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<td>YS<em>5.01</em>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.</td>
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<td>YS<em>5.01</em>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 SWEMWB (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-Figure 31, Figure 34, Figure 36, Figure 42-Figure 44, Figure 51, Figure 94.</td>
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<td>YS<em>5.01</em>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.</td>
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<td>YS<em>5.01</em>182 MHA Computerized Adaptive Testing. Adds the capability for Computerized Adaptive Testing (CAT) and Computerized Adaptive Diagnosis (CAD) to the web version of MHA. Update to 2.2. New sections are 2.3.1, 2.3.2, 2.3.3, 2.3.4, 2.3.5, 2.3.6, 2.3.7, 2.3.8, 2.3.9, 2.3.10, 2.3.11, 2.3.12, 2.3.13, 2.3.14, 2.3.15, 2.3.16, 2.3.17, 2.3.18, 2.3.19, 2.3.20, 2.3.21, and 2.3.22. New figures are 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, and 61.</td>
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1. MHA Web

The Mental Health Assistant (MHA) Web application is the management tool for clinicians to create administrative assignments for patient completion, complete administrations through a Staff Entry interface, and review completed assessment reports. The MHA Web 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 Web 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 Web 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 Web and Mental Health Package (MHP) initiate steps toward re-engineering VistA Mental Health functionality.

The Mental Health Checkup (MHC) Provider Application and MHA Web 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 Web Overview

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

- **MHA Web Banner**
- **Patient Plan**
  - Active Assignments
  - Completed Assignments
- **Dashboard**
  - Review Assessment(s)
  - High Risk Patient
- **Logout**

2.1. Starting MHA Web

MHA Web is launched from the CPRS Tools menu (Figure 1). To begin, access the CPRS Tools menu and select MHA Web. 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.
Figure 1: CPRS Tools Menu - MHA Web

Figure 2: Single Sign-On Page
2.2. CCOW Information

If Clinical Context Object Workgroup (CCOW) is not connected, MHA Web cannot follow the patient change notification from CPRS. There are multiple conditions that can cause this issue.

2.2.1. 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 Web responds to the patient changes made in CPRS.

![Figure 3: CPRS CCOW Connected](image)

2.2.2. Disconnected Context

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

![Figure 4: CPRS CCOW Not Connected](image)

2.2.3. 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).
2.2.4. MHA Web Connected Context

When launching MHA Web from CPRS, MHA Web will attempt to join the context session already established. If it is successful, the banner will not display any warnings (See Figure 6).

Figure 6: MHA Web Landing Page - CCOW Connected
2.2.5. MHA Web Unable to Connect to Context

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

![Figure 7: MHA Web Landing Page - CCOW Not Connected](image)

2.2.6. Multiple MHA Web Instances Open

When launching MHA Web from CPRS, MHA Web 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 Web Context Already Joined Message](image)
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. ***
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 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.

3. MHA Web Banner

The MHA Web 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 Changing Patient in Context (CCOW) status. All functions performed in MHA Web apply to the patient displayed in the banner.
3.1. Patient in Context (CCOW)

When a new patient is selected in CPRS, MHA Web automatically updates the header information and patient assignment details to the newly selected patient in the Patient Plan view. A dialog is displayed to inform the provider of the context change and requires the user to acknowledge the change (Figure 12).

![Figure 12: Context Change Popup](image)

There is an icon on the right side of the MHA Web 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](image)

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](image)

3.1.1. Help Link

Selecting the Help link within the MHA Web banner opens the MHA Web Quick Start Guide as a Portable Document Format (PDF) file. This PDF is used to give the provider an overview of MHA Web and its many features.
3.1.2. 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.

3.1.2.1. 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.
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.
Selecting the `+` button brings up the list of all instruments to customize the Battery. Select the `✓` 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.

**Figure 18: Batteries - Battery Creation Confirmation**

![Manage Batteries](image)

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 `🗑️` button causes a confirmation message to appear. Selecting Delete removes the selected battery.

**Figure 19: Batteries – Delete Battery Confirmation**

![Delete Battery](image)

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 Web.
3.1.2.2. Favorites

Frequently used instruments can be configured from this interface. Favorites will allow pre-selected 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.
To add a new Favorite, click the box next to the instrument name. The instrument name will appear in the Favorites Chosen list.

