Welcome!

CAREWare Quick Starts will walk you through the basics of setting up, managing and using basic CAREWare functions. They're not a replacement for the CAREWare User Manual, which is where you'll need to go to learn about more advanced functions. This material is for non-technical users who just need to get information in and out of CAREWare with no worries.

About This Guide #6:

Working with Prebuilt Reports (Including the Ryan White Annual Data Report)

Guide in this series:

1. *Downloading and installing CAREWare*
2. *Creating contracts and services*
3. *Entering Clients and their Service and Clinical Data*
4. *Customizing tabs and fields*
5. *Customizing clinical data*
6. *Working with prebuilt reports (including the Ryan White Annual Program Data Report)*
7. *Creating basic custom reports*
8. *Creating more advanced reports*
9. *User and System Administration*

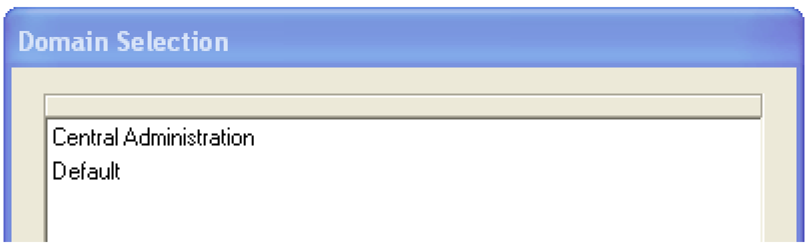
First Things First
What do I need to get started?

- You must have the appropriate user privileges to run reports.
- You should have a number of clients entered in the system so you can see how your reports will look.

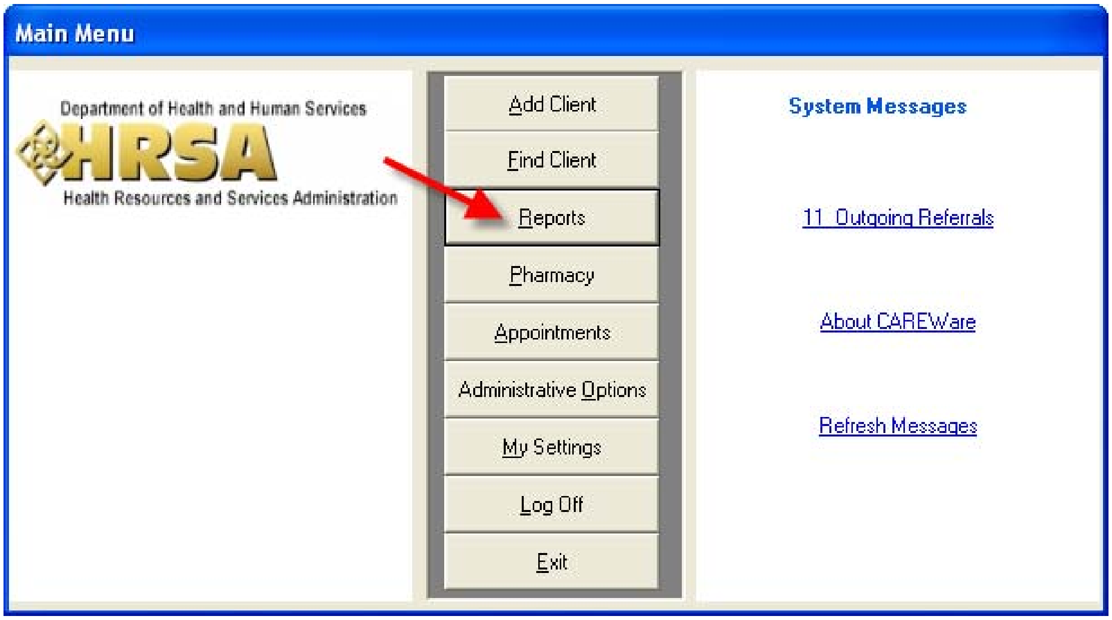
Running "Prebuilt" reports

CAREWare comes prepackaged with a number of clinical and service reports. We'll cover all of them here, then take a look at running the RDR for both reporting and quality assurance purposes.

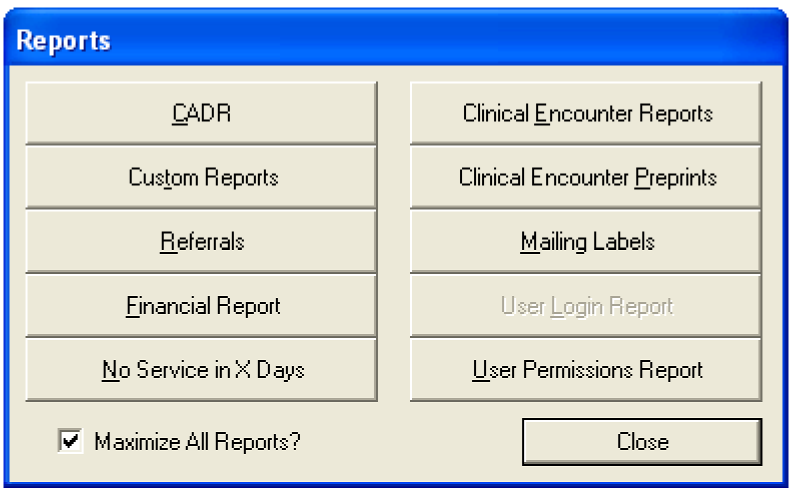
1. Log into CAREWare. If you have administrative privileges and are asked to choose between Central Administration and Provider ("Default" until you change the name), you can log in as either a Provider or Central Admin. To run reports for multiple agencies within a provider network, log in as Central Admin.



2. Select **Reports** from the main menu.



The various report categories will appear:

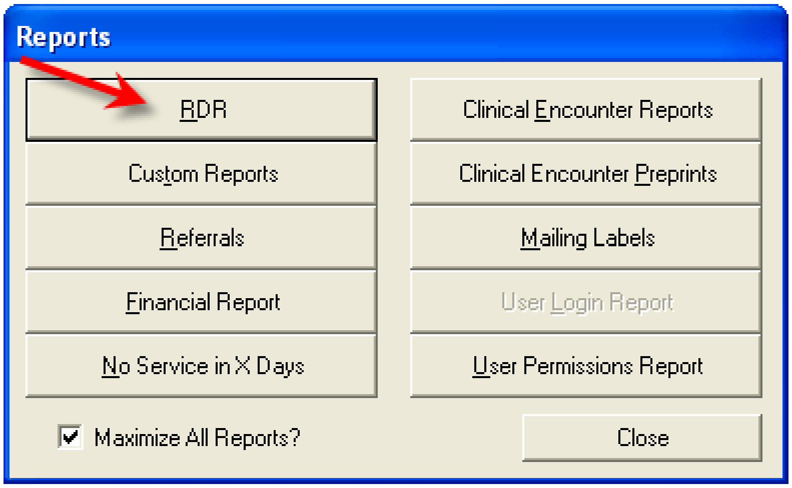


We'll cover everything here in this manual except custom reports. Custom reports are addressed in guides #7 and 8.

Running the Ryan White Annual Data Report (RDR)

PLEASE NOTE: This manual addresses how to execute and analyze your RDR, formerly the CADR. It does not cover details such as the difference between services funded by the Ryan White Program vs. all eligible services, the difference between a service and a referral, etc. For specific guidelines on these subjects, please see HRSA's RDR instructions at http://hab.hrsa.gov/tools.htm

