## 3.2. Preferences

A **Preferences** button is available on the Banner to the left of the patient's name. Clicking the **Preferences** button accesses a dropdown menu where Batteries and Favorites can be configured.

### 3.2.1. Batteries

Batteries can be used to group instruments that are commonly assigned together. Clicking the **Preferences** button displays a dropdown menu where **Batteries** can be selected. This opens the **Manage Batteries** window.



#### Figure 16 Batteries - Initial Manage Batteries Window

To create a new Battery, select the + symbol. The **Battery Name** is a required field. If the user does not enter a Battery Name, an error message appears. Until the Battery Name is entered the Battery cannot be created.

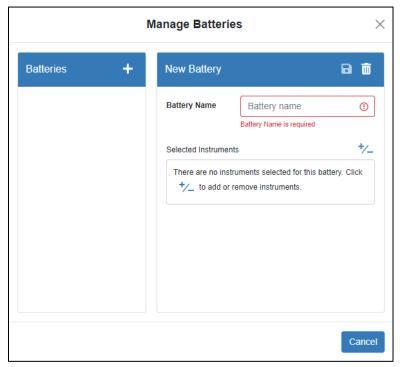


Figure 17: Batteries - Manage Batteries with Error Message

Selecting the  $\frac{1}{2}$  button brings up the list of all instruments to customize the Battery. Select the **B** button to save the Battery once the desired instruments have been added. A confirmation text is displayed to show the Battery has been created and the new Battery appears under the **Batteries** field.

Manage Batteries					
Batteries	+	Edit Battery		8 🗰	
Battery 1		Battery Name	Battery 1		
		Selected Instrume	ents	+/_	
	Battery is saved s	successfully BAM-C			
		BAM-C BAM-IOP			
				Са	incel

Figure 18: Batteries - Battery Creation Confirmation

Once a Battery has been created, the order of the instruments can be modified by selecting an instrument and using drag and drop to move it to the desired position.

The user can also delete batteries from the **Manage Batteries** window. Selecting the **b**utton causes a confirmation message to appear. Selecting **Delete** removes the selected battery.

Figure 19: Batteries – Delete Battery Confirmation

Delete Battery		×
Are you sure you want to delete this battery?		
	Cancel	Delete

Once a Battery has been created, it is ready to be used within the Create/Edit Assignment windows. The created Battery appears at the top left of these windows and can be customized using the normal workflow of MHA.

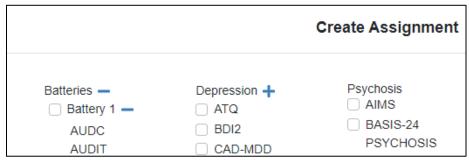


Figure 20: Batteries - Create Assignment Window

### 3.2.2. Favorites

Frequently used instruments can be configured from this interface. Favorites will allow preselected instruments to be placed in the Favorites category on the Assignment screens. You can have up to eight instruments in the Favorites list.

To add a new Favorite, use the Preferences icon and select Favorites.

Figure 21: Initial Favorites Interface

		Favorites		
Batteries	Depression +	Personality +	Favorites C	hosen
Addiction-SUD +	BDI2	MCMI3		
AUDC	CAD-MDD	MCMI4		
AUDIT	CAT-DEP	MMPI-2-RF		
BAM-C	Eating/Nutrition	Psychosis +		
BAM-IOP	CIA	AIMS		
ADL/Func Status +	EDE-Q	BASIS-24		
BARTHEL INDEX	EBP +	PSYCHOSIS		
CASE MIX	AAQ-2	BPRS		
G FAST	ATQ	BPRS-A		
IADL	B-IPF	Quality of Life +		
Anxiety/PTSD +	CEMI	B-IPF		
BAI	Employment +	NPO-Q		
CAD-PTSD-DX	EHS-14	D PHI		
CAT-ANX	ERS	Q-LES-Q-SF		
CAT-PTSD-E	IJSS	Recovery +		
CAT/CAD +	PEBS-20	BRS		
CAD-MDD	Frequent MBCs +	IMRS		
CAD-PTSD-DX	BASIS-24	ISMI		
CAT-ANX	DAR-5	MHRM		
CAT-DEP	ISS-2	Screening +		
Cognitive/Learning +	PCL-5 WEEKLY	ACE		
AD8	General Symptoms +	ASRS-6		
			*	
	View All Instrume	nts		

To add a new Favorite, click the box next to the instrument name. The instrument name will appear in the Favorites Chosen list.

		Favorites		>
Batteries Bad Battery + Addiction-SUD + AUDC AUDIT	Depression + ATQ BDI2 CAD-MDD CAT-DEP	Personality + MBMD MCMI3 MCMI4 MMPI-2-RF	Favorites Chosen      MBMD	
BAM-C BAM-IOP ADL/Func Status + BARTHEL INDEX CASE MIX FAST IADL Anxiety/PTSD + BAI CAD-PTSD-DX CAT-ANX CAT-PTSD-E CAT/CAD + CAD-MDD	Eating/Nutrition CIA EDE-Q EBP + AAQ-2 ATQ B-IPF CEMI Employment + EHS-14 ERS JJSS PEBS-20 Frequent MBCs +	Psychosis + AIMS BASIS-24 PSYCHOSIS BPRS BPRS-A Quality of Life + B-IPF NPO-Q PHI Q-LES-Q-SF Recovery + BRS IMRS		
CAD-PTSD-DX CAT-ANX CAT-DEP Cognitive/Learning + AD8	BASIS-24 DAR-5 ISS-2 PCL-5 WEEKLY General Symptoms +	ISMI	•	
	View All Instrume	nts		
			Cancel S	ave

Figure 22: Favorites Interface - Instrument Added

To add a new Favorite, click the box next to the instrument name. The instrument name will appear in the Favorites Chosen list.

Batteries				
	Depression +	Personality +	Favorites Chosen	
Addiction-SUD +	BDI2	MCMI3	MBMD	
AUDC	CAD-MDD	MCMI4	MBMD	
AUDIT	CAT-DEP	MMPI-2-RF	CAD-MDD	
BAM-C	Eating/Nutrition	Psychosis +	CAT-DEP	
BAM-IOP		AIMS	CAT-DEP	
ADL/Func Status +	EDE-Q	BASIS-24	CEMI	
BARTHEL INDEX	EBP 🕂	PSYCHOSIS	500	
CASE MIX	AAQ-2	BPRS	ERS	
FAST	🗌 ATQ	BPRS-A		
IADL	B-IPF	Quality of Life +		
Anxiety/PTSD +	CEMI	B-IPF		
BAI	Employment 🕂	NPO-Q		
CAD-PTSD-DX	EHS-14	🗌 PHI		
CAT-ANX	ERS	Q-LES-Q-SF		
CAT-PTSD-E	IJSS	Recovery +		
CAT/CAD +	PEBS-20	BRS		
CAD-MDD	Frequent MBCs 🕂	IMRS		
CAD-PTSD-DX	BASIS-24	ISMI		
CAT-ANX	DAR-5	MHRM		
CAT-DEP	ISS-2	Screening +		
Cognitive/Learning +	PCL-5 WEEKLY	ACE		
AD8	General Symptoms +	ASRS-6		
			*	
	View All Instrume	nts		

Figure 23: Favorites: Multiple Favorites

Drag and drop is used to adjust the order of the instruments in the Favorites Chosen list.

## 4. MHA Patient Plan

**MHA** has two separate functionalities, Patient Plan and Dashboard. The Patient Plan is applicable to the current patient in context while the Dashboard view provides a broader view of patient data and information.

- MHA Banner
- Active Assignments
- Completed Instruments
- Logout

# 4.1. Active Assignments Panel

The Active Assignments table displays assignments created for the Veteran, including Patient Entry (assignments completed by the patient inside of a VA clinic on an iPad or kiosk), Staff Entry (the provider records the answers for the patient) and Mental Health Checkup (MHC) assignments (assignments scheduled for the Veteran to complete remotely). These assignments can be edited, executed, or deleted, based on situational requirements. Reference the Edit an Active Assignment and Delete an Active Assignment sections of this document for more detail.

An icon *K* to collapse the **Active Assignments** field is located at the bottom right. This allows the user to have a better view of the data on the right side of the screen when viewing Reports, Graphs, etc.

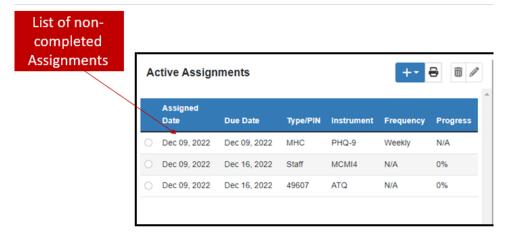
Active Assignments						
	Assigned Date	Due Date	Type/PIN	Instrument	Frequency	Progress
0	Dec 09, 2022	Dec 09, 2022	MHC	PHQ-9	Weekly	N/A
	Dec 09, 2022	Dec 16, 2022	Staff	MCMI4	N/A	0%
$\bigcirc$	Dec 09, 2022	Dec 16, 2022	49607	ATQ	N/A	0%
S	taff Entry					«

Figure 24: Active Assignments Table

### 4.1.1. Review Active Assignment(s)

When a provider creates an Assignment, the Active Assignment table is automatically updated with the new information. In-Clinic Assignments (Patient Entry or Staff Entry) can be edited or deleted until they have been started. Once an assignment has been started (Progress > 0%), it can only be deleted. Remote assignments (MHC) can be edited while displayed on the Active Assignments panel. Staff Entry assignments will also be displayed if they are not completed.





### 4.1.1.1. Edit an Active Assignment

To edit an active assignment, click the checkbox beside the desired assignment and select the edit icon  $\checkmark$ . Staff Entry assignments cannot be edited.

- 1. **Patient Entry Assignment** The Edit Assignment window appears (Figure 26) allowing the same functions as when creating an assignment with one exception, the Ordered By field cannot be changed. The Save button must be clicked to save any changes. The Cancel button closes the Edit Assignment window with no changes made. Either action returns the user to the MHA landing page.
- \*\*\*NOTE\*\*\* It is important to remember that an Assignment CANNOT be edited once it has started (anything above 0% complete). If an assignment is partially complete, the 'edit' option will not be available to the user. The only options are to complete the assignment or delete it.\*\*\*

Favorites	Depression 🕂	Psychosis	Instruments Cho	osen"
CEMI FAST IJSS PHQ9	ATQ BDI2 CAD-MDD CAT-DEP	<ul> <li>AIMS</li> <li>BASIS-24</li> <li>PSYCHOSIS</li> <li>BPRS</li> <li>BPRS-A</li> </ul>	AUDIT	* *
ADL/Func Status + BARTHEL INDEX FAST IADL KATZ-ADL-18PT Addiction-SUD +	EBP + AAQ-2 ATQ B-IPF CEMI Employment	Quality of Life + B-IPF NPO-Q PHI Q-LES-Q-SF	Add to Favorites Ordered By* Interviewer* Location*	Remove from Favo
AUDC     AUDIT     BAM-C     BAM-IOP	ERS IJSS Frequent MBCs + BASIS-24 ISS	Recovery + BRS IMRS ISMI MHRM	Date Consult	10/03/2021 Select Consult
Anxiety/PTSD 🕂	UISS-2		×	

- 2. **MHC/Remote Assignment** The Edit Assignment window appears (Figure 27) allowing the same functions as when creating an assignment with one exception, the Ordered By field cannot be changed. The Save button must be clicked to save any changes. The Cancel button closes the Edit Assignment window with no changes made. Either action returns the user to the MHA landing page.
- \*\*\*NOTE\*\*\* It is important to remember that an Assignment CANNOT be edited once it has started (anything above 0% complete). If an assignment is partially complete, the 'edit' option will not be available to the user. The only options are to complete the assignment or delete it.\*\*\*

#### Figure 27: Editing Scheduled Assignment

Edit Scheduled Assignment						
Instrument	Ordered By	Frequency	Response Window	How Many	Start Date	Instructions
EAT-29	ORACIMELISSA1	Orea 🗸 🗸	One Year 🗸 🗸	1	2823-87-28712-98-99-0082	
						Cancel Save

### 4.1.1.2. Delete an Active Assignment

To delete an active assignment, click the checkbox beside the desired assignment and select the **Delete** icon **Delete Assignment** (Figure 28) window appears allowing the provider

to review and confirm the assignment before deletion. To finish the deletion, the provider must select the **Delete** button. If the provider does NOT want to delete the assignment, they must select the **Cancel** button. Either action returns the user to the MHA landing page.