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

4. MHA Web Patient Plan

MHA Web 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 Web Banner
- Active Assignments
- Completed Assignments
- 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 MHC assignments (assignments scheduled for the Veteran to complete outside of the Mental Health clinic). These assignments
can be edited, executed, or deleted, based on situational requirements. Reference the Edit an Assignment and Delete an Assignment sections of this document for more detail.

An icon 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.

**Figure 24: Active Assignments Table**

<table>
<thead>
<tr>
<th>Assigned Date</th>
<th>Due Date</th>
<th>Type/PIN</th>
<th>Instrument</th>
<th>Frequency</th>
<th>Progress</th>
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<tr>
<td>Dec 09, 2022</td>
<td>Dec 09, 2022</td>
<td>MHC</td>
<td>PHQ-9</td>
<td>Weekly</td>
<td>N/A</td>
</tr>
<tr>
<td>Dec 09, 2022</td>
<td>Dec 16, 2022</td>
<td>Staff</td>
<td>MCM4</td>
<td>N/A</td>
<td>0%</td>
</tr>
<tr>
<td>Dec 09, 2022</td>
<td>Dec 16, 2022</td>
<td>49607</td>
<td>ATQ</td>
<td>N/A</td>
<td>0%</td>
</tr>
</tbody>
</table>

### 4.1.1. Review Active Assignment(s)

When a provider creates an Assignment in either of the Create Staff Entry/Patient Entry Assignment Windows, the Active Assignments 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. Staff Entry assignments will also be displayed if they are not completed. MHC assignments will be displayed but can only be deleted.
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 🖊️. 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 Web landing page. MHC assignments cannot be edited at this time, only deleted.

***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.***
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. The **Delete Assignment** (Figure 27) 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 Web landing page.
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 28.

![Print Blank Instrument Window](image-url)

**Figure 28: Print Blank Instrument Window**
4.2. Creating Assignment(s) for Staff Entry and Patient Entry

MHA Web 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 (will be covered in detail in a separate section).

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.
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 the Executing a Staff Entry Assignment section of this document.) The user can hover over an instrument to display the instrument’s full name and can navigate to the question mark icon to display greater detail on the instrument.

Figure 31: 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 plus 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 minus icon.
4.2.1.1.1. 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).
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.
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 37: Instruments Chosen Field](image)

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 38: Instruments Chosen Field (Tools)**

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

MHA Web 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 Web Banner.

- If the user attempts to add more than eight instruments to the Favorites list, an error message will be displayed (Figure 39).

**Figure 39: Staff Entry/Patient Entry - Error Message - Maximum Number of Favorites**
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.***
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.***
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 44: Location Field](image)

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 45: Date Field](image)
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 by 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.

Figure 46: 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 Web landing page.

Figure 47: Create Assignment - Action Buttons

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 Web Patient Entry section in this document.

**Figure 48: Create Assignment - Patient Entry Action Button**

Click to Create Patient Entry Assignment

**Figure 49: 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** section.

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

**Figure 50: Create Assignment – Staff Entry Action Button**

Click to Create Staff Entry Assignment

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 boxes beside all desired instruments.

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

**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**.
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.

4.3. Creating Assignment(s) for MHC – on a Veterans Personal Device

The merger of MHA Web 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.
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.

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 mobile phone. 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.
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.

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.
4.3.1.2.2. 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 59: Remove Favorites in MHC Create Assignment Screen

4.3.1.2.3. 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 60: MHC - Schedule Instrument(s) – No Instrument Selected

4.3.1.2.4. MHC - Schedule Instrument(s) Options

There are multiple decisions that must be made when creating an assignment for a Veteran to complete outside of a VA facility. 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 of the assignments.

- Instrument – An individual instrument (measure) to be assigned to the Veteran.
- Ordered By – The provider that will be signing the Progress Note. (Defaulted to the same user as the Staff Entry/Patient Entry Ordered By.
- 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 assessment.

![Figure 61: MHC - Schedule Instrument(s) - Multiple Instruments Selected]

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 Web 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 62: Staff Entry Execution Screen]
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 Web 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 63).