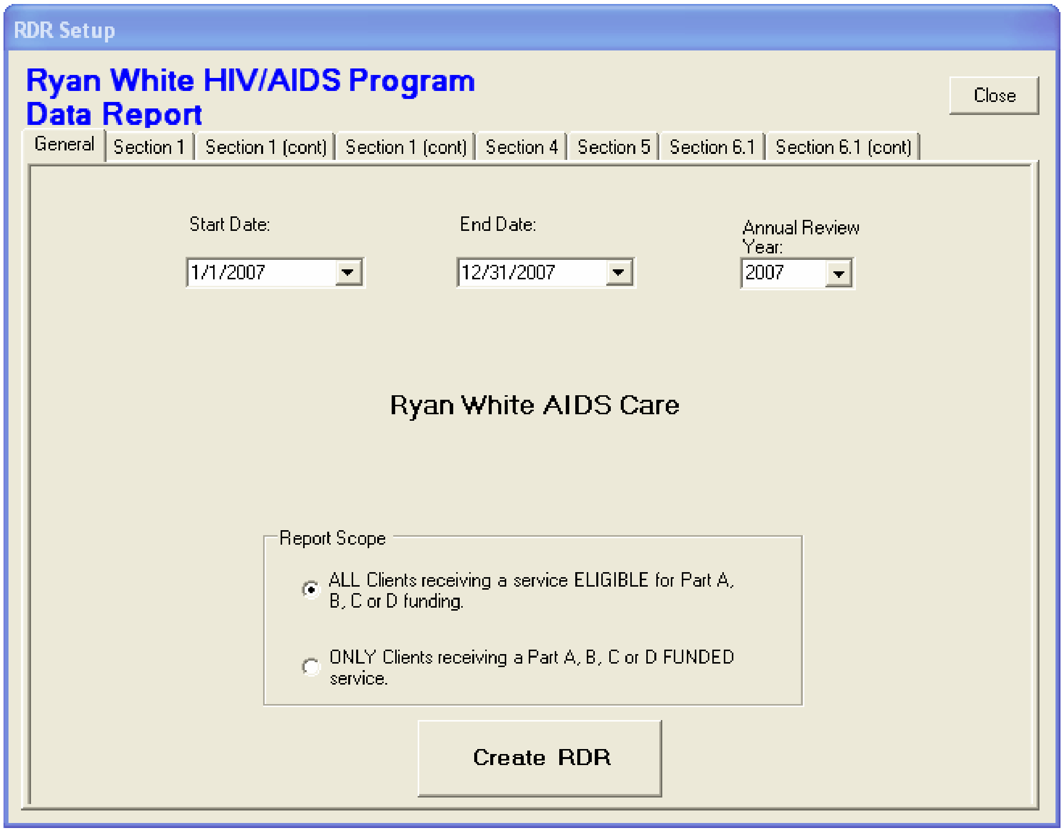
1. Select RDR from the reports menu.



TIP: Select **Maximize All Reports?** to see reports in a full-size window.

2. Enter the dates for which you'd like run the RDR. This may be a calendar year, a funding year, a quarter, or any other date range.

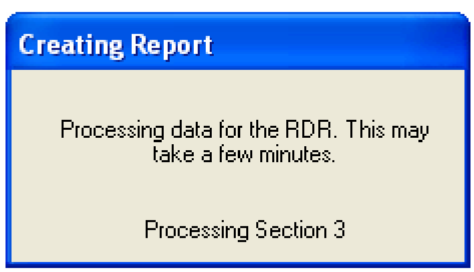
   If your Start and End Dates span more than one year, you must tell CAREWare which Annual Review Year you want to select information from.



3. Use the remaining tabs, where and if applicable, to fill in funding and target population (Section 1), HIV counseling and testing (Section 4), Medical (Section 5), Part C (Section 6.1) and Part D, Section 6.2.

   To enter your other agency information, use the Setup Wizard under Administrative Options (See guide #9, "System Administration").

4. Click **Create RDR**. Processing your RDR may take from a few minutes to considerably longer, depending on the amount of client information to be processed, whether you are running the report over a network, and other factors. CAREWare will keep you informed on the progress by indicating which section is currently being processed:



Using the RDR for Quality Assurance

The RDR can be more than a mandatory reporting tool for your agency. It's also a one-click overview of all of your client activity for a specific date range.

- You can run it on a quarterly basis to see if your agency has busier times of year (often the case in areas with significant seasonal populations) and adjust your staffing, hours or budgeting accordingly.
- You can run it to see if the appropriate percentage of clients are receiving PPDs or pap smears as the year goes by.
- You can run it along with a chart review to see if your data is getting into the system in an accurate and timely manner.

Let's take a look at a sample RDR to see how you can avoid some of the typical problems agencies have with reporting, starting with the total number of clients:

23. Total number of unduplicated clients:

20	HIV positive
1	HIV indeterminate (under age 2 only)
0	HIV negative (affected)
1	Unknown/unreported (affected)
22	Total

This agency has served 22 clients in the time span specified for this RDR. Note the one client listed as **Unknown/unreported (affected)**. This may be accurate if you provide services to affected family members of HIV-positive clients. However, the RDR also counts clients where the HIV status is **blank** as Unknown/unreported (affected).

You can run a simple custom report (see Guide #8 for this sample report) to find the name of the client whose status is set to unknown and determine if this client's record needs adjustment. Don't forget to check the rest of the demographics on pages 4 and 5 of the RDR – race/ethnicity, income, living arrangements, insurance, HIV/AIDS status – that can often be missed when a client is entered into the system.

For Clinical Providers:

The RDR can be a powerful tool for clinical providers looking for a quick way to determine if their agency is fulfilling HRSA mandates for quality of care.

On page 8 of the RDR run on our sample database, we see that 17 clients have been provided clinical services in the reporting period (in this case, the first 6 months of 2007):

42. Total number of unduplicated clients with visits for ambulatory medical care by gender:

10	Male
7	Female
0	Transgender
0	Unknown/unreported
17	Total

HRSA needs to know how many of those clients received HIV medical services from your agency for the first time during this reporting period, and how many of them received a CD4 count and viral load test:

45. Number of clients (reported in Item 42) who received HIV-medical services from your agency for the first time during this reporting period:

7	New clients

46. Of the clients who were new to HIV-medical services (Item 45 above), indicate how many received the following tests at least once during this reporting

5	CD4 Count
4	Viral Load

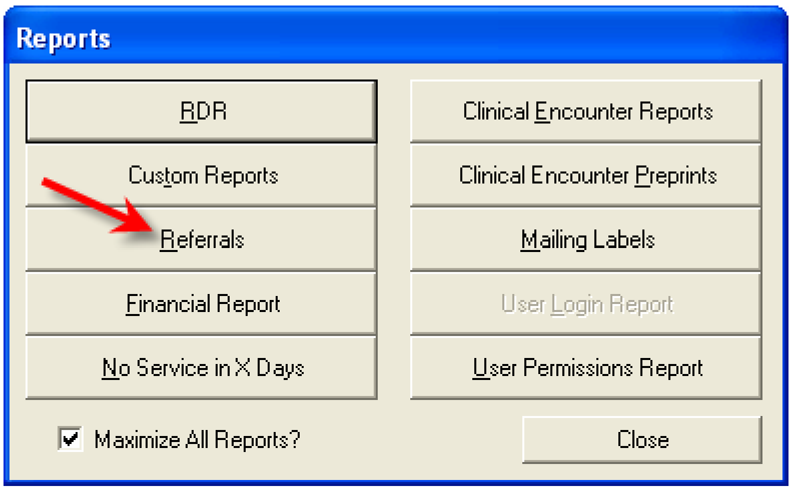
We see immediately that two clients have not received a CD4 count, and three have not received a viral load – or that this information has not been entered in the system. In this manner, the RDR allows you to determine if there is a **shortfall in care,** or a **shortfall in data entry.** Running the RDR on a quarterly basis allows you to address such shortfalls long before your report is due to HRSA, and take steps to remedy them.

You can also use a quarterly RDR to see if you're on track to provide PPDs and pap smears to all your HIV medical clients.