Delete Assignment						
Assignement ID	91996					
Instruments	IADL, AD8					
Ordered By	PROVIDER,ONE					
Interviewer	PROVIDER,ONE					
Location	MENTAL HYGIENE					
Cancel	Delete					

Figure 28: Delete Assignment Window

### 4.1.2. Print Blank Instruments

The user can print out blank instruments by selecting the button at the top of the Active Assignments panel. The user is taken to the Print Blank Instrument selection window where blank instrument(s) can be selected to be printed. Upon selecting the Print button at the bottom right, the user is redirected to the Print Preview screen. The print preview for a blank instrument is shown in Figure 29.

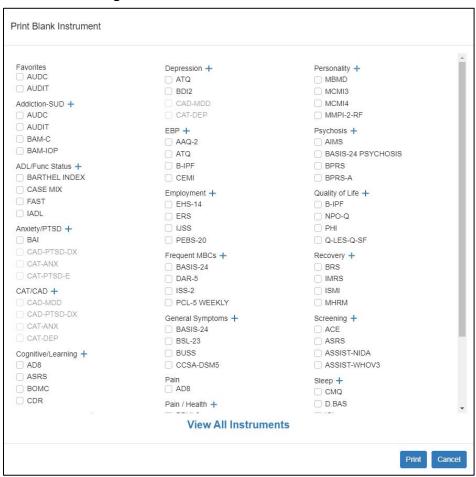


Figure 29: Print Blank Instrument Window

#### Figure 30: Sample Blank Instrument

1 of 12 Q	— 🕂 🤉 🖼   EB Page view   A® Read aloud   ED Add text   🖓 Draw 🗸 😾 Highlight 🗸 🖉 Erase   🖏   🗃
	The Alcohol, Smoking and Substance Involvement Screening Test
	Veteran's Name: Date:
	Veteran's DOB: Staff:
	Last 4 digits SSN: Location:
	Question 1: In your life, which of the following substances have you ever used? (Do not count
	Question 1. In your line, which of the following substances have you even used ( to not count medication taken as prescribed, but do record it here if taken more often, or at higher doses, than
	prescribed.)
	1a. Tobacco products (cigarettes, chewing tobacco, cigars, etc.)
	O 0. No
	O 1. Yes
	1b. Alcoholic beverages (beer, wine, spirits, etc.)
	O 0. No
	O 1. Yes
	1c. Cannabis (marijuana, pot, grass, hash, etc.)
	O 0. No
	O 1. Yes
	1d. Cocaine (coke, crack, etc.)
	O 0. No
	O 1. Yes
	1e. Amphetamine type stimulants (speed, diet pills, ecstasy, etc.)
	O 0. No
	O 1. Yes
	1f. Inhalants (nitrous, glue, petrol, paint thinner, etc.)
	O 0. No
	O 1. Yes
	1g. Sedatives or Sleeping Pills (Valium, Serepax, Rohypnol, etc.)

## 4.2. Creating Assignment(s) for Staff Entry and Patient Entry

MHA gives providers the ability to create assignments for patients to be completed inside of the Mental Health facility via Staff Entry or Patient Entry; or outside of the clinic on a Veterans Device (See Section 4.3).

## 4.2.1. How to Create a Staff Entry/Patient Entry Assignment

To create an assignment the user must select the Add Assignment icon +• above the Active Assignments table.

There will be two choices:

- VA Device/Staff Entry Assignments to be completed inside the VA facility.
- Veterans Device (MHC) Assignments to be completed on the Veterans Device outside of a VA facility.

Figure 31: Create Assignments Menu



The **Create Assignment VA Device/Staff Entry** window opens and displays a list of instruments as well as a section on information about the assignment. This is also the starting point for a staff entered assessment (for more information, see Section 5.1). The user can hover over an instrument to display the instrument's full name and can navigate to the ? to display greater detail on the instrument.

Batteries	Depression +	Personality +	Înstruments Cho	en*
Bad Battery +	ATQ	MBMD	instruments crio	sen
Favorites	BDI2	MCMI3		
AUDC	CAD-MDD	MCMI4		
D.ERS	CAT-DEP	MMPI-2-RF		
Q-LES-Q-SF	Eating/Nutrition	Psychosis +		*
NUDESC		AIMS	Add to Favorites	Remove from Favorites
Addiction-SUD +	EDE-Q	BASIS-24		
AUDC	EBP +	PSYCHOSIS	Ordered By*	
AUDIT	AAQ-2	BPRS		
BAM-C	ATQ	BPRS-A	Search by Lasin	ame,FirstName (no spac
BAM-IOP	B-IPF	Quality of Life +	Interviewer*	
ADL/Func Status +	CEMI	B-IPF	Search by LastN	ame,FirstName (no space
BARTHEL INDEX	Employment +	MIOS+B-IPF		, , , , , , , , , , , , , , , , , , ,
CASE MIX	EHS-14	NPO-Q	Location*	
FAST	ERS	PHI	Select a location	
IADL	U IJSS	Recovery +	Date	
Anxiety/PTSD +	PEBS-20	BRS		9.2
BAI	Frequent MBCs +	IMRS	03/15/2023	C
CAD-PTSD-DX	BASIS-24	ISMI	Consult	
CAT-ANX	DAR-5	MHRM	Colort Correct	
CAT-PTSD-E	0 199-2	· · ·	▼ Select Consult	~
	View All Instrum	onte		

Figure 32: Create Assignment Window

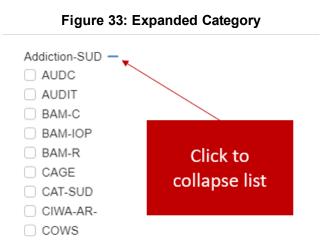
### 4.2.1.1. Create Staff Entry/Patient Entry Assignment Window

The Create Assignment Window is broken into three sections:

- Instrument Categories
- Assignment Options
- Action Buttons

### 4.2.1.1.1. Instrument Categories

The instruments are sorted into defined categories. If the user is unable to locate the desired instrument for the patient, the user can select the f icon next to a category to expand the list of instruments within that category. Inversely, if the user wants to reduce the list of instruments within a category, they need to select the field icon.



### 4.2.1.1.1.1. View All Instruments

If the user does not know which category the instrument(s) they are looking for are associated with, there is a **View All Instruments** option at the bottom of the screen that allows the user to list all available instruments in alphabetical order. To access the full list of available instruments, the user can use the scroll bar to move down the page to find the desired instrument(s).

ADL/Func Status +		PHI Q-LES-Q-SF	
CASE MIX FAST IADL	Employment + EHS-14 ERS IJSS	Recovery + BRS IMRS	•
	View All Instrum	ents	
			Click to remove grouping

#### **Figure 34: View All Instruments**

#### Figure 35: Staff Entry/Patient Entry Create Assignment Window with All Instruments Showing

AAQ-2	CSDD-RS	NEO-PI-3	Î	
ACE	CSI	NPO-Q	Instruments Chos	en*
AD8	CSI PARTNER	NUDESC		*
AIMS	VERSION	D PAI		
ASRS-6	CSI-4	PC PTSD		
ASSIST-NIDA	CSI-4 PARTNER	PC-PTSD-5		*
ASSIST-WHOV3	VERSION	PCL-5	Add to Favorites	Remove from Favorites
🗆 ATQ	D.BAS	PCL-5 WEEKLY	Add to Favorites	Remove from Favorites
AUDC	D.ERS	PEBS-20		
AUDIT	DAR-5	PEBS-27	Ordered By*	
B-IPF	EAT-26	D PHI	Search by LastNa	ame,FirstName (no space
BAI	EDE-Q	PHQ-15	late a device at	
BAM-C	EHS-14	PHQ-2	Interviewer*	
BAM-IOP	EPDS	PHQ9	Search by LastN	ame,FirstName (no space
BAM-R	ERS	POQ	Location*	
BARTHEL INDEX	FAST	PROMIS10	Select a location	
BASIS-24	FFMQ	PROMIS29 V2.1	Select a location.	
BASIS-24	E FOCI	PROMIS29+2 V2.1	Date	
PSYCHOSIS	FTND	PSOCQ	03/15/2023	
BBHI-2	GAD-7	PSS	03/13/2023	
BDI2	GAI	PSS-3	Consult	
BHS	GASS	PSS-3 2ND	Select Consult	~
- BOMC	GDS	O DIES O SE	·	

#### 4.2.1.1.1.2. View Instruments in Categories

If the user wants to return to the categorized view of the available instruments, they can select the **View Instrument Categories** option and the modal returns to the original display format.

<b>J</b> • •		5	
ASSIST-WHOV3	CSI-4	PCL-5	
ATQ	-4 PARTNER	PCL-5 WEEKLY	
□ AUDC Click a	dd rsion	PEBS-20	
🗆 AUDIT groupi	ng <sup>AS</sup>	PEBS-27	1
B-IPF	RS	D PHI	
🗆 BAI	DAR-5	PHQ-15	
BAM-C	EAT-26	PHQ-2	
BAM-IOP	EHS-14	PHQ9	
BAM-R	EPDS	POQ	
BARTHEL INDEX	C ERS	PROMIS29 V2.1	
BASIS-24	C FAST	PROMIS29+2 V2.1	
BASIS-24		PSOCQ	
PSYCHOSIS		PSS	
BBHI-2	C FTND	PSS-3	
BDI2	GAD-7	PSS-3 2ND	
BHS	🗌 GAI	Q-LES-Q-SF	Ŧ
View	w Instrument Cate	gories	

Figure 36: Add Instrument Grouping

		Create Assignment	
Batteries Bad Battery + Favorites AUDC D.ERS	Depression + ATQ BDI2 CAD-MDD CAT-DEP	Personality + MBMD MCMI3 MCMI4 MMPI-2-RF	Instruments Chosen*
Q-LES-Q-SF NUDESC Addiction-SUD +	Eating/Nutrition	Psychosis + AIMS BASIS-24	Add to Favorites Remove from Favorites
AUDC AUDIT BAM-C	EBP + AAQ-2 ATQ	BASIS-24 PSYCHOSIS BPRS BPRS-A	Ordered By* Search by LastName,FirstName (no spa
BAM-IOP	B-IPF CEMI	Quality of Life +	Interviewer* Search by LastName,FirstName (no spa
BARTHEL INDEX CASE MIX FAST	Employment + EHS-14 ERS	<ul> <li>MIOS+B-IPF</li> <li>NPO-Q</li> <li>PHI</li> </ul>	Location* Select a location
Anxiety/PTSD +	DIJSS PEBS-20	Recovery +	Date 03/15/2023
<ul> <li>BAI</li> <li>CAD-PTSD-DX</li> <li>CAT-ANX</li> <li>CAT-PTSD-E</li> </ul>	Frequent MBCs + BASIS-24 DAR-5	IMRS ISMI MHRM	Consult
	View All Instrum	ents	

Figure 37: Create Assignment Window with Groups Showing

### 4.2.1.1.2. Staff Entry/Patient Entry Instrument Chosen Field

Once the instrument(s) are selected, the user can see those instruments in the **Instruments Chosen** field on the right side of the **Create Assignment window**.

#### Figure 38: Instruments Chosen Field

# Instruments Chosen\*



### 4.2.1.1.2.1. Staff Entry/Patient Entry Instrument Ordering

The user is given the ability to adjust the order of the instruments by using the **Up** and **Down** arrows to prioritize the list of instruments in a multi-instrument assessment. There is also a **Delete** button that allows the user to remove instrument(s) from the list before creating the assignment. The user needs to select the instrument(s) they do NOT want to include in the assessment (instrument(s) is/are highlighted), and then select the **Delete** button.



### Figure 39: Instruments Chosen Field (Tools)

### 4.2.1.1.2.2. Staff Entry/Patient Entry Configure Favorites

MHA provides the functionality to add up to 8 items to a Favorites list.

- To add items to the Favorites list, the user must select the instruments from the **Create Assignment** window which adds them to the **Instruments Chosen** box. From the **Instruments Chosen** box, the user then needs to click the desired instrument (highlight) and click the **Add to Favorites** button.
- To delete instruments from the **Favorites** list, the user must select the instruments that already exist in the **Favorites** group, which adds the selection into the **Instruments Chosen** box. In the **Instruments Chosen** box, select (highlight) the instrument and click on the **Remove from Favorites** button to remove the instruments from the **Favorites** section.
- The user can also access the **Favorites** interface via the dropdown menu from the cog icon on the MHA Banner.
- If the user attempts to add more than eight instruments to the Favorites list, an error message will be displayed (Figure 40).