![Figure 63: Staff Entry Action Buttons](image)

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 63). **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 64). If the provider selects **No**, they remain in the administration. If they select **Yes**, the provider is returned to the MHA Web landing page and a **Staff** assignment ID is created in the **Active Assignments** table.
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.

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 66).
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 67).

![Figure 67: CAT Timeframe Reminder](image)

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 68).

![Figure 68: CAT Administration Questions](image)

4.4.4. Finishing an Administration

Once an assessment is complete, the user can select the Finish button and MHA Web opens the Progress Note window that allows the user to Save Note, Do Not Save Note, or Copy Text (Figure 69).
4.4.4.1. Save Note

Selecting the **Save Note** button creates a Progress Note for the administration in CPRS (Figure 70). The report created from the completed administration is accessible in the **Completed Instruments** section of MHA Web.

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 70). However, the report created from the completed administration is accessible in the **Completed Instruments** section of MHA Web.

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 70).
4.4.5. Restricted Instrument(s)

If the instrument being completed in the assessment is a restricted instrument, MHA Web 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 71). Selecting Continue returns the user to the MHA Web main landing page where they can then select the instrument name and view the report for that date of completion.

![Figure 71: Restricted Instrument Warning Popup](image)

4.5. Completed Assignments

The Completed Assignments 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.

**Figure 72: Completed Assignments Field**

![Completed Assignments Field]

4.5.1. Reviewing Completed Assessments (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 Web 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 Web will display the details of the report for review (Figure 73).
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 74).

Figure 74: 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 74).

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 75 and Figure 76).

**Figure 75: Graph Slider Bar Adjustments (Expanded Range)**

**Figure 76: Graph Slider Bar Adjustments (Narrowed 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 77).

Figure 77: Data Table - Expanded Categories

4.5.4. Append Comments

An additional option for appending comments to the patient report has been added to MHA Web. By selecting the 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 78).***
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 **Assignment Deleted!** The user can then close the popup and the completed report will be deleted from MHA Web. 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 81)***
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 82, Figure 83, Figure 84). When printing a report, the last 4 of the patient SSN will be removed.
Date Given: 12/12/2022
Clinician: 
Location: Dr/ht Test
Veteran: Avl/patient, Three
DOB: Mar 1, 1940 (82)
Gender: Female

PCL-5 Score: 32

This measure assesses an individual’s perception of the distress associated with possible PTSD symptoms. It is not used to diagnose PTSD. Symptoms are rated from 0-4 in terms of distress they cause the individual. Scores that are greater than or equal to 31-33 suggest that the veteran may meet the criteria for a PTSD diagnosis. However, it is important to use caution when using this cutoff since it is possible for some Veterans with scores lower than 31-33 to meet criteria for PTSD.

Additional testing using a structured diagnostic interview, such as the Clinician Administered PTSD Scale for DSM-5, is recommended to confirm diagnostic status.

Questions and Answers:
1. Repeated, disturbing, and unwanted memories of the stressful experience?
   A little bit
2. Repeated, disturbing dreams of the stressful experience?
   Moderately
3. Suddenly feeling or acting as if the stressful experience were actually happening again (as if you were actually back there reliving it)?
   Quite a bit
4. Feeling very upset when something reminded you of the stressful experience?
   A little bit
5. Having strong physical reactions when something reminded you of the stressful experience (for example, heart pounding, trouble breathing, sweating)?
   Not at all
6. Avoiding memories, thoughts, or feelings related to the stressful experience?
   Quite a bit
7. Avoiding external reminders of the stressful experience (for example, people, places, conversations, activities, objects, or situations)?
   Moderately
8. Trouble remembering important parts of the stressful experience?
   A little bit
9. Having strong negative beliefs about yourself, other people, or the world (for example, having thoughts such as: I am bad, there is something seriously wrong with me, no one can be trusted, the world is completely dangerous)?
   Not at all
10. Blaming yourself or someone else for the stressful experience or what happened after it?
   "\[\text{Not a bit}\]"
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 button.