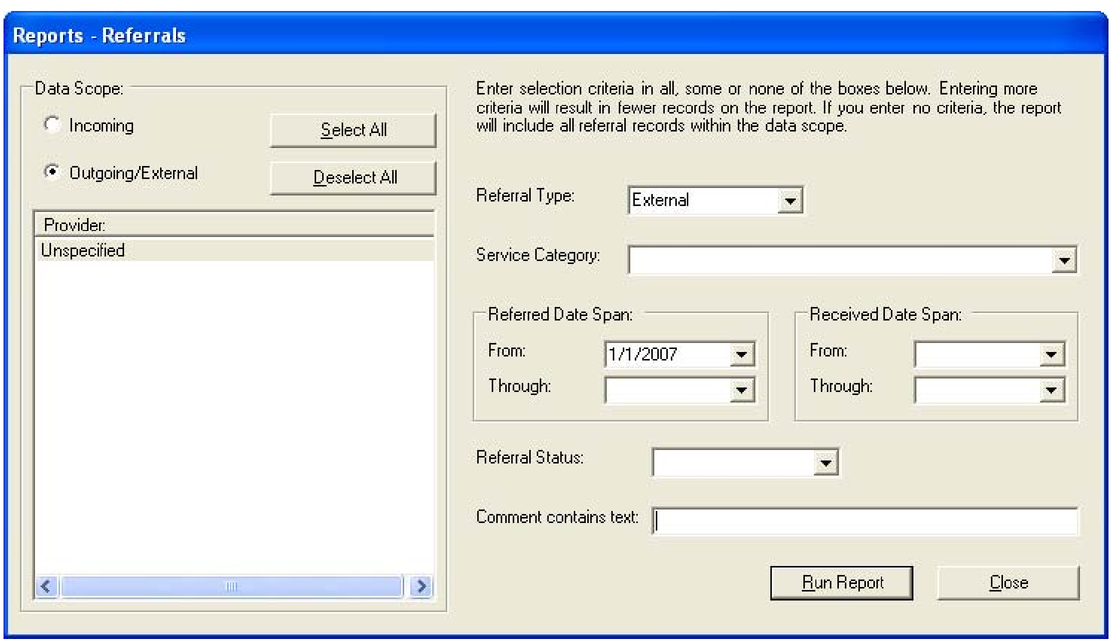
Running the Referrals Report

The Referrals report allows you to track the status of referrals for services you've made to other agencies. This allows you to schedule a regular status check on your referrals rather than having to perform chart review to determine if referrals were followed through.

1. From the **Reports** menu, select the **Referrals** report.



2. Make your selections as detailed below:



Data Scope allows you to choose the “Referred By” provider (incoming referral) or “Referred To” (outgoing referral) providers. Referrals are **Outgoing/External** unless you’re part of a provider network sharing a CAREWare database over a wide area network.

Provider allows you to specify a certain provider to whom clients have been referred (i.e., the legal services agency or food bank you use).

Referral Type is either “Internal” or “External.” If the provider is part of your grantee network and shares this database, the referral is internal; an electronic referral has been made. If the provider is outside your database, the referral is external, it’s been made by phone, fax, or mail.

Service Category is the type of HRSA service category for which the referral was made.

Referred and Received Date Spans are, respectively, the dates within which the referrals were made, and the dates within which the referrals were received by the receiving agency.

Referral Status is either Pending, Completed, Lost to Follow-up, or Rejected.

You can also search the **Comment** fields of referrals for information.

The more criteria you enter, the more specific the report will be. Entering no criteria will result in ***all*** referrals being listed

3. Click **Run Report**. A sample result is shown below.

Referrals Report.

Data Scope: Marianas Trench Care Center

Report Criteria:

Group By: Referred To Provider

Referred To: Unspecified

Referral Type: External

Referred on or after: 1/1/2007

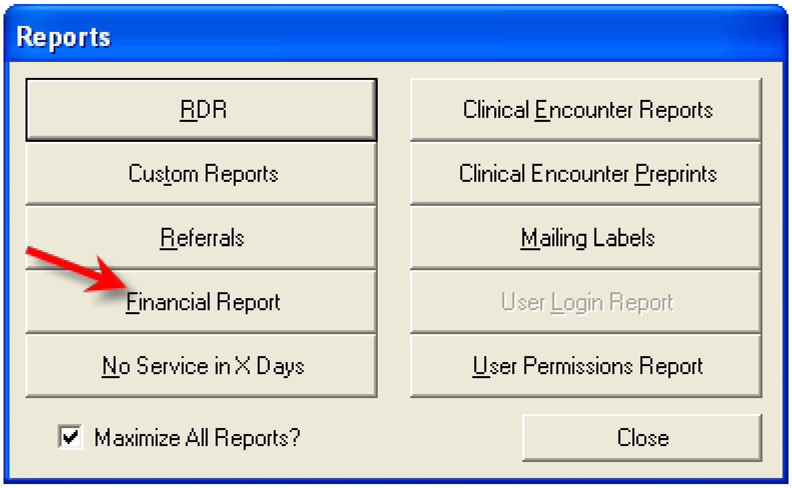
:	:	: :	: :
Octopus, Joseph	Buddy/Companion Service	04/26/2007 Completed	04/30/2007 Needs running partner
Sturgeon, Susan K	Food Bank/Home-delivered Meals	06/16/2007 Pending	
Sturgeon, Susan K	Transportation Services	02/19/2007 Completed	02/26/2007 Needs bus pass to get to work

Number of Records: 3

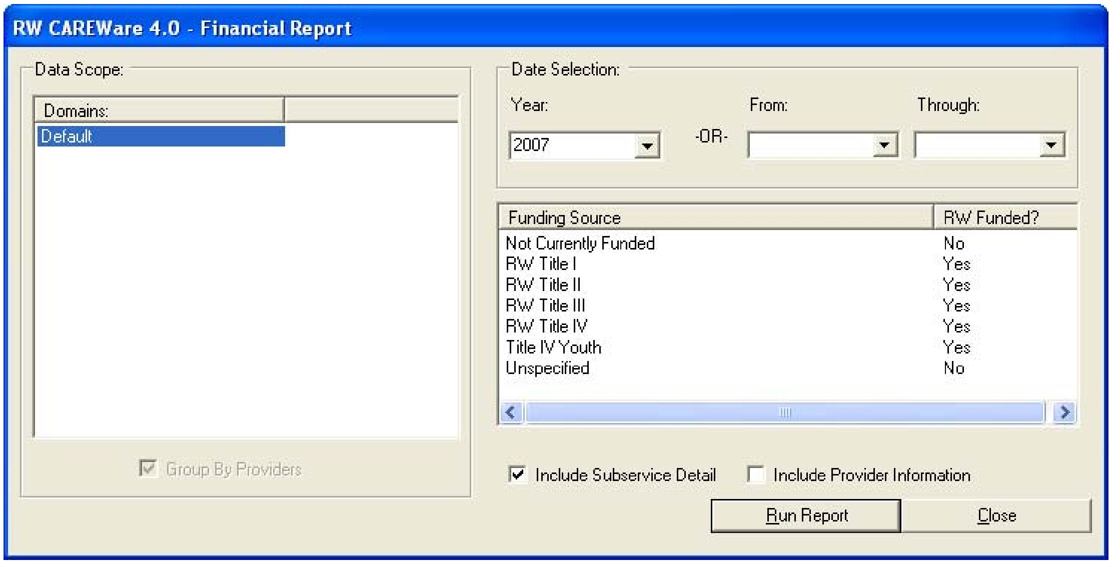
Running the Financial Report

The Financial Report can be run to determine how much you've expended in a specific time frame for any or all service categories and subservices, if you have specified a service cost when you set up your contracts and services. Even if you aren't tracking cost information, it can also be used to track clients and units of service for a specific time frame.

1. From the **Reports** menu, select the **Financial Report**.



2. Make your selections as detailed below.



The **Domain** is only applicable if you are part of a multi-provider network.

The **Date Selection** can be a calendar year, or a specific date range

Select a **Funding Source**; if you do not, the report will run for all funding sources.

Include Subservice Detail if you wish to see service category information broken down to the subservice level.

Include Provider Information is only applicable if you are part of a multi-provider network.