	Error		×	
Favorites -	The maximum number of instru	ments allowed in Favorites is 8		
🗹 ACE				<b>^</b>
ASSIST-NIDA			Close	亩
Z ASSIST-WHC		U	AUDC	
BASIS-24	CEMI	Q-LES-Q-SF	D.BAS	- <b>-</b>
BSL-23	Employment	Recovery 🕂	Add to Favorites	Remove from Favorites
BUSS	ERS			

#### Figure 40: Staff Entry/Patient Entry - Error Message - Maximum Number of Favorites

Favorites -
ACE
ASSIST-NIDA
ASSIST-WHOV3
BASIS-24
BSL-23
BUSS
ISS-2
PHQ9

Figure 41: Staff Entry/Patient Entry - Favorites List – Expanded

Figure 42:Staff Entry/Patient Entry - Favorites List - Collapsed View

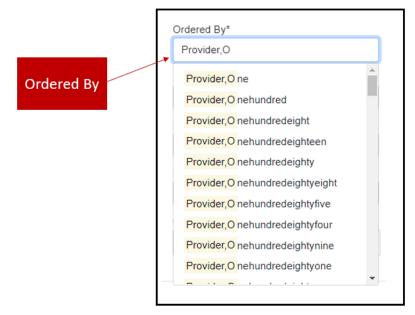
Favorites 🕂
ASSIST-NIDA
ASSIST-WHOV3
BASIS-24

### 4.2.1.2. Staff Entry/Patient Entry - Assignment Options

### 4.2.1.2.1. Ordered By (Instruments Ordered By)

The user must select the name of the person ordering the assessment and who will be responsible for signing any related **Progress Note**. The text search for this field is dynamic, and as soon as the user has entered at least 2 letters into the field, a list of possible matches will be returned in a dropdown field. Highlighting and selecting the name will finish the process of entering the **Ordered By** name. This is a required field.

\*\*\*NOTE\*\*\* The name is entered Last Name, First Name with no space in between the names. \*\*\*



#### Figure 43: Ordered By: Field

### 4.2.1.2.2. Staff Entry/Patient Entry Interviewer

The user must select the name of the person interviewing the patient for the assessment. The text search for this field is dynamic, and as soon as the user has entered at least 2 letters into the field, a list of possible matches is returned in a dropdown field. Highlighting and selecting the name finishes the process of entering the **Interviewer** name. This is a required field.

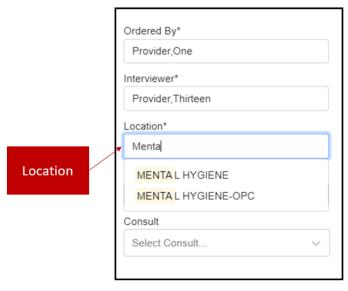
**\*\*\*NOTE**\*\*\* The name is entered Last Name, First Name with no space in between the names. \*\*\*



Figure 44: Interviewer Field

### 4.2.1.2.3. Staff Entry/Patient Entry - Location (Visit Location)

The user must select the name of the location of the assessment. The text search for this field is dynamic, and as soon as the user has entered at least 2 letters into the field, a list of possible matches is returned in a dropdown field. Highlighting and selecting the name finishes the process of entering the **Location** name. This is a required field.

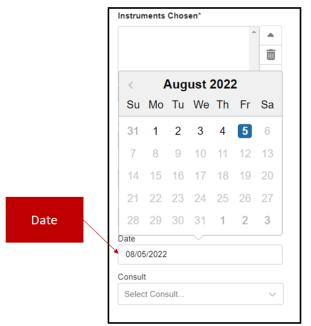


#### Figure 45: Location Field

### 4.2.1.2.4. Staff Entry/Patient Entry - Date (Date of Administration)

The user has the option to select a **Date** for the date related to the assessment. The **Date** can be selected by clicking the field and selecting the appropriate date from the displayed list. This is a required field.

#### Figure 46: Date Field



### 4.2.1.2.5. Staff Entry/Patient Entry - Consult (Link with Consult)

The user has the option to select a consult if there is a consult related to the assessment. The **Consult** can be selected be clicking the dropdown arrow beside the **Consult** field and selecting the appropriate consult from the displayed list. This is an optional field and is NOT required.

	Ordered By*
	Provider,One
	Interviewer*
	Provider, Thirteen
	Location*
	MENTAL HYGIENE-OPC
	Date
Consult	08/05/2022
	Consult
	Select Consult
	2/12/2019 (p) COMMUNITY CARE-DS
	ROUTINE NUTRITION Consult

Figure 47: Staff Entry/Patient Entry - Create Assignment - Consult Field

## 4.2.1.3. Staff Entry/Patient Entry Action Buttons

The following paragraphs detail the action buttons.

### 4.2.1.3.1. Staff Entry/Patient Entry Cancel

If the user does not want to continue with the creation of an assignment, they can select the **Cancel** button, which closes the **Create Assignment** window and returns the user to the **MHA** landing page.



Click to Cancel	
	Cancel Patient Entry Staff Entry

### 4.2.1.3.2. Patient Entry

When selecting the **Patient Entry** button, the application creates an Assignment ID that is displayed in a small window on the screen. This number is the **PIN** that is given to a patient so the patient can complete their assignment. For a more detailed explanation of the process for

using the Patient Entry application, reference the **MHA Patient Entry** section in this document.

Click to Create Patient Entry Assignment Cancel Patient Entry Staff Entry

Figure 49: Create Assignment - Patient Entry Action Button

#### Figure 50: Create Assignment - Patient Entry PIN

Assignment successfully created!	×
Assignment created with ID: 91996	
	Close

### 4.2.1.3.3. Staff Entry

When selecting the **Staff Entry** button, the application immediately launches the assessment in **Staff Entry** mode. This is the mode the clinician uses to complete the patient assessment. Further detailed information regarding this functionality can be found in the **Executing a Staff Entry Assignment** of Section **4.4**.

**\*\*\*NOTE\*\*\*** Multi-instrument Staff Entry assessment results will be consolidated into a single Progress Note upon completion. **\*\*\*** 

#### Figure 51: Create Assignment – Staff Entry Action Button



### 4.2.1.4. Create CAT Assignment

CAT assignments can only be used with Patient Entry or Staff Entry. The first step to creating a Computerized Adaptive Testing (CAT) assignment for a patient is selecting the desired instrument(s) for that patient. To select an instrument, the user must 'check' the box beside the instrument name. If more than 1 instrument is desired, the user must 'check' the box es beside all desired instruments.

**\*\*\*NOTE**\*\*\* The selection of a CAT instrument disables all non-CAT instruments from selection. **\*\*\*** 

PEBS-20		•	
Frequent MBCs 🕂	Q-LES-Q-SF	Instruments Chosen*	
BASIS-24	Recovery +	CAD-MDD	
DAR-5	BRS		
ISS-2	IMRS		Ĩ
PCL-5 WEEKLY	ISMI		
General Symptoms +	MHRM		•
BASIS-24	Screening +	Add to Favorites Remove from	Favorites
BSL-23	□ ACE		
BUSS	ASRS	Ordered By*	
CCSA-DSM5	ASSIST-NIDA	Provider,One	
Pain	ASSIST-WHOV3		
AD8	Sleen +	Interviewer*	
Pain / Health 🕂		Provider, Thirteen	
	D.BAS	Leastiant	
	□ RLS	MENTAL HYGIENE-OPC	
	Suicide Prevention	Date	
Personality		08/05/2022	
	_	00/00/2022	
	_	Consult	
	<u> </u>	Select Consult	
MMPI-2-RF			
		CAT Timeframe Past 2 week	s v
View All Instrume	ents	CAT Language English	~
	Frequent MBCs + BASIS-24 DAR-5 ISS-2 PCL-5 WEEKLY General Symptoms + BASIS-24 BSL-23 BUSS CCSA-DSM5 Pain AD8 Pain / Health + BBHI-2 COPD FTND HSI Personality + MBMD MCMI3 MCMI4 MMPI-2-RF	Frequent MBCs +       Q-LES-Q-SF         BASIS-24       Recovery +         DAR-5       BRS         ISS-2       IMRS         PCL-5 WEEKLY       ISMI         General Symptoms +       MHRM         BASIS-24       Screening +         BSL-23       ACE         BUSS       ASRS         CCSA-DSM5       ASSIST-NIDA         Pain       ASSIST-WHOV3         AD8       Sleep +         Pain / Health +       CMQ         BBHI-2       D.BAS         COPD       ISI         FTND       RLS         HSI       Suicide Prevention +         Personality +       BHS         MBMD       BSI18         MCMI3       BSS         MCMI4       C-SSRS	Frequent MBCs +       Q-LES-Q-SF         BASIS-24       Recovery +         DAR-5       BRS         ISS-2       IMRS         PCL-5 WEEKLY       ISMI         General Symptoms +       MHRM         BASIS-24       Screening +         BASIS-23       ACE         BUSS       ASRS         CCSA-DSM5       ASSIST-NIDA         Pain       ASSIST-WHOV3         AD8       Sleep +         Pain / Health +       CMQ         BBHI-2       D.BAS         COPD       ISI         FTND       RLS         HSI       Suicide Prevention +         Personality +       BHS         MBMD       BSI18         MCMI3       BSS         MCMI4       C-SSRS         View All Instruments

Figure 52: Create Assignment – CAT

### 4.2.1.4.1. CAT Timeframe

When administering a CAT instrument, the user is provided the opportunity to specify the timeframe related to the responses from the patient. If the user desires the answers to be associated with the patient's health over the past week, then the user can select **Past week**. There are several options available to the user for selection, but the default is **Past 2 weeks**.



CAT Timeframe	Past 2 weeks 🗸		
CAT Language	Past hour Past day Past week		
	Past 2 weeks		
Cancel	Past 30 days Past 12 months		
	Lifetime		

### 4.2.1.4.2. CAT Language

When administering a CAT instrument, the user is provided the opportunity to specify the preferred language for the patient. Currently, only the English version is available, but Spanish is being investigated for a future release.

Figure 54: Create Assessment – CAT Language

CAT Timeframe	Past 2 weeks	~
CAT Language	English	~

# 4.3. Creating Assignment(s) for MHC – on a Veterans Personal Device - Remote Administrations

The merger of MHA with MHC gives providers the ability to create assignments for Veterans to be completed via a Veterans Device outside of the Mental Health facility. To generate an assignment, all required fields must be completed and then the Schedule button must be selected. The provider can determine how the assignment is communicated to the Veteran (email, text message or both).

## 4.3.1. How to Create an MHC (Veterans Personal Device) Assignment

To create an assignment, the user must select the Add Assignment icon +• above the Active Assignments table.

There will be two choices:

- VA Device/Staff Entry Assignments to be completed inside the VA facility.
- Veterans Device (MHC) Assignments to be completed on the Veterans Device outside of a VA facility.



+-	
VA Device/Staff Entry	
Veteran's Device (MHC)	

The Create Assignment Veteran's Device (MHC) window opens and displays a list of instruments available to be sent to a Veteran, as well as a section on information about the

assignment. The user can hover over an instrument to display the instrument's full name and can navigate to the ? to display greater detail on the instrument.

<b>(</b>	Mental Health Assistant			Patient View	ashboard		Help	* TEST,PATIENT ONE
				Create Assign	nent			
	Any changes made will upd Patient email Enter email Patient phone 2 8008888888	nrol this patient into the SMS service if the				Filler Instruments	View All Instrumen	ts
	Favorites ATO AUD C D ERS PCL-5 Addiction-SUD AUD C AUD C AUD C AUD C BAM-C BAM-C BAM-C BAM-C BAM-C BAM-C SIP-AD-30 SIP-AD-START	ADL/Func Status WHODAS2.0-12 Anxiety/PTSD BAI CES D.ERS FOCI GAD-7 MISS PC-PTSD PC-PTSD-5 PCL-5 PCL-5 PCL-5 VEC-5 VEC-5 VEC-5 Cognitive/Learning NUDESC Couples/Family Func	Depression ATQ CESD DS ISS-2 PHQ-2 PHQ-2 SRCS EBP AAQ-2 ATQ B-IPF CEMI FFMQ NPO-Q SRCS	Employment ERS Frequent MBCs ISS-2 PCL-5 WEEKLY PHO9 PROMIS29 V2.1 WAI-SR General Symptoms BSL-23 BUSS CCSA-DSM5	Pain / Health BBHI-2 COPD HSI MHLC-C PPO PSOCO SF36 VR-12 WHYMPI Personality MCMI4 MMPI-2-RF Quality of Life B-IPF NPO-Q	Recovery BRS ISMI WHRM-10 WAI-SR Screening ACE ASSIST-NIDA AUDC C-SSRS CAGE EAT-26 PC-PTSD-5 PHO-2 PSS-3	Sleep CMQ D BAS Sli RLS SMEQ STOP Suicide Prevention C-SSRS P SS-3 SRCS	
								Logou

#### Figure 56: MHC Create Assignment Window

### 4.3.1.1. Create MHC Assignment Window

The Create Assignment Window is broken into three steps:

- Step 1 Select patient notification method
- Step 2 Select instrument
- Step 3 Schedule instrument(s)

#### 4.3.1.1.1. Step 1: Selection Patient Notification Method

Notifications can be sent to a Veteran two ways, via email or via text message. If the Veteran has an email or phone number that is currently available, they will be displayed with those defaults displayed and boxes already checked.