**Figure 85: Special Reports - No Instruments**
Figure 86: Special Reports - Instrument Selection

Select Instruments (maximum of 8 instruments)

Addiction-SUD
- AUDC
- AUDIT
- BAN-C
- BAM-IP

ADL Func Status
- BARTHEL INDEX
- FAST
- IADL
- KATZ-ADL-18PT

Anxiety/PTSD
- BAI
- CAT-ANX
- CAT-PTSD
- CAT-PTSD-E

CAT/CAD
- CAT-ADHD
- CAT-ANX
- CAT-DEP
- CAT-MANIA-HYPOMANIA

Cognitive
- AD8
- BOMC
- CDR
- GDS DEMENTIA

Couples/Family Func
- CSI
- CSI PARTNER VERSION

EBP
- AAQ-2
- ATQ
- B-IPF
- CEMI

Employment
- ERS
- IUS

Frequent MBOs
- BASIS-24
- ISS-2
- POL-5 WEEKLY
- PHQ-9

General Symptoms
- BASIS-24
- BSL-23
- BUSSS
- CCSA-DSM5

Pain
- AD6

Pain/Health
- BBHi-2
- COPO
- FTND
- HSI

Personality
- MSMD
- MCM13

Quality of Life
- B-IPF
- NPO-Q
- PHI
- G-LES-Q-5F

Recovery
- BRS
- IMRS
- ISMI
- MHRM

Screening
- ACE
- ASSIST-NIDA
- ASSIST-WHOV3
- AUDC

Sleep
- CMQ
- D.BAS
- ISI
- RLS

Suicide Prevention
- BHS
- BS18
- BS5
- CAT-SS

View All 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.
Figure 88: Special Reports - Single Graph with No Scales

Figure 89: Special Reports - Single Graph with Multiple Scales
4.6. MHA Web Server Timeout

The MHA Web 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 Web automatically ends that session and logs the user out of the application (Figure 90).

![Figure 90: Timeout Popup](image)

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 91: MoCA Attestation Popup](image)
4.8. Logout

The MHA Web 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 Web. This ensures the user is logged completely out of Identity Management.

![Figure 92: MHA Web Logout Button](image)

![Figure 93: IAM (SSO) Logout Button](image)
5. MHA Web Dashboard

The following paragraphs provide details on accessing and using Dashboard. The Dashboard consists of two views, Review Assessment(s) and High-Risk Patients.

5.1. Accessing Dashboard

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

![Figure 96: Review Assessment(s) Dashboard](image)

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. 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).

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 four possible states:
  - Reviewed – Has already been reviewed by the Provider.
  - 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.
  - Historical – Assessments that were done in the past before the standards were created for MHC. These are available for completeness.

- **Action**
  - **View Report icon** – This icon will bring up a window displaying a view of the selected assessment. Clicking View Report will mark the assessment as Reviewed (Figure 97).
    - **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.
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.
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 available in the entire site. This will include all patients that have completed an assessment, regardless of the provider. When clicking on this link, a warning will appear verifying the provider has a need to know before viewing the data.

![View Site Assessment(s) Warning](image)

**Figure 99: View Site Assessment(s) Warning**

By clicking "View Site-Level Report" below, I confirm that I have a need to view facility-wide data.

![View Site Assessment(s) Dashboard](image)

**Figure 100: View Site Assessment(s) Dashboard**

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.
  o Results with a potential for critical score require review within one business day
  o Results without a potential for critical score require review within three business days.
• Review Status – The current review status of the assessment. There are four possible states
  o Reviewed – Has already been reviewed by the Provider
  o Needs Reviewed – Still in the queue to be reviewed.
  o Overdue – The review date has passed, and the assessment review is now overdue
  o Historical – Assessments that were done in the past before the standards were created for MHC. These are available for completeness.
• Action
  o View Report icon – This icon will bring up a window displaying a view of the selected assessment. Clicking View Report will mark the assessment as Reviewed (Figure 97).
  ▪ 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. Click Do Not Save Note, will still save the assessment, just will not create a Progress Note.

5.3. High-Risk Patient View

The following paragraphs detail the High-Risk Patient (HRP) view.
5.3.1. Overview

The HRP view allows the user to view a cohort of Veterans who are currently flagged as High Risk for Suicide (Cat I Patient Record Flag (PRF) active). The data is "living" data which means that a user action, such as a browser refresh, results in an update of the data contained in the widget.

Figure 101: High-Risk Patient View

5.3.2. HRP - View/Hide Columns

The View Columns icon allows the user to customize which columns they want to show or hide.