3. Click **Run Report**. A sample result is shown below.

Financial Report

Sunday, January 01, 2006 through Monday, November 19, 2007

Report Criteria:

Provider(s):	Ryan White AIDS Care
Funding Sources:	HOPWA, Not Currently Funded, Part A, Part B, Part C, Part D, Part D Youth
Group By Providers:	True
Include subservice detail:	True
Include provider detail:	True

Ryan White AIDS Care

Phone: 3132224465
Address: 100 Anywhere Rd
Chicago, Illinois 48000

Outpatient/Ambulatory Medical Care	Clients:	Units:	Total:	Amount Received:	Not Received:
Eye Exam	4	4	$160.00	$0.00	$160.00
Lab test	1	1	$50.00	$0.00	$50.00
Medical Care	11	27	$13.00	$0.00	$13.00
Outpatient/Ambulatory Medical Care Totals:	14	32	$223.00	$0.00	$223.00

Mental Health Services	Clients:	Units:	Total:	Amount Received:	Not Received:
Mental Health	2	3	$275.00	$10.00	$265.00
Mental Health Services Totals:	2	3	$275.00	$10.00	$265.00

Buddy/Companion Service	Clients:	Units:	Total:	Amount Received:	Not Received:

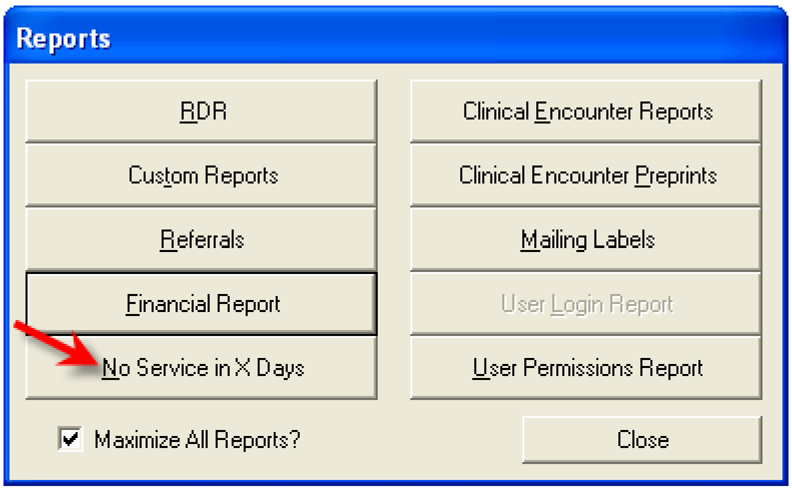
11/19/2007 2:13:11 PM Page 1 Of 3

No Service in X Days Report

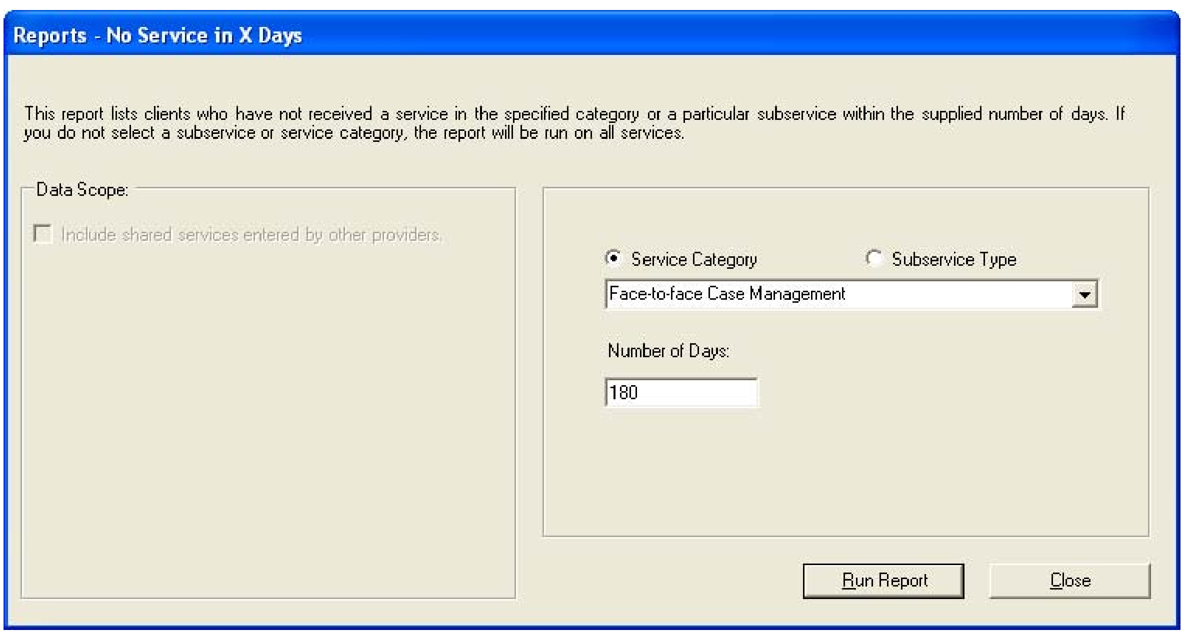
This report can be run to assist you in locating clients who have fallen or are in danger of falling out of care. As a general rule, clients who have not been seen in six months or more are often considered out of care or in danger of falling out of care. This report allows you to examine the records of individual clients and determine if action is necessary.

Note that this report **does not include Closed** or **Deceased** clients.

1. From the **Reports** menu, select the **No Service in X Days** report.



2. Make your selections as detailed below.



Data Scope is only applicable if you are part of a multi-provider CAREWare network.

Choose a **Service Category** or a **Subservice Type** (specific subservice) on which to report.

Enter the **Number of Days** since the last instance of the selected category or subservice encounter.

3. Click **Run Report**. A sample result is shown below.

Clients With no Service in 180 days.

Data Scope: Default

Report Criteria:

Provider:	Default
Service Category:	Face-to-face Case Management
Last qualifying service:	at least 180 days ago.
Enrollment Status:	active or unknown.

Name:	URN:	Last Service Date:	Provider:
Abalone, Julia	JLAA1223472U		
Bluefin, Joseph M	JSBU1215541U	12/1/2006	Marianas Trench Care Center
Clam, Thomas	TOCA0211421U		
Coral, Clementine	CECR0414502U	9/1/2006	Marianas Trench Care Center
Deepwater, Geraldo	GRDE0526061U		
Orca, Jeff	JFOC1216611U	4/1/2006	Marianas Trench Care Center
Poseidon, Rex	RXPS0507631U		

Running Clinical Encounter Reports

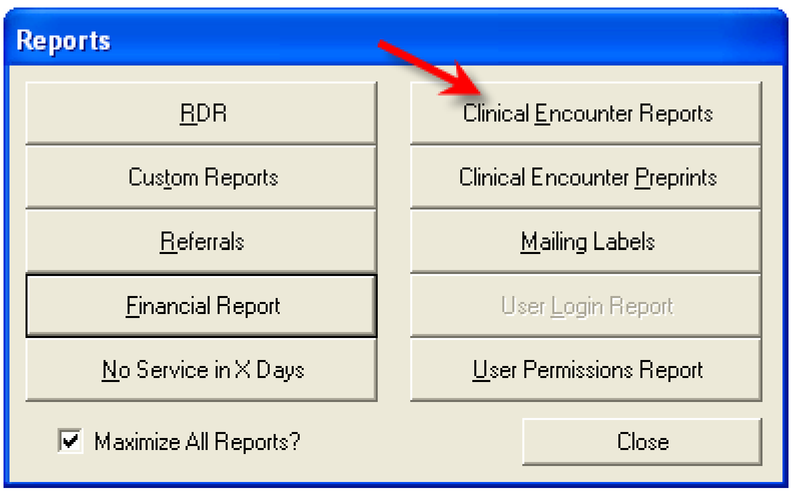
Clinical encounter reports are a quick way of finding clients who need to be flagged for attention. These prebuilt reports address key markers of care for persons with HIV/AIDS, both for preventive care and routine clinical follow-up.

Clients with no encounter in X days

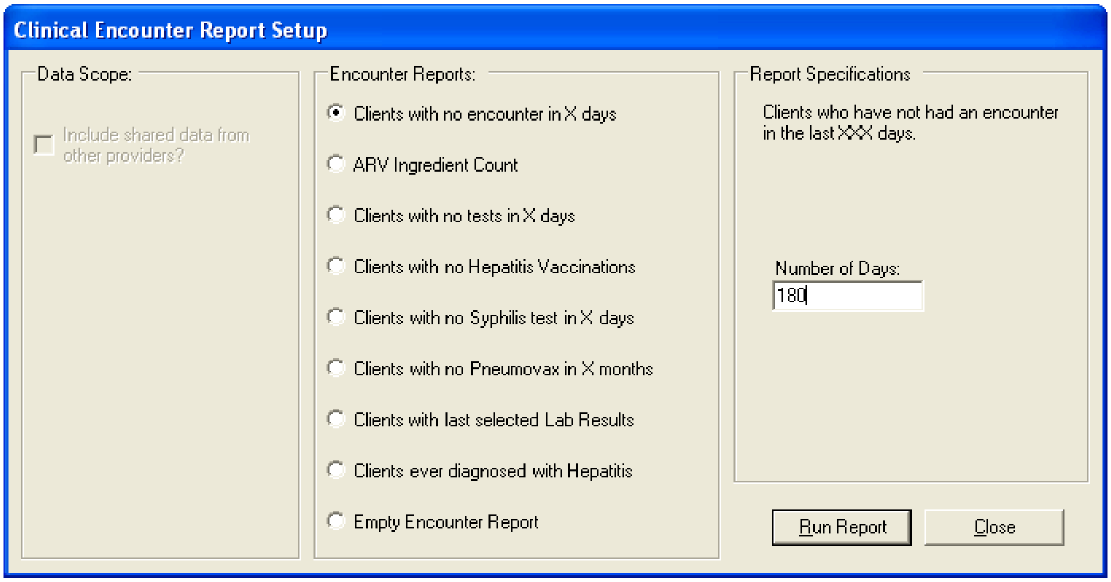
Unlike the **No Service in X Days** report, appearing on this report does not mean that a client has not had any CARE Act service, only that they have not had a clinical encounter. If you use “rapid entry” to enter clinical data instead of explicitly creating an encounter in the database, a clinical encounter is **not created** unless some vital sign information is entered at that time.