#### Figure 57: MHC - Select Patient Notification

Any	changes made will update their VA.gov profile.	
Patie	ent email	
2	test.patient@nowhere.gov	
Patie	ent phone	
	8888888888	

#### 4.3.1.1.2. MHC – Step 2: Select Instrument

The instruments are sorted into pre-defined categories. The instruments can also be displayed alphabetically by clicking the View All Instruments link at the top of the Select Instrument section. Instruments can also be searched for by entering the first few letters of the instrument name. To add an instrument to the schedule, click on the checkbox next to the instrument name.

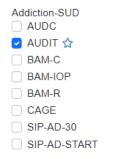
Figure 58: MHC - Select Instrument
------------------------------------

Step 2: Select inst	rument				Filter Instruments	View All Instruments
Favorites	ADL/Func Status WHODAS2.0-12	Depression	Employment	Pain / Health	Recovery BRS	Sleep
AUDC 💼	Anxiety/PTSD	CESD	Frequent MBCs	COPD	ISMI	D.BAS
🗆 D.ERS 💼	BAI	GDS	ISS-2	- HSI	MHRM-10	
PCL-5	CES	ISS-2	PCL-5 WEEKLY	MHLC-C	WAI-SR	RLS
Addiction-SUD	D.ERS	PHQ-2	PHQ9	PHQ-15	Screening	SMEQ
AUDC	- FOCI	PHQ9	PROMIS29 V2.1	POQ	ACE	SNQ
AUDIT	GAD-7	SRCS	PROMIS29+2 V2.1	PSOCQ	ASSIST-NIDA	STOP
BAM-C	MISS	EBP	WAI-SR	SF36	AUDC	Suicide Prevention
BAM-IOP	PC PTSD	AAQ-2	General Symptoms	VR-12	C-SSRS	C-SSRS
BAM-R	PC-PTSD-5	ATQ	BSL-23	WHYMPI	CAGE	PSS-3
CAGE	PCL-5	B-IPF	BUSS	Personality	EAT-26	SRCS
SIP-AD-30	PCL-5 WEEKLY	CEMI	CCSA-DSM5	MCMI4	PC-PTSD-5	
SIP-AD-START	PSS	FFMQ		MMPI-2-RF	PHQ-2	
	Cognitive/Learning	NPO-Q SRCS		Quality of Life	PSS-3	
	Couples/Family Func			NPO-Q		

### 4.3.1.1.2.1. Add Favorites

Favorites can be added inside of the Select Instrument section. To add an instrument to a favorite, click the checkbox beside the instrument and click the star beside the instrument name.

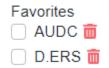
#### Figure 59: Add Favorites in MHC Create Assignment Screen



### 4.3.1.1.2.2. Remove Favorites

Favorites can also be removed inside of the Select Instrument section. To remove an instrument from the Favorites list, click the Trash Can beside the instrument name in the Favorites list.

#### Figure 60: Remove Favorites in MHC Create Assignment Screen



### 4.3.1.1.2.3. MHC - Schedule Instrument(S) Section

If the user does not know which category the instrument(s) they are looking for is/are associated with, there is a **View All Instruments** option at the bottom of the screen that allows the user to list all available instruments in alphabetical order. To access the full list of available instruments, the user can use the scroll bar to move down the page to find the desired instrument(s).

Figure 61: MHC - Schedule Instrument(s) – No Instrument Selected

Step 3: Sched	ule instrument(s)					
Instrument*	Frequency*	Response Window* 🚯	How Many*	Start Date* 🚯	Clinic*	Instructions
PSS	Select V	Select ~		05/04/2023	CC TXCW PACT BLU	

### 4.3.1.1.2.4. MHC - Schedule Instrument(s) Options

There are multiple decisions that must be made when creating remote assignment. These range from the instrument that is assigned to instructions that can be sent to the Veteran regarding completion of the assignment. The required field (fields marked with an \*) must be filled in to schedule the assignment. Each instrument in the assignment may have different selections for the parameters.

- Instrument An individual instrument (measure, test, etc.) to be assigned to the Veteran.
- Frequency How often should the instrument be sent to the Veteran.
- Response Window How long after the Veteran receives the assignment does it need to be completed. The response window will vary depending upon the Frequency of the instrument.
- How Many How many iterations of the instrument will be sent to the Veteran.
- Start Date When does the assignment begin. Can be the current day or a future date up to a year.
- Clinic The location that the assignment should be associated with. (Defaulted to the Location used in Staff Entry/Patient Entry assignments).
- Instructions Any specific instructions that the provider wants to send to the Veteran.
- Schedule To submit and schedule the instruments and create the assignments.

### Figure 62: MHC - Schedule Instrument(s) - Multiple Instruments Selected

Step 3:	Schedule	instrument(s)

Instrument*	Frequency*	Response Window* 🚯	How Many*	Start Date* 🚯	Clinic*	Instructions
PSS	Select ~	Select ~		05/04/2023	CC TXCW PACT BLU	
BAM-IOP	Select ~	Select ~		05/04/2023	CC TXCW PACT BLU	
CAGE	Select V	Select ~		05/04/2023	CC TXCW PACT BLU	4

### 4.3.1.1.2.5. MHC assessment completion

When a Veteran completes an assessment, an email notification will always be sent to the responsible Provider. If the Veteran assessment responses indicate suicidality, the email subject will state "MH Checkup Patient has indicated suicidality".

When the Veteran sees the completion screen and suicidality is indicated, a message will appear recommending them to contact their provider or the Veteran Crisis Line.

VAHealth	
MHA for Veterans	Crisis Support
Patient Health Questionnaire Depression Scale (PHQ9)	
Please follow-up with your provider to discuss assessment results	
Contact your provider directly or Call the Veterans Crisis Line at 988   press 1 🕿 or Text the Veterans Crisis Line at 838255 🗭 or Visit the Confidential Veterans Chat 🕑	
Score Severity	
Severe	
You report Severe symptoms of depression but you have also reported experiencing thoughts of suicide. You are advised to discuss these concerns with your ment you are concerned that you may have a medical emergency or are having thoughts of killing yourself or harming someone else, call 911, the Veterans Crisis Line (1 #1), or go immediately to the nearest hospital emergency room for an evaluation.	
You reported many of the symptoms of depression. These symptoms can be very distressing. Although many veterans/individuals cope well with symptoms like you suggests that they may be difficult to cope with right now. You are advised to discuss these concerns with your mental health provider.	s, your current report
It is important to note that this self-assessment cannot be used to make a diagnosis of depression; only a healthcare professional can do this.	
If you are concerned about any symptom, regardless of what the screen shows, you should seek further evaluation from your provider. If you are concerned that you emergency or are having thoughts of killing yourself or harming someone else, call 911, the Veterans Crisis Line (1-800-273-8255, press #1), or go immediately to the emergency room for an evaluation.	
Your score went up since the last time you took the assessment. It is likely that some things are bothering you more than before. Sometimes feelings get worse befor just keep working on your plans. An increase in symptoms can be a natural part of the process of recovery.	re they get better, so
Thank you. Your assessment has been submitted to your provider. Please note that your provider may not see this right away.	
U.S. Department of Veterans Affairs   810 Vermont Avenue, NW Washington DC 20420   Last reviewed/updated 03/2022   App Version: 2.21.0	

#### Figure 63 - MHA Patient Facing Application

# 4.4. Staff Entry – Executing a Staff Entry Assignment

Once the setup of an assignment has been completed and the user selects the **Staff Entry** button, the **Staff Entry** mode of MHA automatically launches and allows the user to begin completing assessment(s). Completing a multi-instrument assignment in **Staff Entry** creates a single Progress Note in CPRS if **Save Note** is selected after the administration is completed.

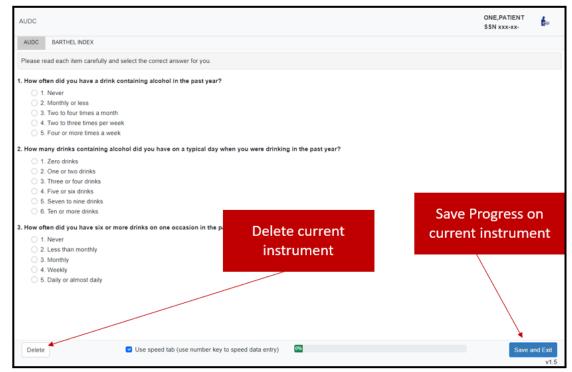
#### Figure 64: Staff Entry Execution Screen

AUDC	ONE,PATIENT SSN xxx-xx·	t.
AUDC BARTHEL INDEX		
Please read each item carefully and select the correct answer for you.		
1. How often did you have a drink containing alcohol in the past year?		
<ul> <li>1. Never</li> <li>2. Monthly or less</li> <li>3. Two to four times a month</li> <li>4. Two to three times per week</li> <li>5. Four or more times a week</li> </ul> 2. How many drinks containing alcohol did you have on a typical day when you were drinking in the past year? <ul> <li>1. Zero drinks</li> <li>2. One or two drinks</li> <li>3. Three or four drinks</li> <li>4. Five or six drinks</li> <li>5. Seven to nine drinks</li> <li>6. Ten or more drinks</li> <li>8. Ten or more drinks on one occasion in the past year?</li> <li>1. Never</li> <li>2. Less than monthly</li> <li>3. Monthly</li> <li>4. Weekly</li> <li>5. Daily or almost daily</li> </ul>		
	_	
Delete 🕑 Use speed tab (use number key to speed data entry) 🕅	Save a	ind Exit v1.5

## 4.4.1. Delete

If the provider decides they do not want to complete the assessment, they can select the **Delete** button at the bottom of the **Staff Entry** page. The provider is returned to the MHA landing page and **Staff** assignment is not created in the **Active Assignments** table. In the event there are multiple instruments in the assignment, **Staff Entry** takes the user to the next instrument in the assignment after selecting **Delete**. This continues until the user has deleted all instruments in the current assignment (Figure 65).





## 4.4.2. Save and Exit

If the provider decides to leave the administration and wants to save the results entered, or save the administration for later completion, they can select the **Save and Exit** button at the bottom of the page (Figure 65). Staff Entry presents the user with a warning popup outlining the time to finish the administration and provide them a choice to continue or cancel this action (Figure 66). If the provider selects **No**, they remain in the administration. If they select **Yes**, the provider is returned to the MHA landing page and a **Staff** assignment ID is created in the **Active Assignments** table.

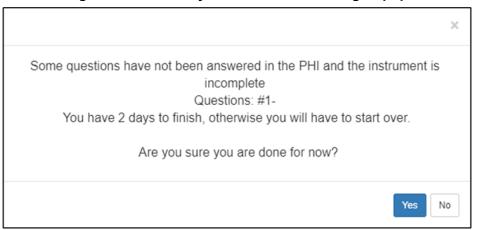


Figure 66: Staff Entry Save and Exit Warning Popup

# 4.4.3. CAT Specific Actions

The following paragraphs cover actions specific to the CAT administration.

## 4.4.3.1. Finish Actions Staff Entry – CAT Terms of Service

The Terms of Service for the CAT administration must be accepted before the administration can begin. A detailed outline of the Terms of Service can be viewed by selecting the **HERE** link in the webpage. Click the **I Agree** button to continue to the CAT instrument administration.

Elaura 67: Staff Entry CAT Tarma of Sandaa	
CAT-CAD Interview	AVIVAPATIENT, TEN
ADAPTIVE TESTING TECHNOLOGIES, INC.	
TERMS OF SERVICE	
USE OF THIS WEBSITE IS GOVERNED BY TERMS OF SERVICE YOU CAN ACCESS HERE, ADAPTIVE TESTING TECHNOLOGIES, INC. REQUIRES YOU TERMS OF SERVICE BEFORE ITS SERVICES CAN BE USED. PLEASE CLICK ON 1 AGREE' TO INDICATE THAT YOU ACCEPT THE TERMS OF SERVICE APPLICATION.	
1 Agree I Decline	

## 4.4.3.2. Staff Entry – CAT - Begin Questions

This window displays the instructions on the completion of the CAT assignment and should be reviewed thoroughly by the user before proceeding. Click the **Begin questions** button to continue (Figure 68).

#### Figure 68. CAT Regin Questions

CAT-CAD Interview	AVIVAPATIENT, TEN \$\$N xxx+xx+	<b>6</b> -
Read each question carefully - there are no right or wrong answers. Please note that NOT all the questions refer to symptoms of an illness.		
Please answer each of the questions by selecting your answer and then clicking Next to continue. You must answer each question before moving to the next que	estion.	
Begin questions		

### 4.4.3.3. Staff Entry – CAT - Timeframe Reminder

A timeframe reminder window appears which displays the timeframe selected during the creation of the CAT administration. This is the timeframe to use when answering the questions (Figure 69).