***NOTE*** The Name column cannot be hidden from view.***
5.3.3. HRP 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 which opens a text field where the search parameters can be entered as shown in screen below (Figure 104).
5.3.4. HRP Cohort Selection Criteria

The HRP Cohort will include veterans who currently have an active High Risk Patient record flag where the division owning the record flag matches the user’s division.

5.3.5. HRP Available Columns

Within the columns, each row in the columns is clickable and will provide more in-depth information regarding the patient. Listed in the following sections are the names, description/purpose, data source and considerations for each column.

5.3.5.1. Name

The column **Name** displays the patient’s name in the format LAST NAME, FIRST NAME. This column supports the ability to click on a given status value and display the High-Risk drilldown with the High-Risk Patient Profile tab on the left side of the window selected to provide additional details.
5.3.5.2. High Risk PRF

Only patients that have an active High Risk for Suicide flag will be displayed in the HRP View, therefore, the column **High Risk PRF** will always display **YES**. This column supports the ability to click on a given status value and display the High-Risk Widget drilldown with the High-Risk Patient Profile tab on the left side of the window selected to provide additional details.

5.3.5.3. Division

The column **Division** displays the division that was used when assigning or updating the High Risk PRF in VistA. This column supports the ability to click on the Division and have the HRP drilldown display with the HRP Profile tab on the left side of the window selected to provide additional details.
5.3.5.4. Review Date

The column **Review Date** displays the date that the High Risk for Suicide flag is scheduled to be reviewed in the format of MM/DD/YYYY. This column supports the ability to click on a given status value and the HRP drilldown will be displayed with the HRP Profile tab on the left side of the window selected to provide additional details.

![Figure 108: HRP View - Review Date Column](image)

5.3.5.5. Due/Overdue

The column **Due/Overdue** displays an icon indicating the status for the review of the High Risk for Suicide flag. This column supports the ability to click on a given status value and the HRP drilldown will be displayed with the HRP Profile tab on the left side of the window selected to provide additional details.

The icons are as follows.

- ![Green Check](image) Indicates the review status is current
- ![Yellow Exclamation](image) Indicates the review status is due within the next 2 weeks.
- ![Red Exclamation](image) Indicates the review status is overdue

![Figure 109: HRP View - Due/Overdue Column](image)

5.3.5.6. Last D/C

The column **Last D/C** displays the date when the patient was last discharged from a Mental Health Facility in the format of MM/DD/YYYY.

If the patient is currently admitted to an inpatient Mental Health Facility, then the column will display **INPT**.
If the patient has never been admitted to an inpatient Mental Health Facility, then the column will display **N/A**.

This column supports the ability to click on a given status value and the HRP drilldown is displayed with the HRP Profile tab on the left side of the window selected to provide additional details.

**Figure 110: HRP View - Last Discharge Date**

![Last D/C]

5.3.5.7. **Last MH Visit**

The column **Last MH Visit** displays the most recent mental health appointment in the format **MM/DD/YYYY**.

If the patient has no previous mental health appointments, the text **N/A** is displayed. This column supports the ability to click on a given status value and the HRP drilldown is displayed with the HRP Profile tab on the left side of the window selected to provide additional details.

**Figure 111: HRP View - Last MH Visit Column**

![Last Mental Health Visit]

5.3.5.8. **Next MH Appt.**

The column **Next MH Appt.** displays the next upcoming mental health visit in the format **MM/DD/YYYY**.

If the patient has no upcoming mental health appointments, the text **Not Scheduled** is displayed. This column supports the ability to click on a given status value and the HRP drilldown will be displayed with the HRP Profile tab on the left side of the window selected to provide additional details.
5.3.5.9. On Track

The column **On Track** displays an icon indicating if the patient’s treatment is on track by having a combination of 4 completed appointments and/or upcoming appointments within 30 days of being discharged from a Mental Health facility. This column supports the ability to click on a given status value and the HRP drilldown will be displayed with the HRP Profile tab on the left side of the window selected to provide additional details (Figure 113).

The icons are as follows:

- ![Green Check](icon.png) Indicates the patient’s treatment is on track and the patient has a combination of 4 completed and/or scheduled appointments within 30 days of being discharged from a Mental Health Facility.