Note that this report **does not include Closed** or **Deceased** clients.

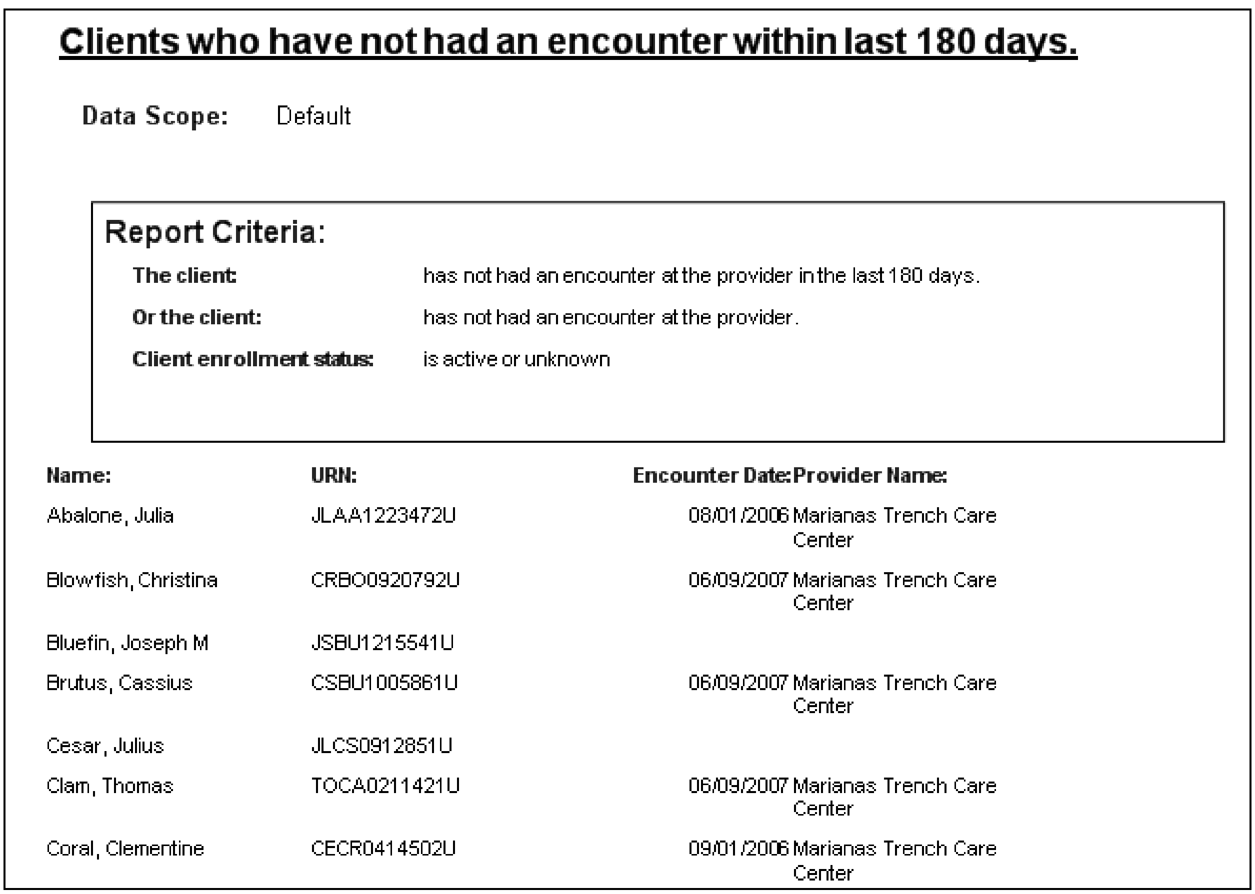
1. From the **Reports** menu, select **Clinical Encounter Reports**.



2. Make your selections as detailed below.



3. Select the Clients with no encounter in X days button.
4. Enter the **Number of Days** since the last encounter.
5. Click **Run Report**. A sample report is shown below.



Clients who have not had an encounter within last 180 days.

Data Scope: Default

Report Criteria:

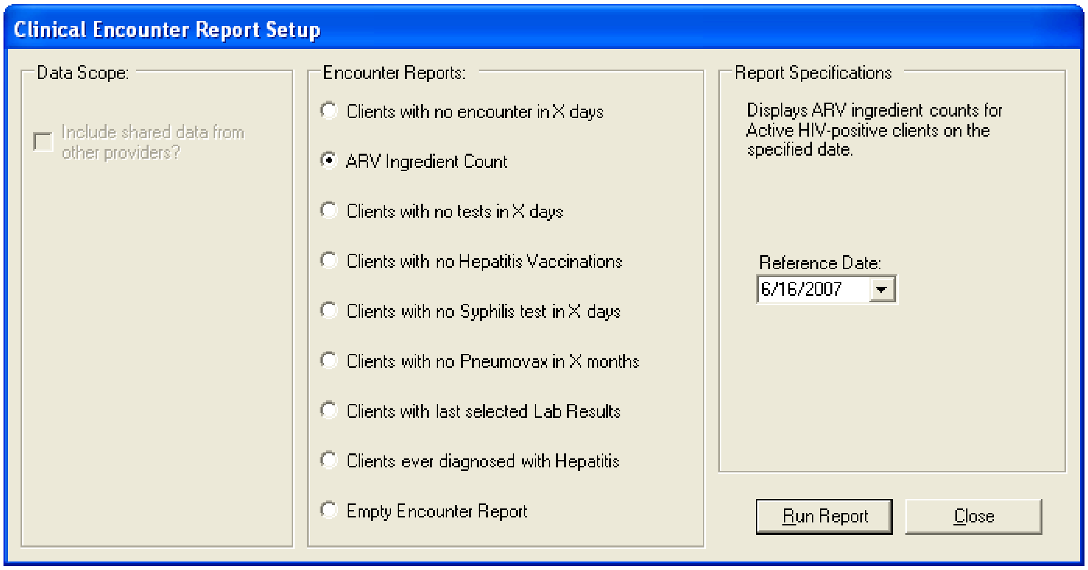
The client:	has not had an encounter at the provider in the last 180 days.
Or the client:	has not had an encounter at the provider.
Client enrollment status:	is active or unknown

Name:	URN:	Encounter Date:	Provider Name:
Abalone, Julia	JLAA1223472U	08/01/2006	Marianas Trench Care Center
Blowfish, Christina	CRBO0920792U	06/09/2007	Marianas Trench Care Center
Bluefin, Joseph M	JSBU1215541U		
Brutus, Cassius	CSBU1005861U	06/09/2007	Marianas Trench Care Center
Cesar, Julius	JLCS0912851U		
Clam, Thomas	TOCA0211421U	06/09/2007	Marianas Trench Care Center
Coral, Clementine	CECR0414502U	09/01/2006	Marianas Trench Care Center

ARV Ingredient Count

This report will generate a list of active HIV-positive clients and their antiretroviral medications, sorted by the number of ARV active ingredients they are taking on the day specified. If a client is on Combivir, for instance, that will be counted as two ingredients.

6. Make your selections as detailed below.



7. Select the **ARV Ingredient Count** button.
8. Select the **Reference Date** (the date for which the count is to be made, usually today).
9. Click **Run Report**. A sample report is shown below.