#### Figure 69: CAT Timeframe Reminder

CAT-CAD Interview	
Answer the following questions based on how you felt over the past 2 weeks unless otherwise specified	a l
Next Question	

### 4.4.3.4. Staff Entry – CAT Administration Questions

CAT administrations are always executed one question at a time. Due to the complexity of the questions for multi-CAT administrations, neither question numbers nor progress status are displayed to the user and the ability to go backward and answer a previous question is not available to the user during a CAT administration (Figure 70).

Figure	70·	CAT	Administration	Questions
Iguie	70.	UAI	Aummisuauon	QUESLIUIIS

CAT-CAD Interview	ONE, PATH SSN XXX 4X-0001
Timehane past 2 weeks	
How much difficulty have you been having in the area of heat, anxiety or panic?	
Ne officialy     A site officialy     Moderne officialy	
<ul> <li>Guile a bit of difficulty</li> </ul>	
© Externe sthudy Next Question	

## 4.4.4. Finishing an Administration

Once an assessment is complete, the user can select the **Finish** button and **MHA** opens the **Progress Note** window that allows the user to **Save Note**, **Do Not Save Note**, or **Copy Text** (Figure 71).

BARTHELINDEX	ONE,PATIENT	
6. Transfer: O 0. Unable, no sitting balance	î	
<ul> <li>1. Major help (one or two people, physical), can sit</li> </ul>		
2. Minor help (verbal or physical)		
3. Independent		
7. Mobility:		
O Immobile	E in i	als Duittain
<ul> <li>1. Wheelchair independent, including corners, etc.</li> </ul>	FIN	ish Button
<ul> <li>2. Walks with help of one person (verbal or physical)</li> </ul>		
<ul> <li>3. Independent (but may use any aid, e.g., cane)</li> </ul>		1
8. Dressing:		
0. Dependent		
1. Needs help, but can do about half unaided		/
<ul> <li>2. Independent (including buttons, zippers, laces, etc.)</li> </ul>		/
9. Stairs:		/
0. Unable	/	
1. Needs help (verbal, physical, carrying aid)     2. Independent, up and down		
<ul> <li>z. independent, up and down</li> </ul>	/	
10. Bathing:	/	
0. Dependent	/	
<ul> <li>Independent (can perform all the steps)</li> </ul>	1	
Delete Vise speed tab (use number key to speed data entry) 100%	Finish	
© Copyright (c) 1965, Maryland State Medical Journal	v1.5	
a cabladar (6) inol variante cana variante canat	11.0	

Figure 71: Finish Button

## 4.4.4.1. Save Note

Selecting the **Save Note** button creates a Progress Note for the administration in CPRS (Figure 73). The report created from the completed administration is accessible in the **Completed Instruments** section of MHA.

### 4.4.4.2. Do Not Save Note

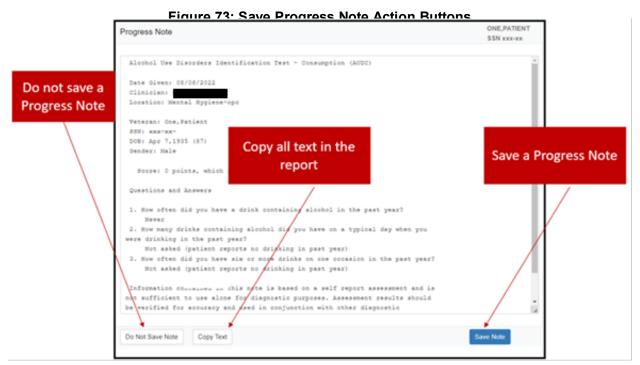
Selecting the **Do Not Save Note** button will NOT create a Progress Note for the administration in CPRS (Figure 73). However, the report created from the completed administration is accessible in the **Completed Instruments** section of MHA. Choosing to not save a Note will present a confirmation dialog (Figure 72) allowing the decision to be reviewed. Selecting "Yes" will file the results, but not create a Progress Note. Selecting "No" will take the user back to the Progress Note window.

Figure	72: Do	Not Save	Progress	Note

Do Not Save Progress Note	×
Are you sure you want to close without saving a Progress Note to CPRS? Your assessn will still be saved.	nent
Yes	No

# 4.4.4.3. Copy Text

Selecting the **Copy Text** button allows the user to copy the Progress Note information to the clipboard for pasting into other applications (Figure 73).



# 4.4.5. Restricted Instrument(s)

If the instrument being completed in the assessment is a restricted instrument, MHA will NOT create a Progress Note to be stored in VistA when the provider selects **Finish** and a popup will appear notifying the provider of this (Figure 74). Selecting **Continue** returns the user to the MHA main landing page where they can then select the instrument name and view the report for that date of completion.





# 4.5. Completed Instruments

The **Completed Instruments** section displays all instruments that have been completed for a patient from any application that saves data to VistA. To see the history of a specific instrument, select the instrument and then select the desired date from the list of dates that appears on the left side of the instrument report field.

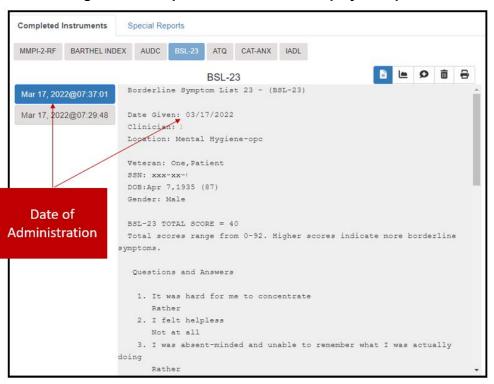
Completed Instruments	Special Reports
MMPI-2-RF BARTHEL INDE	EX AUDC BSL-23 ATQ CAT-ANX IADL
	BSL-23
Mar 17, 2022@07:37:01	Borderline Symptom List 23 - (BSL-23)
Mar 17, 2022@07:29:48	Date Given: 03/17/2022
	Clinician: 1
	Location: Mental Hygiene-opc
	Veteran: One, Patient
	SSN: xxx-xx-
	DOB:Apr 7,1935 (87)
	Gender: Male
	BSL-23 TOTAL SCORE = 40
	Total scores range from 0-92. Higher scores indicate more borderline
	symptoms.
	Questions and Answers
	1. It was hard for me to concentrate
	Rather
	2. I felt helpless
	Not at all
	3. I was absent-minded and unable to remember what I was actually
2	doing
	Rather

#### Figure 75: Completed Instruments Field

## 4.5.1. Reviewing Completed Instruments (Reports / Graphs)

## 4.5.2. Reports

Upon the completion of an assessment by either the patient or a user, a report is generated for the completed assessment and is viewable in the **Completed Instruments** section of the main MHA landing page. To view this report, the user needs to select the desired instrument name and then select the appropriate date for the report. Once selected, MHA will display the details of the report for review (Figure 76).



#### Figure 76: Completed Instruments - Displayed Report

There are two icons that might appear on a Completed Instrument header, High Risk Response

and Positive Response icons PHQ9 (or a set of questions) indicating suicidality. The Positive

Response icon indicates that a patient has answered a question (or a set of questions) that indicate a positive direction to alert the provider that additional clinical assessment is indicated.

## 4.5.3. Graphs

The option to review the data within the report in a graphical format is also available to the

user. The user must select the icon to display the data. The history of all assessments related to that selected instrument is available for review, and a table of information is provided for reference (Figure 77).

#### Figure 77: Graphed Instrument Results



A legend is provided to the right of the graph which shows the metric that is displayed in the graph. The legend is color-coded for easier viewing of assessments that have multi-value metrics. This information comes directly from the data table below the graph (Figure 77).

The user can also use the slider bar at the top of the graph to display data based on a desired date range. The user must use their mouse to click on the slide bar and then drag it right or left to gain the desired display of graphed data (Figure 78 and Figure 79).

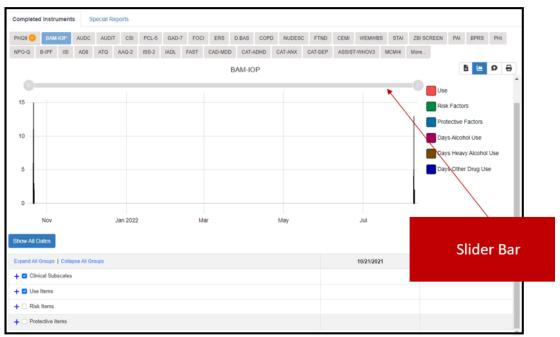


Figure 78: Graph Slider Bar Adjustments (Expanded Range)

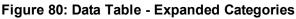


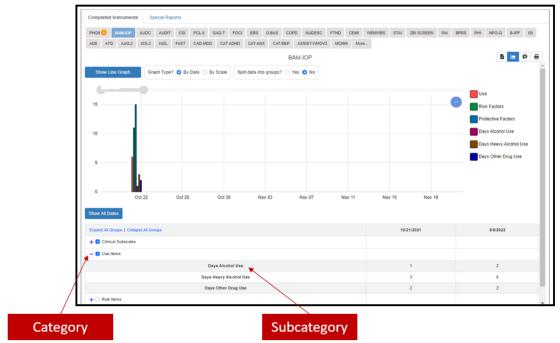


The table can also be filtered for specific trending information if the user so desires. This can be

accomplished by selecting the icon beside a specific category to expand the subcategories and review the results. To graph the results for this subcategory, select the checkbox beside the category in the data reference table. The graphical display automatically updates based on the user selection, and the legend also updates to reflect which colors are associated with each component of the subcategories. Inversely, if the user wants to close the expanded category,

they must select the icon (Figure 80).





# 4.5.4. Append Comments

An additional option for appending comments to the patient report has been added to MHA. By selecting the  $\bigcirc$  icon, the screen updates to display two additional fields. The first is **Previous Comments**, which allows the user to see comments that have already been added to the report. The second is **New Comment**, which is a required field to save the changes and allows the user to add additional notes to the patient's report. After entering the desired information, the user can select **Save** to add those changes to the report or **Cancel** to discard the changes. Once the changes have been made, they cannot be removed.

**\*\*\*NOTE\*\*\*** Print functionality is not available from the **Append Comments** view (Figure 81). **\*\*\*** 

mple	eted In	strumen	ts	Special R	eports																		
109		замнор	AUDO	AUDI	CSI	PCL-5	GAD-	7 FOCI	ERS	D.BAS	COPD	NUDESC	FTND	CEMI	WEMWBS	STAI	ZBI SCREEN	PAI	BPRS	PHI	NPO-Q	B-IPF	ISI
80	ATQ	AAQ-2	ISS-2	IADL	FAST	CAD-MD	0 0	AT-ADHD	CAT-ANX	CAT-0	DEP A	SSIST-WHOV3	MCMI4	4 More	L								
			_								BAM	-IOP									6	<b>E</b>	o i
-		@16:43	20	ivious Co	mments:																		
oct 21	, 2021	@11:40:	50																				
			Ne	w Comme	ent":																		
			_																			_	_

Figure 81: Append Comments Screen

# 4.5.5. Delete Assignment

By selecting the icon, the user will be prompted with the **Warning** popup. The user can select either the **Cancel** or **Confirm** button. Selecting **Cancel** will exit the popup without deleting an assignment; selecting the **Confirm** button will prompt another modal stating **Information**. The user can then close the popup and the completed report will be deleted from MHA. The **Reports** window refreshes automatically and displays the most recently completed report.