- ![Red X](icon.png) Indicates the patient’s treatment is NOT on track and the patient does NOT have a combination of 4 completed and/or scheduled appointments within 30 days of being discharged from a Mental Health Facility.

If the patient is currently admitted to a Mental Health facility, or if the patient has never been admitted to a Mental Health facility, **N/A** is displayed.

5.3.5.10. Last Safety Plan

The column **Last Safety Plan** displays the date the last Safety Plan was completed in the format MM/DD/YYYY.

If a Safety Plan does not exist, the text **NOT DONE** is displayed.

If the patient declined to complete a Safety Plan, the text **DECLINED** is displayed.
**NOTE** ONLY Safety Plans that are part of a SIGNED Progress Note will be displayed in this column.

This column supports the ability to click on a given status value and the HRP drilldown will be displayed with the High Risk Patient Profile tab on the left side of the window selected to provide additional details.

**Figure 114: HRP View - Last Safety Plan Column**

![Last Safety Plan](image)

### 5.3.5.11. Done in 7 Days

The column **Done in 7 Days** indicates if the patient completed a Safety Plan within 7 days of the High Risk for Suicide flag being activated. This column supports the ability to click on a given status value and the HRP drilldown will be displayed with the HRP Profile tab on the left side of the window selected to provide additional details.

The indicators are as follows:

- **Completed**: Indicates the Safety Plan was completed within 7 days of the High Risk for Suicide flag activation.
- **Pending**: Indicates the Safety Plan has NOT been completed but is still within the 7 days of the High Risk for Suicide flag activation.
- **Overdue**: Indicates the Safety Plan has NOT been completed and it has been more than 7 days of the High Risk for Suicide flag activation.
- **Done Late**: Indicates the Safety Plan was completed in more than 7 days of the High Risk for Suicide flag activation.
- **Declined**: Indicates the patient has declined to complete a Safety Plan.
5.3.5.12. Last CSRE

The column **Last CSRE** displays the date the last Comprehensive Suicide Risk Evaluation (CSRE) was completed in the format MM/DD/YYYY.

If a CSRE has never been completed, the text **NOT DONE** is displayed.

This column supports the ability to click on a given date or the text **NOT DONE**, and the HRP Profile drilldown will be displayed to provide additional details.

***NOTE*** ONLY a CSRE that is part of a SIGNED Progress Note will be displayed in this column.***

5.3.5.13. PHQ-9

The column **PHQ-9** displays the score of the last PHQ-9 administration.

If the patient has never been administered a PHQ-9, the text **N/A** is displayed.

This column supports the ability to click on the score or the text **N/A** and the HRP Profile drilldown HRP drilldown is displayed with the HRP Profile tab on the left side of the window selected. Click the PHQ-9 tab to view additional details.
5.3.5.14. PHQ-9 Date

The column **PHQ-9 Date** displays the date the last PHQ-9 was completed in the format of MM/DD/YYYY.

If the patient has never been administered a PHQ-9, the text *N/A* is displayed.

This column supports the ability to click on a given date or the text *N/A* and the HRP drilldown is displayed with the High Risk Patient Profile tab on the left side of the window selected. Click the **PHQ-9** tab to view additional details.

**Figure 118: HRP View - PHQ-9 Date Column**

5.3.5.15. PHQ-9 Trends

The column **PHQ-9 Trends** displays spark lines to show the trend of up to the last 10 PHQ-9 administrations.

If the patient has never been administered a PHQ-9, the text *N/A* is displayed.

This column supports the ability to click on the spark lines or the text *N/A* and the HRP drilldown will be displayed with the High Risk Patient Profile tab on the left side of the window selected. Click the PHQ-9 tab to view additional details.

**Figure 119: HRP View - PHQ-9 Trends Column**

5.3.5.16. PHQ-9 I9

The column **PHQ-9 I9** displays the results of Question 9 from the PHQ-9.

If the patient has never been administered a PHQ-9, the text *N/A* is displayed.

This column supports the ability to click on the score or the text *N/A* and the HRP drilldown will be displayed with the HRP Profile tab on the left side of the window selected. Click the PHQ-9 tab to view additional details.
5.3.5.17. C-SSRS

The column C-SSRS displays whether the last administration of the C-SSRS was Positive or Negative.