ARV Ingredient Report

Data Scope:

Report Criteria:

Vital Status:	Active
Enrollment Status:	Active
HIV Status:	Not equal to Negative or Unknown
Reference Date:	6/16/2007

Clients on 4 or more ARVs:

Name	Medications	Ingredients
Jellyfish, Ruby	AZT, TRZ	zidovudine, abacavir/lamivudine/retrovir

Clients on 3 ARVs:

Name	Medications	Ingredients
Maguro, Juan J	NFV, KLT	nelfinavir, ritonavir, lopinavir
Mollusk, Jane	AZT+3TC, EFV	zidovudine/lamivudine, efavirenz
Clam, Thomas	IDV, AZT+3TC	indinavir, zidovudine/lamivudine

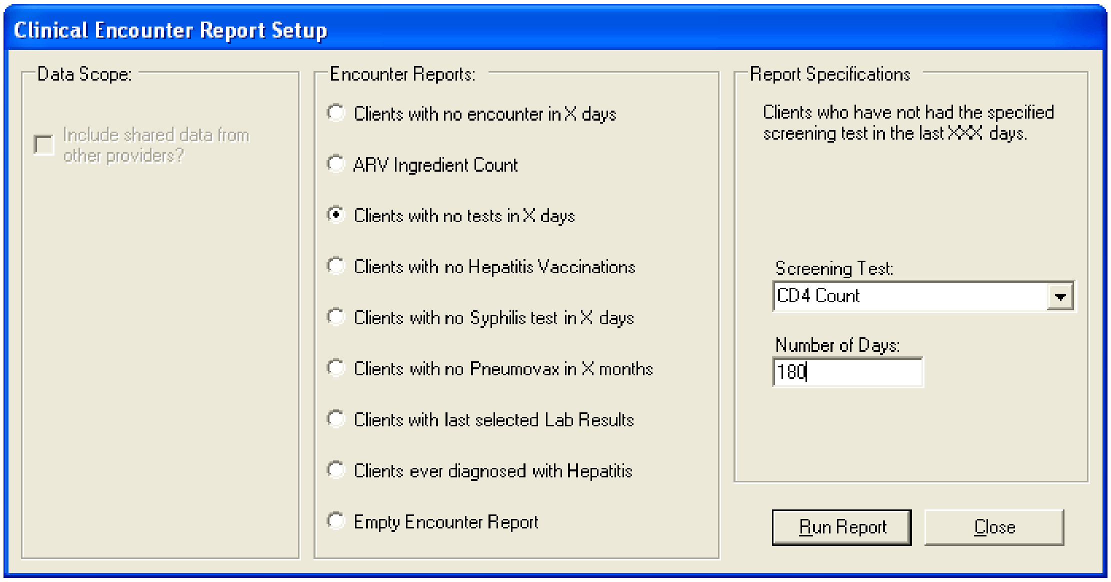
Clients on 2 ARVs:

Name	Medications	Ingredients
Mantaray, Peter	AZT+3TC	zidovudine/lamivudine
Cuttlefish, Constantine	3TC, FTC	lamivudine, emtricitabine
Coral, Clementine	AZT+3TC	zidovudine/lamivudine
Brutus, Cassius	3TC, ATA	lamivudine, atazanavir sulfate
Krill, Wendy	AMP, 3TC	amprenavir, lamivudine

Clients with no tests in X days

This test identifies clients who have not had any lab, screening or screening lab in a specific number of days.

10. Make your selections as detailed below.



11. Select the **Clients with no tests in X days** button.
12. Select the test from the **Screening Test** drop down menu.
13. Enter the **Number of Days**.
14. Click Run Report. A sample report is shown below.

Clients who have not had a CD4 Count within last 180 days.

Data Scope: Default

Report Criteria:

Provider:	Default
The client:	has not had a CD4 Count screening at the provider in the last 180 days.
Or the client:	has not had a CD4 Count screening at the provider.
Client enrollment status:	is active or unknown

Name:	URN:	Last Lab Result:	Last Screening Date:	Provider Name:
Abalone, Julia	JLAA1223472U	1150	8/1/2006	Marianas Trench Care Center
Bluefin, Joseph M	JSBU1215541U			
Cesar, Julius	JLCS0912851U			
Coral, Clementine	CECR0414502U	199	9/1/2006	Marianas Trench Care Center
Cuttlefish, William	WLCT0402601U			
Doe, Bob	BBDE0212711U	441	11/20/2003	Marianas Trench Care Center

Clients with no Hepatitis Vaccinations

Use the steps documented above, select **Hepatitis A or B**. This report will list clients with no vaccinations, or those who have only received a partial series.

Clients with no Syphilis test in X days

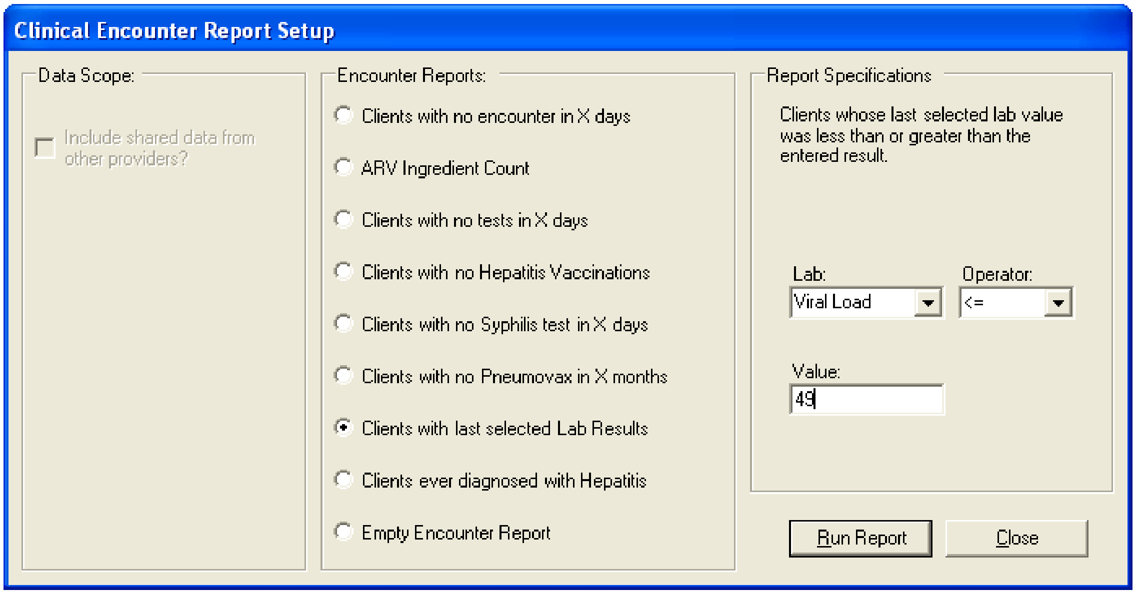
Use the steps documented above; select **Number of Days** since last test.

Clients with no Pneumovax in X months

Use the steps documented above; select **Number of Months** since last pneumonia vaccination.

Clients with last selected lab results

Make your selections as detailed below.



- Select the **Lab** to report on from the drop down menu.
- Choose the **Operator** (<=, =, or >=).
- Enter the numeric **Value**.
- Click **Run Report**. A sample report is shown below.

Clients with Viral Load <= 49 at last test.

Data Scope: Default

Report Criteria:

The client's: last Viral Load result was <= 49.