**NOTE:** \*\*\* The option to delete an assignment has been granted to users with the required VistA keys. If the user does not have the appropriate permissions to delete a report, then a message will appear stating: You do not have VistA permission to delete Completed Reports. Please contact your supervisor or ADPAC/CAC for assistance (Figure 82, Figure 83, Figure 84) Please see KB0116992 - MHA Web: Deleting an Erroneously Completed Report in Mental Health Assistant Web for more information\*\*\*

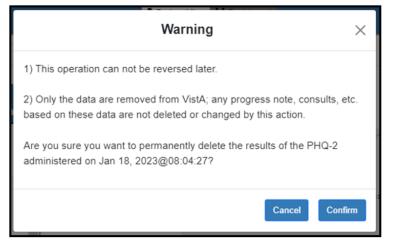


Figure 82: Delete Assignment Popup

Figure 83: Assignment Deleted Popup

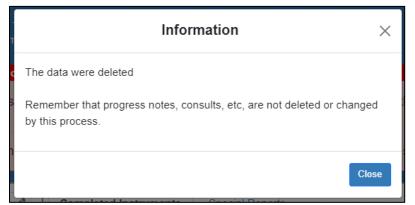
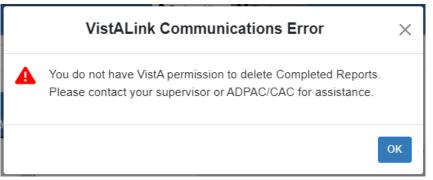


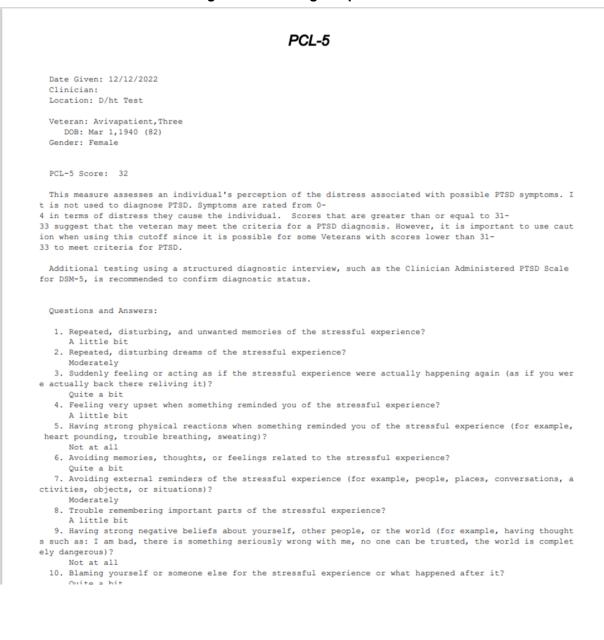
Figure 84: Permission Notification

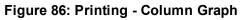


# 4.5.6. Printing

The user can print the current report or graph that is selected. Depending on what is being displayed (report or graph), clicking the button takes the provider to a print screen to confirm the selection. This works for the different graphing options Column and Line Graph (Figure 85, Figure 86, Figure 87). When printing a report, the last 4 of the patient SSN will be removed.







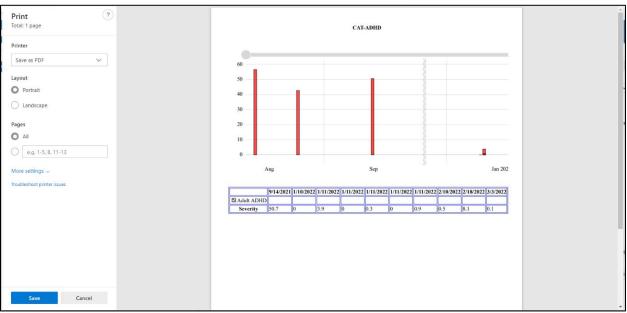
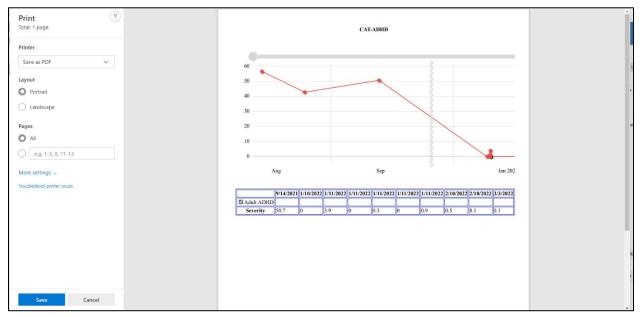


Figure 87: Printing - Line Graph



# 4.5.7. Special Reports

**Special Reports** allows the provider to view and compare graphs for up to eight different instruments simultaneously on a single page view. It also allows the creation of a single graph using up to 4 scales to compare disparate instrument results.

## 4.5.7.1. Special Reports – Multiple Graphs

To configure multiple graphs on a single page, select the +/- symbol to display the instrument list. Up to 8 instruments can be selected at one time. The **Show Line Graph** button can also

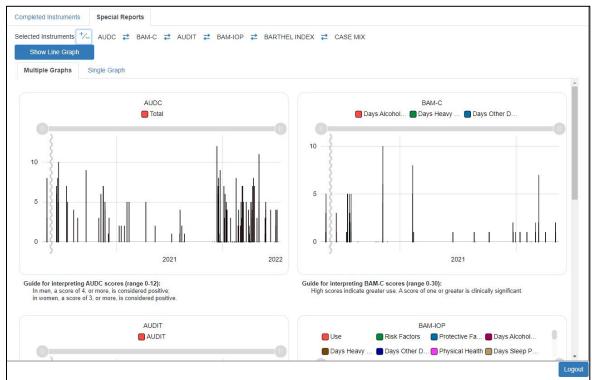
be selected to change all bar graphs to line graphs. A slider is active above each graph to zoom in on specific points within each graph. The user can swap the order of the displayed graphs using the  $\stackrel{\checkmark}{\leftarrow}$  button.

Completed Instruments	Special Reports			
Selected Instruments +/-	-			
Show Line Graph				
Multiple Graphs	Single Graph			
				*
				Logout
				Logoat

Figure 88 Special Reports - No Instruments

Select Instruments (maximum of	8 instruments)		
Addiction-SUD + AUDC AUDIT BAM-C BAM-IOP ADL/Func Status + BARTHEL INDEX FAST IADL KATZ-ADL-18PT Anxiety/PTSD + BAI CAT-ANX CAT-PTSD CAT-PTSD-E CAT/CAD + CAT-ADHD	EBP + AAQ-2 ATQ B-IPF CEMI Employment ERS IJSS Frequent MBCs + BASIS-24 ISS-2 PCL-5 WEEKLY PHQ9 General Symptoms + BASIS-24 BSL-23 BUSS CCSA-DSM5	Quality of Life + B-IPF NPO-Q PHI Q-LES-Q-SF Recovery + BRS IMRS ISMI MHRM Screening + ACE ASSIST-NIDA ASSIST-WHOV3 AUDC Sleep + CMQ	
CAT-ANX CAT-DEP CAT-MANIA-HYPOMANIA	Pain AD8	D.BAS ISI RLS	- 1
Cognitive + AD8 BOMC CDR GDS DEMENTIA	Pain / Health + BBHI-2 COPD FTND HSI	Suicide Prevention + BHS BSI18 BSS CAT-SS	
Couples/Family Func + CSI CSI PARTNER VERSION	Personality + MBMD MCMI3 MCMI4 View All Instrume	nts	×
			DONE

### Figure 89 Special Reports - Instrument Selection



#### Figure 90 Special Reports - Multiple Instruments

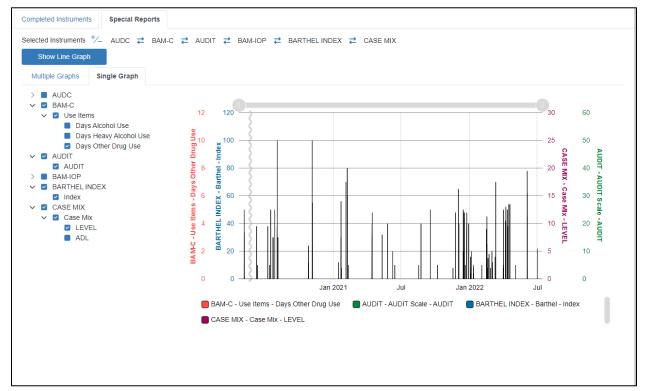
### 4.5.7.2. Special Reports – Single Graph

Selecting the **Single Graph** button allows the user to view different measures from the selected instruments on a single graph. Up to 4 different scales can be selected from the instruments displayed in Multiple Graphs tab. The scales of the selected instruments can be chosen by using the carat to expand the scales next to the instrument name and clicking the checkbox beside the desired scale.

Completed Instruments Special Reports	
Selected Instruments <sup>+</sup> /- AUDC <sup>+</sup> / <sub>+</sub> BAM-C <sup>+</sup> / <sub>+</sub> AUDIT <sup>+</sup> / <sub>+</sub> BAM-IOP <sup>+</sup> / <sub>+</sub> BARTHELINDEX <sup>+</sup> / <sub>+</sub> CASE MIX	
Show Line Graph	
Multiple Graphs Single Graph	
> ■ AUDC > ■ BAM-C	
> I dudit	
> BAM-IOP > BARTHELINDEX	
> CASE MIX	
	Logout

#### Figure 91 Special Reports - Single Graph with No Scales

Figure 92 Special Reports - Single Graph with Multiple Scales



# 4.6. MHA Server Timeout

The MHA user will receive the timeout notification at the value specified in VistA. At the timeout -5-minute mark, a warning modal appears allowing the user to continue the session or be automatically logged out of the session. If the Continue button is not selected, MHA automatically ends that session and logs the user out of the application (Figure 93).

Figure 93 Timeout Popup

Warning! Session Idle $\times$
This session will time out due to inactivity in 1:04 minutes. Please click continue to continue your session.
Continue

# 4.7. Special Instrument Notification in Staff Entry

Certain instruments require special training/certification before they can be executed by a clinician. When a clinician attempts to complete any of the Montreal Cognitive Assessment (MoCA) instruments, a warning modal appears that informs them of the requirement for the certification training required to administer the instrument, this modal must be acknowledged before the clinician can proceed with the administration. If the provider answers No to the Attestation, the assignment will be deleted, and the provider will be returned to the Landing Page.

Figure 94 MoCA Attestation Popup

MoCA
By proceeding with this administration of the MoCA, I attest that either
(a) I have completed MoCA certification training required by the publisher, or
(b) I am exempt from the publisher's certification requirement based on specialist exemption guidelines outlined by the publisher (see mocatest.org), or
(c) I am a clinician-in-training working under the supervision of a clinician who is qualified to use the MoCA based on criterion (a) or (b).
Yes No

# 4.8. Logout

The MHA footer contains a Logout button that should be used every time the provider is leaving the application. This redirects the user to the Identity and Access Management (IAM) logout page, click Logout on this page as well. Do NOT close the browser using the X/Close button in the upper-right corner from within MHA. This ensures the user is logged completely out of Identity Management.

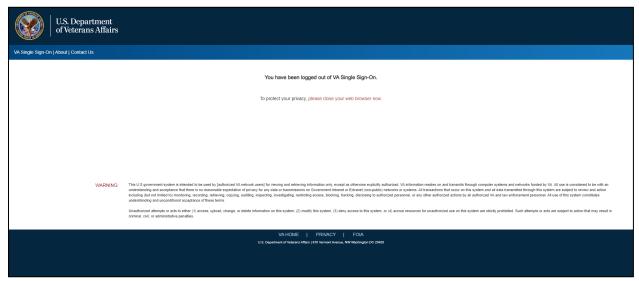
Mental Health Assistant v2.0	Patient View Dashboard	Help 💠 - TEST, PATIENT ONE 🧓
Active Assignments + Ə 🖹 /	Completed Instruments Special Reports	
Assigned Date Due Date Type/PIN Instrument Frequency Progress		
	Click a completed instrument to view the report	
	Click to logout of MHA Web	
Staff Entry		Logout

#### Figure 95 MHA Logout Button

#### Figure 96 IAM (SSOi) Logout Button

	U.S. Department of Veterans Affairs	
VA Single Sign-O	n   About   Contact Us	
		You have been logged out of Mental Health Assistant - Web (MHA Web) You can navigate to another application protected by VA Single Sign-On without logging in.
		You are logged in to VA Single Sign-On Internal (SSO)). If you are finished working, log out of VA Single Sign-On and close any secure sessions that may still be open by clicking the "Logout" button. To protect your privacy, please close your web browser now.
		Logout
	WARNING:	This US government system is intended to be used by (publicited VA network west) for viewing and retrieving information only, encept as otherwise explicitly authorized. VA information resides on and transmit through computer systems and retrieving information only, encept as otherwise explicitly authorized. VA information resides on and transmit through computer systems and retrieving information only, encept as otherwise explicitly authorized. VA information resides on and transmitted through computer systems and retrieving information and explicitly authorized and add at transmitted through this system are subject to review and addimination of posture of a system and retrieving and information on posture systems. All transactions that occur on this system and add data transmitted through this system are subject to review and addimination of posture systems. All transactions that occur on this system and add data transmitted through this system are subject to review and addimination of posture systems. All transactions that occur on this system and add data transmitted through this system constitutes understanding and unconditional acceptance of threat terms.
		Ubadhoticed attemptor or actis to atthe (1) access, upload, change, or detells information on this system, (2) modify this system, (3) deny access to this system, or (4) accure resources for unauthotized use on this system as attictly prohibited. Such attempts or acts are subject to action that may result in commad, coli, or administrative penaltes.
		VA HOME   PRIVACY   FOLA U.S. Department of Vederale Allerin (115 Ventrat Avenue, NW Weshington DC 2003

Figure 97 Logged Out Screen



# 5. MHA Dashboard

The following paragraphs provide details on accessing and using the Dashboard. The Dashboard consists of three views contained within two tabs, Review Assessments tab and Missed Assignments tab. The Review Assessments tab contains 2 views, Views Assessments and View Site Assessments.