If the patient has never been administered a C-SSRS, the text N/A is displayed.

This column supports the ability to click on the text Positive, Negative or N/A and the HRP drilldown will be displayed with the High Risk Patient Profile tab on the left side of the window selected. Click the C-SSRS tab to view additional details.

5.3.5.18. C-SSRS Date

The column C-SSRS Date displays the date the last C-SSRS was completed in the format MM/DD/YYYY.

If the patient has never been administered a C-SSRS, the text N/A is displayed.

This column supports the ability to click on the date or the text N/A and the HRP drilldown will be displayed with the HRP Profile tab on the left side of the window selected. Click the C-SSRS tab to view additional details.
5.3.6. HRP Drilldowns

The following paragraphs provide details on the HRP Profile drilldown.

5.3.6.1. High Risk Patient Profile

The HRP Profile drilldown can be accessed by clicking on any of the columns on the HRP View.

Figure 123: HRP View - Accessing the Drilldown

The HRP View drilldown provides a thorough view of a patient’s care. It includes information for:

- High Risk for Suicide Patient Record Flag
- Missing Patient Record Flag
- Behavioral Patient Record Flag
- Previous Appointments
- Future appointments
- Safety Plan
- CSRE
- Review status

Some content can be further expanded to see applicable notes and, if applicable, will be accessible via the link provided within the given windows.

5.3.6.2. HRP Profile

The HRP Profile contains multiple sections for Patient Flag Records, Previous and Future Mental Health appointments, Patient Record Flags and Review Status.

5.3.6.2.1. Patient Record Flags

The PRF window displays the history for the High Risk for Suicide PRF, Missing PRF and Behavioral PRF.
The columns include the following information:

- **Review Date** – Displays the date the flag is scheduled to be reviewed. If no review date has been assigned, the text **N/A** is displayed.

  If a PRF is inactivated, the review date for the previous PRF action will be displayed as **UNK**.

- **Due/Overdue** – displays an icon indicating the status for the review of the High Risk for Suicide flag.

  The icons are as follows:

  - ![Green Check](Image) Indicates the review status is current
  - ![Yellow Exclamation](Image) Indicates the review status is due within the next 2 weeks.
  - ![Red Exclamation](Image) Indicates the review status is overdue

- **PRF Actions** – Displays the Action taken on the flag.
- **Action Date** – Displays the date the Action on the flag was taken.
5.3.6.3. Previous Appointments

The **Previous Appointments** window displays the selected patient’s past Mental Health appointments. It displays the location of the clinic, the date of the previous appointment, the provider, and the status of the visit.

If there is a **Progress Note** associated with the visit, a link will be provided in the **Status** column to view the note.

**Figure 125: HRP View Drilldown - Previous Appointments**

Clicking the link invokes a **Progress Note** display.

**Figure 126: HRP View - Drilldown Progress Note**
5.3.6.4. Future Appointments

The **Future Appointments** window displays the selected patient’s future Mental Health appointments. It displays the location of the clinic and the date of the future appointment.

![Figure 127: HRP View - Drilldown Future Appointments](image)

<table>
<thead>
<tr>
<th>Location</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>MENTAL HYGIENE-OPC</td>
<td>8/18/2022@09:00</td>
</tr>
</tbody>
</table>

5.3.6.5. Safety Plan

The **Safety Plan** window displays the dates (as links) of all the previous Safety Plans that have been completed by the patient. If a Safety Plan has not been completed by the patient, the text *Not Done* will be displayed. The date of the safety plan matches the date of the encounter with which it is associated.

![Figure 128: HRP View - Drilldown Safety Plan](image)

<table>
<thead>
<tr>
<th>Safety Plan</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>6/30/2022</td>
</tr>
<tr>
<td></td>
<td>11/3/2021</td>
</tr>
</tbody>
</table>
Clicking the date invokes a modal that displays the signed Safety Plan.

**Figure 129: HRP View - Drilldown Safety Plan Progress Note**

-----

5.3.6.6. CSRE

The **CSRE** window displays the dates (as links) of all the previous CSREs that have been completed by the patient. If a CSRE has not been completed by the patient, the text *Not Done* is displayed.