Client enrollment status: is active or unknown

Name:	URN:	Last Lab Result:	Last Lab Date:	Provider Name:
Abalone, Julia	JLAA1223472U	49	08/01/2006	Marianas Trench Ca Center
Blowfish, Christina	CRBO0920792U	49	06/09/2007	Marianas Trench Ca Center
Coral, Clementine	CECR0414502U	49	09/01/2006	Marianas Trench Ca Center
Deepwater, Jennifer	JNDE1209432U	49	06/15/2007	Marianas Trench Ca Center
Krill, Wendy	WNKI0319632U	49	06/09/2007	Marianas Trench Ca Center
Maguro, Juan J	JAMG1023481U	49	06/15/2007	Marianas Trench Ca Center
Squid, Jeremiah L	JRSU1215561U	49	02/09/2007	Marianas Trench Ca Center
Swordfish, Boris	BRSO0328871U	49	01/09/2007	Marianas Trench Ca Center

Empty Encounter Report

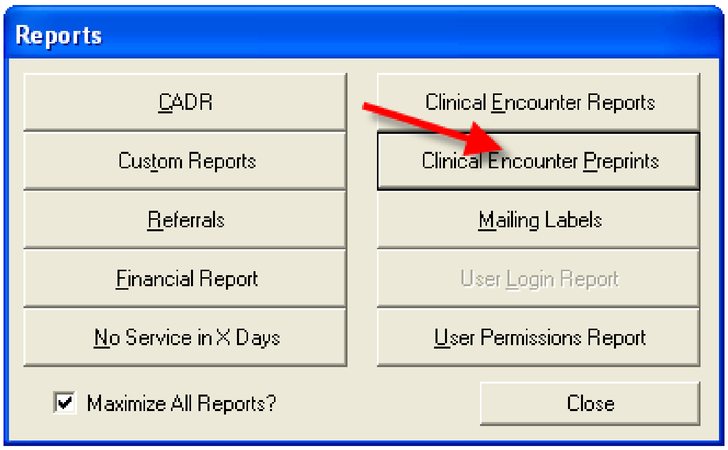
This lists clients for whom clinical encounters were created, but which were not populated with any clinical data. You can specify a date range or leave it blank to see all clients with empty encounters. This is a “quality check” feature that allows you to delete mistakenly entered encounters, or populate encounters with the relevant data.

1. Use the steps documented above; select a date range or leave blank to find all empty encounters.

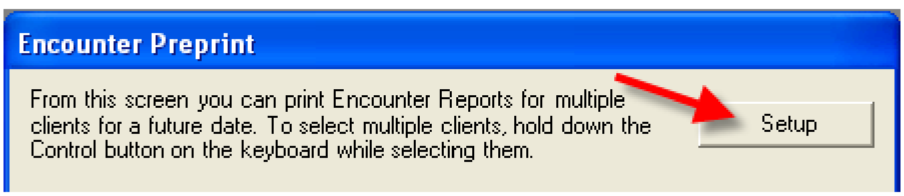
Clinical Encounter Preprints

Clinical encounter preprints are “flow sheets” many clinics use as a snapshot of a client’s most recent clinical data. You can use them as “preprints” to be marked up during an appointment, and/or as a flow sheet to be inserted in the chart after the information from the encounter is entered into CAREWare.

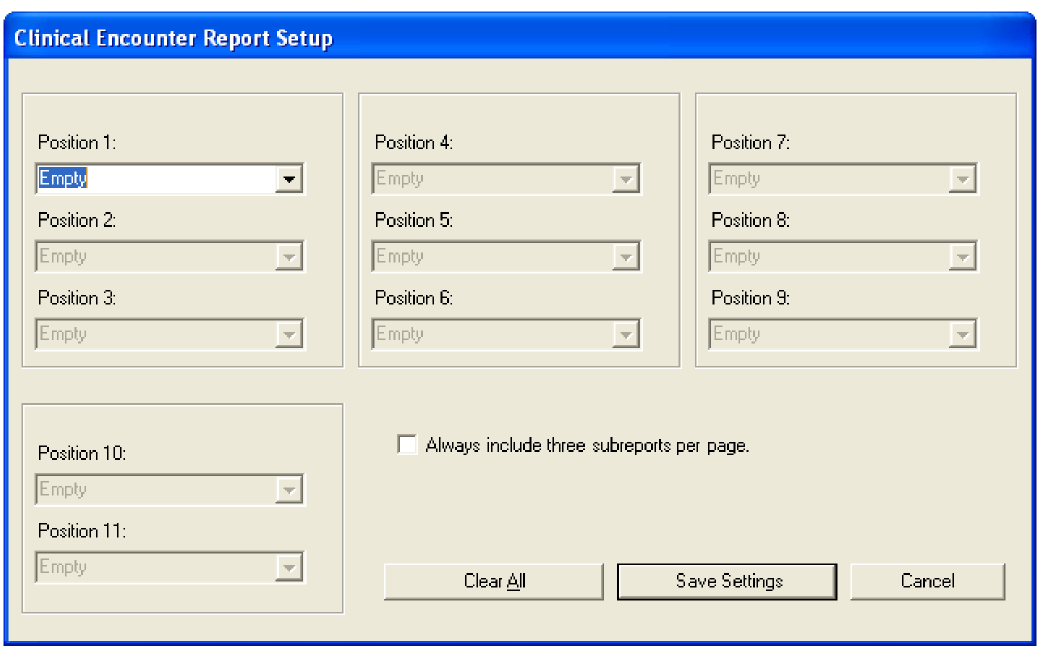
1. From the **Reports** menu, select **Clinical Encounter Preprints**.



2. Click **Setup** to set up the information provided on your preprints.



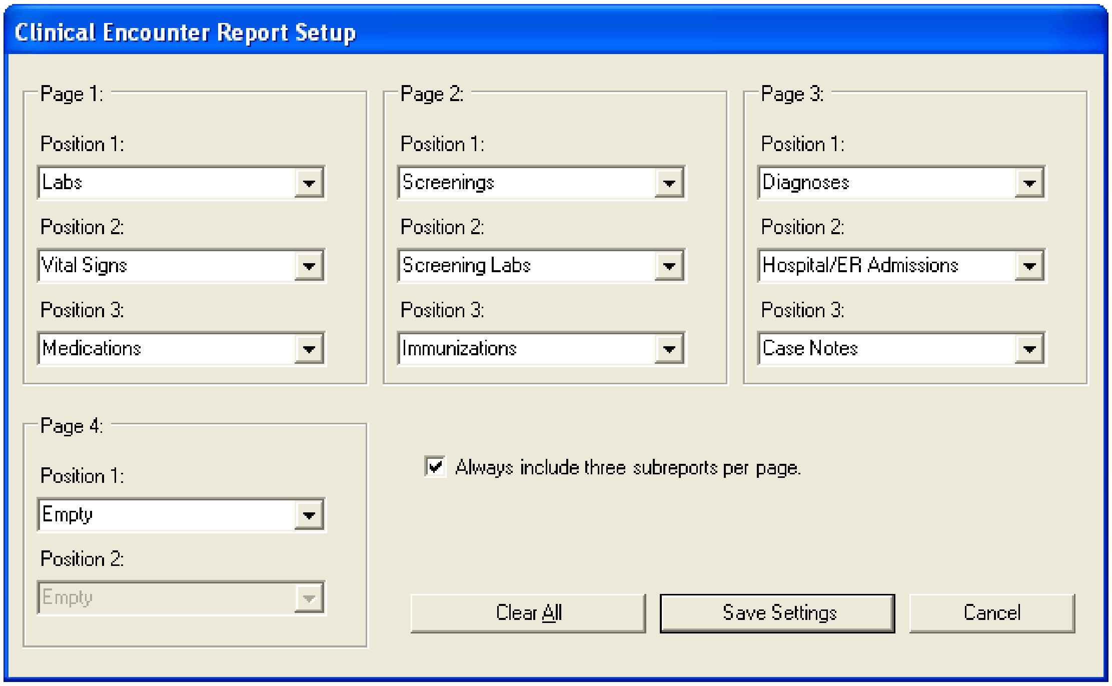
3. Make your selections as indicated below.



Each preprint can hold some or all clinical encounter data. Positions correspond to a related Encounters subtab – medications history, labs history, etc.