# 5.1. Accessing Review Assessments

Once successfully logged into MHA, select the Dashboard to open the Dashboard view.

ntal Health Assistant Help - TEST,PATIENT ONE xxx-1212 Patient View Dashb Active Assignments +- 🖶 🗊 🖉 Completed Instruments Click a completed instrument to view the report Dec 09, 2022 Dec 16, 2022 Staff N/A MCMI4 0% Dec 09, 2022 Dec 16, 2022 49607 ATQ N/A « Staff Entry Logout

#### Figure 98 Accessing Dashboard from MHA

# 5.2. Review Assessment(s) Dashboard View

The Review Assessment(s) view is designed to allow Providers to see quickly what assessments assigned through the MHC Assignment window have been completed by Veterans. There are two sub-views underneath, the currently logged in Providers view and the Site Assessment(s) view.

<b>(</b>	Mental Health As	sistant v3.0			2 Patient View 2 Dashboar	rd			Help	<b>*</b> - 🍐
eview	Assessments Missed A	Assignments								
Viev	w Assessments View Si	ite Assessments	Date Range 14	days 30 day	ys 6 months 1 year				٠	J 🔺
i	Patient 🔺	Provider	Instrument 🖘	Score 🖡	Severity	Completed date	Review by	Review Status		Actio
	Enter Patient	Enter Provider	Enter Instrument	]	Enter Severity			Needs Review, Over	×	~
)	TEST, PATIENT ONE	GRAY, MELISSA I	AUDC	5	N/A	5/13/2024	5/16/2024	Overdue		۹.
)	TEST, PATIENT ONE	GRAY, MELISSA I	AUDIT	26	N/A	5/13/2024	5/16/2024	Overdue		Q
)	TEST, PATIENT ONE	GRAY, MELISSA I	BAM-C	0	N/A	5/15/2024	5/20/2024	Needs Review		Q
	TEST.PATIENT ONE	GRAY, MELISSA I	BAI	33	N/A	5/16/2024	5/21/2024	Needs Review		9

Figure 99 Review Assessment(s) Dashboard

# 5.2.1. View Assessment(s) Overview

The View Assessment(s) Dashboard displays all completed assessments that were performed by the Veteran through the MHC Patient Application that have not been reviewed by the provider. By default, it is filtered to assessment statuses that require a provider's attention (Needs Review & Overdue). This filter can be changed by selecting the desired Review Status (if more than one is desired, use CTRL + Click to select). There is a Date Range available to limit the amount of data returned to the provider. The options are 14 days (default), 30 days, 6 months and 1 year.

## 5.2.1.1. View Assessment(s) Columns

The View Assessment(s) Dashboard limits the data displayed to the currently logged in provider. There are nine columns in the View Assessment(s) Dashboard. Each column can be filtered by typing into the text entry box to limit the data displayed. Deleting the filter will display all data again.

- Patient The name of the patient that completed the assessment.
- Provider The provider that ordered the assessment. Also, the person responsible for signing the Progress Note (if desired).
- Instrument The instrument that was completed in the assessment.
- Score If a score is calculated, it will be displayed in this column. Instruments that do not have a score will display a 0 for the value.
- Severity The calculated severity of the assessment based upon the supplied responses. This will vary from instrument to instrument. There will be times when a severity is None but a warning for Positive Response is displayed due to the way a particular question was answered in the assessment.

- Completed Date The date the Veteran completed the assignment through the MHC Patient Application.
- Review By The date the assessment must be reviewed according to the Office of Mental Health and Suicide Prevention guidance.
  - Results with a potential for critical score require review within one business day.
  - Results without a potential for critical score require review within three business days.
- Review Status The current review status of the assessment. There are two possible states:
  - Needs Reviewed Still in the queue to be reviewed.
  - Overdue The review date has passed, and the assessment review is now overdue. The row will be highlighted in a pink color.
- Action
  - View Report icon <sup>Q</sup> This icon will bring up a window displaying a view of the selected assessment. Clicking View Report will mark the assessment as Reviewed (Figure 100).
    - View Report Window The View Report window will have the same tools available as in the Patient Plan Completed Instruments along with an additional Create Note icon. The user will be able to view all assessments of the current instruments, view graphs, append comments and print the report/graphs. Clicking

the Create Note icon will display a Progress Note window that will allow the user to edit the progress note and then Save the Note. Clicking Do Not Save Note, will still save the assessment, just will not create a Progress Note. This is the same window that will appear if the Create Note button is selected from the Dashboard.

#### Figure 100 View Report Window

	AUDC
lay 13, 2024@17:22	Alcohol Use Disorders Identification Test - Consumption (AUDC)
Apr 19, 2024@07:34	Date Given: 05/13/2024
Apr 12, 2024@10:08	Clinician: Location: Derm (Local)
Apr 08, 2024@05:10	Veteran: Test. Patient One
Apr 01, 2024@11:21	SSN: xxx-xx-1212 DOB: Jan 1,1945 (79)
Jan 18, 2024@11:45	Gender: Man
Jan 18, 2024@09:30	Score: 5 points, which is a positive result.
Mar 01, 2023@15:18	Questions and Answers
Feb 28, 2023@09:05	
Feb 28, 2023@09:04	<ol> <li>How often did you have a drink containing alcohol in the past year? Consider a drink to be a 12 ounce can or bottle of regular beer,</li> </ol>
Jan 18, 2023@13:53	8 ounces of malt liquor, a 5 ounce glass of table wine, or a 1.5 ounce shot of liquor (like scotch, gin, or wodka).
Jan 11, 2023@23:57	Two to four times a month
	<ol> <li>How many drinks containing alcohol did you have on a typical day when you were drinking in the past year?</li> </ol>
	One or two drinks
	3. How often did you have six or more drinks on one occasion in the past
	year? Weekly
	Information contained in this note is based on a self report assessment and is not sufficient to use alone
	for diagnostic purposes. Assessment results should be verified for accuracy and used in conjunction with othe
	diagnostic activities.

• Create Note icon – This icon will display the same template as clicking Create Note from inside of the View Report screen. This will also mark the assessment as Reviewed.

#### Figure 101 Create Progress Note Window

AUDC	🗄 🔟 脑 👂 🖶
rogress Note	TEST, PATIENT ON
Alcohol Use Disorders Identification Test - Consumption (AUDC)	i
Date Given: 01/18/2023	
Clinician:	
Location: Chaplain-bereavement	
Veteran: Test, Patient One	
SSN: xxx-xx-1212	
DOB: Jan 1,1945 (78)	
Gender: Male	
Score: 2 points, which is a negative result.	
Questions and Answers	
<ol> <li>How often did you have a drink containing alcohol in the past year? Monthly or less</li> </ol>	
2. How many drinks containing alcohol did you have on a typical day when you	
vere drinking in the past year?	
One or two drinks	
3. How often did you have six or more drinks on one occasion in the past year?	
Do Not Save Note Copy Text	Save Note

• Send Patient Feedback icon – This icon opens a dialog which will allow the provider to send feedback to the Veteran.

	AUDC	1 Le 👪 🗩 🖵
Progress No	tes: Create Progress Note	
Feedback for Patient (option	al)	
XXXXXX on 05/17/20	324:	Send

Figure 102 Send Feedback to Veteran

## 5.2.2. View Site Assessment(s) Dashboard View

The View Site Assessment(s) Dashboard displays all assessments completed on a Veterans device that are not reviewed for the entire site (3-digit code). There is a Date Range available to limit the amount of data returned to the provider. The options are 14 days (default), 30 days, 6 months and 1 year. When clicking on this link, a warning will appear verifying the provider has a need to know before viewing the data.

#### Figure 103 View Site Assessment(s) Warning



Figure 104 View Site Assessment(s) Dashboard

P	Mental H	Health Assistant v3.0			2 Patient View 2 Da	ashboard			Help 📫	• 6
Review	Assessments	Missed Assignments								
Vie	w Assessments	View Site Assessments	Date Range	14 days 30 da	ays 6 months 1 year				ò í	<b>A</b>
6	Patient -	Provider	Instrument	Score	Severity	Completed date	Review by	Review Status		Action
	Enter Patient.	Enter Provider	Enter Instrument		Enter Severity			Needs Review, Over	$\times  $ $\sim$	
0			PHQ9	2	N/A	5/6/2024	5/7/2024	Overdue		۹ 🖓
			РНО9	2	NA	5/6/2024	5/7/2024	Overdue		۹ 🖓
0			ASRS-6	18	NA	5/13/2024	5/16/2024	Overdue		۹ 🖓
0			BBHI-2	51	NA	5/13/2024	5/16/2024	Overdue		۹ 🖓
0			AUDIT	26	NA	5/13/2024	5/16/2024	Overdue		۹ 🖓
			BAM-C	0	NA	5/15/2024	5/20/2024	Needs Review		۹ 🖓
			BAI	33	NA	5/16/2024	5/21/2024	Needs Review		۹ 🖵
			COPD	24	NA	5/7/2024	5/10/2024	Overdue		۹ 🖵
10	25 30 50			Showing	rows 1 to 8 of 8			F	irst < 1	> Last

## 5.2.2.1. View Site Assessment(s) Columns

The View Assessment(s) Dashboard displays all assessment reports for all patients and all providers.

- Patient The name of the patient that completed the assessment.
- Provider The provider that ordered the assessment. Also, the person responsible for signing the Progress Note.
- Instrument The instrument that was completed in the assessment.
- Score If a score is calculated, it will be displayed in this column. Instruments that do not have a score will display a 0 for the value
- Severity The calculated severity of the assessment based upon the supplied responses. This will vary from instrument to instrument. There will be times when a severity is None but a warning for Positive Response is displayed due to the way a particular question was answered in the assessment.
- Completed Date The date the Veteran completed the assignment through the MHC Patient Application

- Review By The date the assessment must be reviewed according to the Office of Mental Health and Suicide Prevention guidance.
  - Results with a potential for critical score require review within one business day
  - Results without a potential for critical score require review within three business days.
- Review Status The current review status of the assessment. There are two possible states
  - Needs Reviewed Still in the queue to be reviewed.
  - Overdue The review date has passed, and the assessment review is now overdue
- Action
  - View Report icon This icon (Figure 104) will bring up a window displaying a view of the selected assessment.
    - View Report Window The View Report window will have the same tools available as in the Patient Plan Completed Instruments along with an additional Create Note icon. The user will be able to view all assessments of the current instruments, view graphs, append comments and print the report/graphs. Clicking

the Create Note icon will display a Progress Note window that will allow the user to edit the progress note and then Save the Note.

Message – Clicking the Message icon will open a Teams message to the responsible provider.

# 5.3. Missed Assignments View

The following paragraphs detail the Missed Assignments view.

## 5.3.1. Overview

The Missed Assignments view allows the user to view a list of all patient(s) that have not completed their remote assessment(s).

#### Figure 105 Missed Assignments View

Mental Health Assista	ant v3.0	2 Patient View 2 Dashboa	rd	Help 🌣 -	6
Review Assessments Missed Assign	nments				
				Search Table	
Patient 🖙	Provider **	Start Date	Due On 🐜	Instrument VA	
λ,B	GR.	11/9/2023	11/9/2023	AUDC	
,B	GR.	12/20/2023	12/20/2023	AUDC	
В	GR.	1/16/2024	1/16/2024	MMPI-2-RF	
В	GR	2/5/2024	2/5/2024	AUDIT	
-		Showing rows 1 to 4 of 4		Find x 1	
					Logo

### 5.3.2. Missed Assignments Columns

The Missed Assignments view allows the user to view a list of all patient(s) that have not completed their remote assessment(s).

- Patient The name of the patient that completed the assessment.
- Provider The provider that ordered the assessment. Also, the person responsible for signing the Progress Note
- Start Date When the assignment was supposed to begin.
- Due On When the assignment was supposed to be completed by the patient.
- Instrument Acronym of the instrument that was supposed to be completed by the patient.

### 5.3.3. Missed Assignments Search

A search capability is provided to allow for locating data based on a text string. To access the search feature, click on the search box in the upper right-hand corner and begin entering the string you wish to search.

#### Figure 106 Missed Assignments View Search

	Ϋ́Ε.	-1
	Search Table	
Due On 📼	Instrument	

## 5.3.4. Missed Assignments Sorting

The fields in the Missed Assignments view can be sorted by selecting the arrows beside the field name. The view can be switched between ascending and descending order.

# 6. MHA Patient Entry

The following paragraphs provide details on Patient Entry.