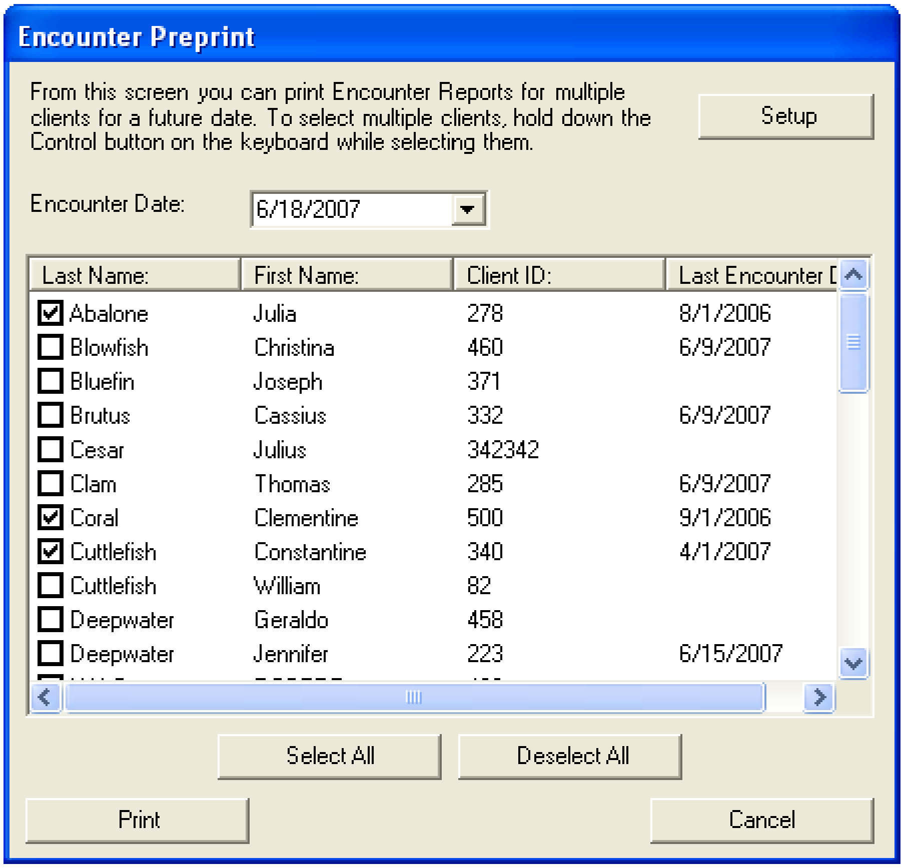
As each item is selected for a position on the page, it decreases the selections available for the following positions. You can select up to three per page, however; if you have a long list of available lab tests, for instance, this may take up more page space than a “normal” position.

Here is a typical preprint setup:

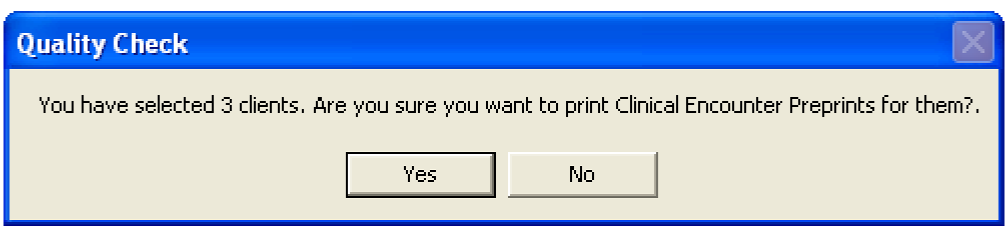


4. Click **Save Settings** to continue.

You can now select some or all client records to print. If you are using the form as a flow sheet, use the check boxes next to the clients to indicate the records to be printed, and select the date of their next encounter. Many clinics print client sheets for the next day’s visits at the end of the day.



5. Click **Print** to print these encounter reports. You'll be prompted if you wish to proceed. These encounters do not preview on screen but go directly to your default printer.



6. A sample is shown below.

Encounter Report

Client: THOMAS BAIRD

Visit Date: 11/19/2007

URN: TOBI1005821U

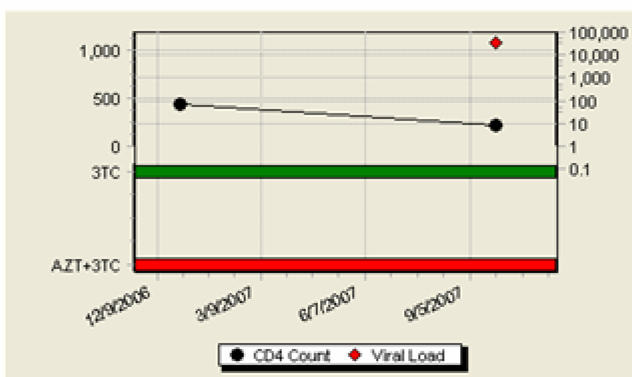
Birth Date: 10/5/1982

Last Visit Date: 9/28/2007

Main Labs

Date	CD4 Count	Hemoglobin	Viral Load	Weight	WBC
9/28/2007	210		32444	121	
12/28/2006	433				
6/28/2006	522				
1/10/2006	300				
9/1/2005	120				
8/10/2005			2300		
6/6/2005	90				

CD4 Count by Viral Load From: 11/19/2006 Through: 11/19/2007



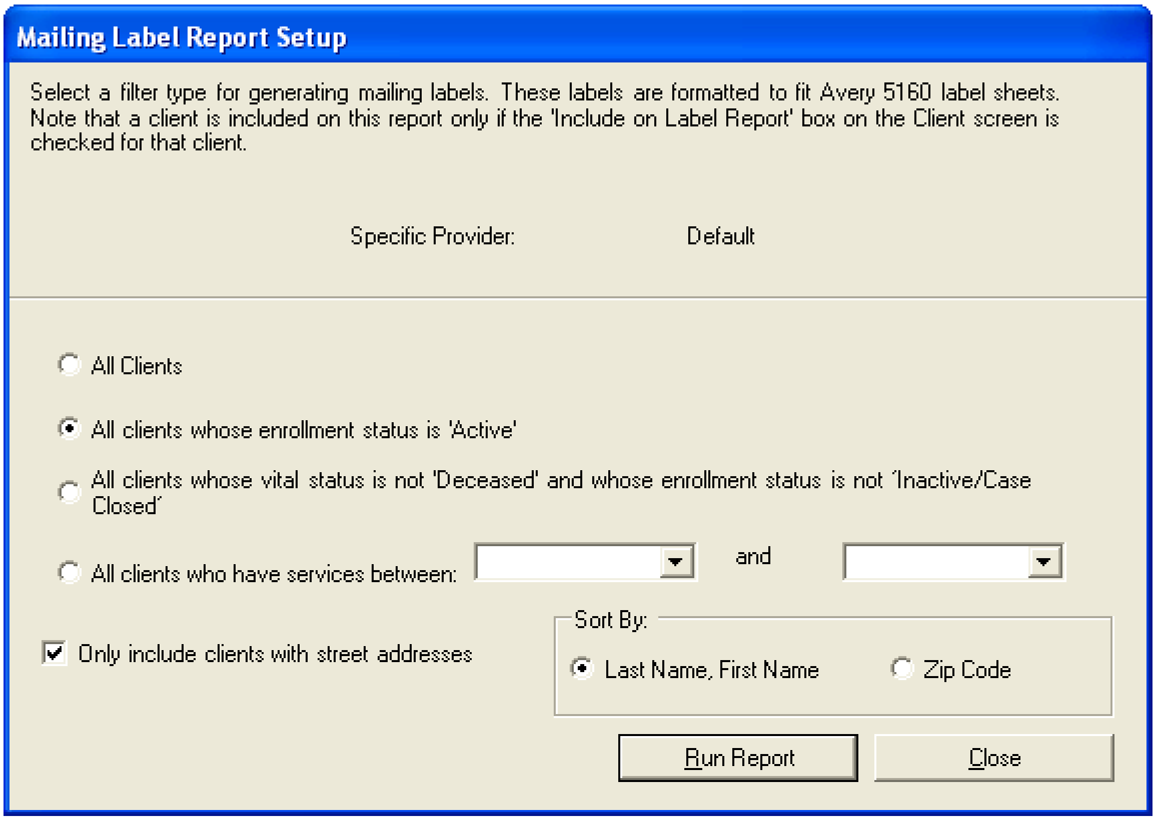
If column sizes on the clinical encounter report are too narrow or too wide, go into a client's encounter screen and resize the field to the desired width. Rerun the report and the new width will be reflected in the report. The new width that you have established will be stored for the next time you run the report.

Mailing Labels

You can generate mailing labels for clients with this report, which pre-formats client names and addresses to the Avery 5160 layout.

Only clients who have the "Include on Label Report" box checked on their Demographics screen will be included. To screen out clients who do not wish to receive mail, uncheck this box in their record.

1. From the **Reports** menu, click **Mailing Labels**.
2. Make your selections as detailed below.



The options above allow you to specify all clients, active clients, or only clients seen between certain dates. You can include only clients with street addresses (this includes PO Boxes), so that if the address line is blank, those clients will be excluded. You can sort by name or by zip code (for providers with large mailings who meter their mail and must sort it by zip).