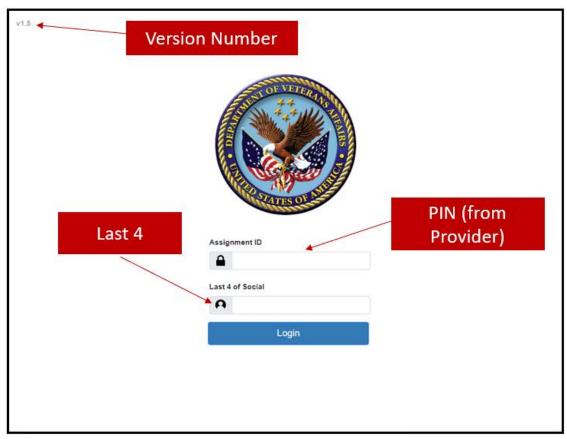
# 6.1. Patient Entry Instrument Completion

Once an assignment has been created for a patient using the **Patient Entry** button in the Instrument Administrator, the patient can use the generated Assignment ID to access and complete their assignments.

## 6.1.1. Login

Details on logging in to Patient Entry:

- The version number of Patient Entry is displayed in light-gray text in the upper left corner of the application (Figure 107).
- The login page requires the unique ID of the assignment a patient is trying to access (the number that is displayed to the provider when the assignment is created) and the last four digits of their SSN.
- Patient must enter the information and click **Login** to continue.
- Incorrect information triggers a popup identifying an error.



#### Figure 107 Patient Entry Login Screen

### 6.1.2. Welcome Screen

- Once logged in, patients are directed to the Welcome Screen (Figure 108). Patients should check to make sure their information in the top right corner is correct.
  - If their information is incorrect, they should click **Logout** and inform their provider.
- Patients should review the table displaying their pending questionnaires.
  - a. The estimated time to complete each instrument is displayed on the right side of the table.
  - b. The total estimated time to complete all instruments is displayed below the table.
  - c. If there is only one pending questionnaire, it will not be shown in the table format.
  - d. Completed questionnaires will show as **Complete** instead of showing an estimated time.
- Clicking **Begin** loads the first questionnaire. If a patient is unable to work on a questionnaire at this time, they should click **Logout**.

v1.5		eteran brmation
	Instrument	Estimated Time
	Borderline Symptom List 23 - (BSL-23) (BSL-23)	TBD Minutes
	Automatic Thoughts Questionnaire (ATQ)	10 Minutes
As	You may start with any instrument of your choosing. Click below to begin.	Time: 10+ Minutes

#### Figure 108 Patient Entry Welcome Screen

### 6.1.3. Completing an Administration

- Patients now see the view in the following figure (Figure 109).
  - a. The **current instrument** is always displayed in the upper left, and the progress is a darkened tab in the navigation bar. Patient information is always displayed in the upper right.
  - b. Progress is displayed by the bar along the bottom of the screen for the current instrument, as well as in each tab for that instrument.
  - c. The version number for Patient Entry is moved to the bottom left corner of the window.

Borderline Sympt	om List 23 - (BSL-23)	Current	Save & Exit	ONE,PATIENT SSN XXX-XXXXX
BSL-23	ATQ	Instrument		
Progress: 0%	Progress: 0%			
Please w course of according week. If y	ork through the question the last week. In case y to how you think you m	naire and decide how much ou have no feelings at all a ight have felt. Please answ different times in the week,	d problems which possibly descri h you suffered from each problem t the present moment, please an er honestly. All questions refer to give a rating for how things were	n in the swer the last
1. In the c	ourse of last week. It y	was hard for me to conce	ntrate	
	Not at all			
0	Alittle			
🔾 2. F	Rather			
0	Much /ery strong	Progress Ba	r	
Prior Question	Review Answers	0%	Submit	Next Question
	C	Use speed tab (use number key to sp	eed data entry)	
v1.5				

#### Figure 109: Patient Entry Completing Administration

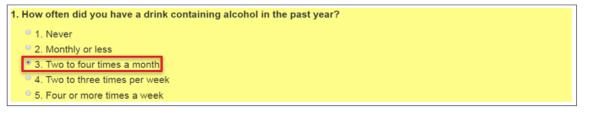
- Questions can be answered by clicking on the button next to the appropriate answer.
  - Selecting an answer automatically takes the patient to the next question if Use speed **tab** is checked.
- If **Use speed tab** is checked, pressing a number key on the keyboard that corresponds with an answer to the question selects that answer, if the question is in focus.
  - a. This moves patient to the next question.
  - b. Focus is shown by the yellow box (Figure 110).

#### Figure 110: Patient Entry Focus

1. How often did you have a drink containing alcohol in the past year?

- 1. Never
- 2. Monthly or less
- 3. Two to four times a month
- 4. Two to three times per week
- 5. Four or more times a week





- If Use speed tab is not checked, click Next Question to move on.
  - **Prior Question** is disabled on the first question.
- Clicking the **Save and Exit** button allows patients to exit the administration and finish it at another time.
  - A popup asks patients to confirm their choice.

#### Figure 111: Patient Entry Incomplete Assignment

Incomplete Assignment	×
You have not completed this administration.	
Your responses will be saved but you will be logged out.	
Are you sure you would like to exit?	
No	

• Clicking a different instrument's name in the navigation bar moves patient to that instrument. Current progress will be saved.

Figure 112: Patient Entry Skipped Question



- If questions have been skipped, the tab will display a red exclamation mark (Figure 112).
- A popup will show any skipped questions and ask patient to confirm their choice (Figure 113).

Figure 113: Patient Entry Incomplete Assignment

ncomplete Assignment	2
These questions in the BSL-23 have bee	n skipped:
#9-23.	
If you move to the next instrument, your responses submitted. Are you sure you would like to	
No	

- Once all applicable questions have been answered, click **Submit** (Figure 114).
  - a. The **Submit** button is only available once all questions in a questionnaire have been viewed.
  - b. Submitting sends the finished questionnaire to the assigning clinician and all answers are final.

Borderline Symptom	List 23 - (BSL-23)		Save & Exit SSN XXX-XX-XXXX
BSL-23	ATQ		
Progress: 100%	Progress: 0%		
20. In the co	ourse of last week.	I was afraid of losing control.	
🗿 0. No	t at all		
🔾 1. A li	ttle		
🔵 2. Ra			
🔾 3. Mu			
() 4. Ve	ry strong		Submit Button
Prior Question	Review Answers	100%	Submit Next Question
v1.5		Use speed tab (use number key to speed data entry)	

#### Figure 114: Patient Entry Submit Button

• If there are multiple questionnaires in a patient's assigned administration, they are shown this screen confirming they have been submitted (Figure 115).

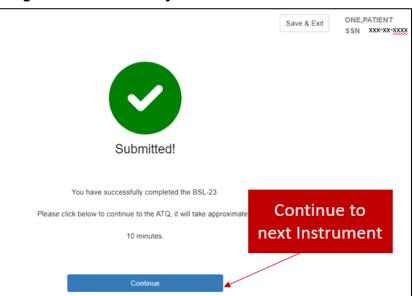


Figure 115: Patient Entry Success Submission

- Click **Continue** if ready to complete the next questionnaire.
- If not ready to complete the shown questionnaire, click **Save and Exit**. This saves all progress on any questionnaire not yet submitted and returns to the login screen.

- If the questionnaire is incomplete, it will display this screen instead (Figure 116).
  - Patients are informed how many days remain to complete the questionnaire.
- Patients still have the option to **Continue** or **Save & Exit**.

#### Figure 116: Patient Entry Incomplete Assessment

	Save & Exit	ONE,PATIENT SSN xxx-xx-0001
Incomplete!		
Your responses to the BSL-23 have been saved, but is incomplete. You have 2 days to return and complete this instrument. If you have any questions about the BSL-23 please see your provider. Please click below to continue to the ATQ. The ATQ will take approximately 10 minutes.		
Continue		

### 6.1.4. Navigating Patient Entry

• To go back to a question, click the **Prior Question** button.

#### Figure 117: Patient Entry Navigation

Automatic Thoughts	Questionnaire		Save & Exit ONE,PATIENT SSN xxx-xx-xxxx
BSL-23 🗸	ATQ 🛕		1
Progress: 100%	Progress: 10%		
8. I'm so wea	k.		Save and Exit
1. Not	at all		
2. Som	netimes		
🔾 3. Mod	lerately often		
O 4. Ofte	n		
○ 5 All the	ne time		
Prior	Question	<b>Review Answers</b>	Next Question
Prior Question	Review Ans	10%	Submit Next Question
		Use speed tab (use number key to speed data entremediate entremediate)	y)
A Questions skippe	ed: #3-6		v1.5

• Patients may review their answers at any time using the **Review Answers** button.

• A popup appears that shows all questions in the current instrument and any selected answers (Figure 118).

ŧ	actions: To change your answer select the row with the	S S S	
₹ 1	Question In the course of last weekIt was hard for me to concentrate.	Answer Much	^
2	In the course of last weekI felt helpless.	Rather	
3	In the course of last weekI was absent-minded and unable to remember what I was actually doing.	Much	
4	In the course of last weekI felt disgust.	A little	
5	In the course of last weekI thought of hurting myself.	Rather	~
<		>	

#### Figure 118: Patient Entry Review Answers

- Patients can click on any question in this popup to be returned to that question.
- Once all applicable questions have been answered, click **Submit**.
- Submitted questionnaires will be visually identified in the navigation bar.
  - The tab will have 100% progress, a checkmark, and will be disabled.

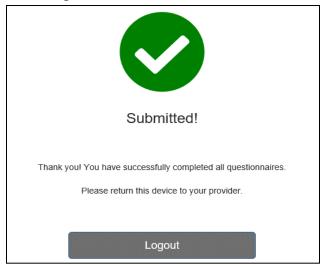
#### Figure 119: Patient Entry Completed Assessment



• Answer all questions on remaining questionnaires and click **Submit** on each.

Eiau	ura 1901 Cubmit Dutton	
Borderline Symptom List 23 - (BSL-23)	Save & Exit	ONE,PATIENT SSN xxx-x
BSL-23 ATQ		
Progress: 100% Progress: 0%		
23. In the course of last weekI felt worthle	255.	
<ul> <li>0. Not at all</li> </ul>		
1. A little		
2. Rather		
3. Much		
4. Very strong		
Prior Question Review Answers v1.3	Submi	Next Question

- After the last questionnaire in the administration is complete, patients are shown the completion screen.
- Patients should click **Logout** and return the device to their provider if necessary.
  - a. At any other point within the application, idle logout happens after 5 minutes. Patients are notified before this occurs.
  - b. On this page, automatic logout will occur in 10 seconds.

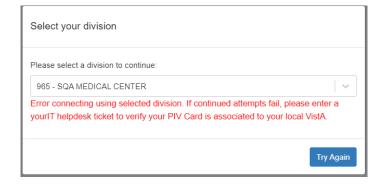


#### Figure 121: Submitted Notification

# 7. Troubleshooting

# 7.1. Error Selecting a Division

Figure 122: Error selecting a division



This is actually a very common problem in the MHA user community but it's an issue that is out of the control of the MHA team. The usual issue is that when onboarding occurred, a step was missed to associate the PIV card with the VistA/CPRS instance being used. There is a Help Desk article on how to complete the association. If more assistance is needed, please submit a YourIT ticket to the Help Desk asking to associate the PIV card with the correct VistA instance. See (KB0116974 - MHA Web: Gain Access to Mental Health Assistance Web) for more information.

# 7.2. Service Errors

There are four different service errors that can occur which will affect MHA. If an error occurs, it will be displayed below the Banner.

Figure 123: Example of Service Errors Expanded

```
The Mental Health Checkup Service (MHC) is unavailable. All scheduling related functionality is disabled until the service has been restored.
```

Each error can be collapsed to save screen space:

Figure 124: Example of Service Errors Collapsed

A	tive Assignments	+-	1

MHC Mobile STS

+- 🖶 📋 🖉 Completed Instruments Special Reports

Clicking on any service name will display the complete error again

## 7.2.1. Mental Health Checkup Service is Unavailable

All scheduling related functionality is disabled until the service has been restored.

### 7.2.2. Mobile Secure Token Service is Unavailable

All scheduling related functionality is disabled until the service has been restored.

## 7.2.3. IAM SSOi Service is Unavailable

The VA Identity and Access Management application is currently unavailable. User will not be able to log into MHA until the service has been restored.

## 7.2.4. VistA Service is Unavailable

All patient data is unavailable until the service has been restored.

# 8. Acronyms

Term	Meaning
ADPAC	Automated Data Processing Application Coordinator
CAC	Clinical Application Coordinators
CAT	Computerized Adaptive Testing
CCOW	Clinical Context Object Workgroup
CPRS	Computerized Patient Record System
IAM	Identity and Access Management
ID	Identification
MH	Mental Health
MHA	Mental Health Assistant
MHC	Mental Health Checkup
MHP	Mental Health Package
MoCA	Montreal Cognitive Assessment
OIT	Office of Information and Technology
PDF	Portable Document Format
PIN	Personal Identification Number
PIV	Personal Identity Verification
SSN	Social Security Number
SSOi	Single Sign-On Internal
VA	Veterans Administration
VistA	Veterans Information System and Technology Architecture