**Figure 130: HRP View Drilldown - CSRE Dates**
Clicking the date invokes a modal that displays the signed CSRE.

**Figure 131: HRP View - Drilldown - Signed CSRE**

5.3.6.7. Review Status

The **Review Status** window displays the status of the High Risk for Suicide flag, if a patient is on track with their treatment or not, and if a Safety Plan has been completed or not.

The **Review Count** displays how many days are left before the High Risk for Suicide flag is due for review or it will display how many days overdue the review is.

In the example below, the High Risk for Suicide flag is due in 9 days.

**Figure 132: HRP View - Drilldown - Review Status**

- **Review Status**
- **Review Count**: 9 days
- **On Track**: No
- **Safety Plan 7 Day count**: 1 days
In the example below, the High Risk for Suicide flag was due 197 days ago, therefore, overdue by 197 days.

**Figure 133: HRP View - Drilldown - Overdue Review Status**

![Review Status](image)

**On Track** displays an icon indicating if the patient’s treatment is on track by having a combination of 4 completed appointments and/or upcoming appointments within 30 days of being discharged from a Mental Health Facility.

The icons are as follows:

- **Green check mark**: Indicates the patient’s treatment is on track and the patient has a combination of 4 completed and/or scheduled appointments within 30 days of being discharged from a Mental Health Facility.

- **Red 'x'**: Indicates the patient’s treatment is NOT on track and the patient does NOT have a combination of 4 completed and/or scheduled appointments within 30 days of being discharged from a Mental Health Facility.

If a patient has never been admitted to a Mental Health Facility or is currently admitted to a Mental Health Facility, the text **N/A** will be displayed.

The **Safety Plan 7 Day count** indicates if the patient completed a Safety Plan within 7 days of the High Risk for Suicide flag being activated. If a Safety Plan has not been completed, the number of days that are left before the Safety Plan is due is displayed OR how many days the Safety Plan is overdue is displayed ().
In the example below, the Safety Plan is due in 1 day.

![Figure 134: HRP View Drilldown - Safety Plan 7 Day Count](image)

Other indicators for completed Safety Plans include the following:

- **Completed**: Indicates the Safety Plan was completed within 7 days of the High Risk for Suicide flag activation.
- **Done Late**: Indicates the Safety Plan was completed in more than 7 days of the High Risk for Suicide flag activation.
- **Declined**: Indicates the patient has declined to complete a Safety Plan.
- **INPT**: Indicate the patient is currently an inpatient at a Mental Health Facility

### 5.3.6.8. PHQ-9 Drilldown

The PHQ-9 drilldown can be accessed by clicking any of the PHQ-9 columns on the HRP View.

![Figure 135: HRP View](image)
The PHQ-9 drilldown displays the data for a patient’s PHQ-9 and PHQ-9 I9 history in both graphical and tabular form as shown below.

Figure 136: HRP View Drilldown - PHQ-9 and PHQ-I9 History

5.3.6.9. C-SSRS Drilldown

The C-SSRS drilldown can be accessed by clicking within any of the C-SSRS columns on the HRP View (Figure 137).

Figure 137: HRP View

The C-SSRS drilldown displays all administration dates and results of each C-SSRS that has been administered to the selected patient.
A snapshot of the result is displayed to the right of the table (Figure 138).

Figure 138: HRP View - Drilldown - C-SSRS Details

In the Report column, a View link is provided to view the full instrument results (Figure 139).

Figure 139: HRP View - Drilldown - View C-SSRS
Clicking the **View** link invokes a modal that will show the actual instrument results (Figure 140).

**Figure 140: HRP View Drilldown - C-SSRS Instrument Results**

6. **MHA Web 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 141).

- 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 Social Security Number.

- Patient must enter the information and click **Login** to continue.

- Incorrect information triggers a popup identifying an error.

*Figure 141: Patient Entry Login Screen*

```
Version Number

Last 4 of Social

PIN (from Provider)

Assignment ID

Login
```

6.1.2. **Welcome Screen**

- Once logged in, patients are directed to the Welcome Screen (Figure 142). Patients should check to make sure their information in the top right corner is correct.

  a. 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.

Figure 142: Patient Entry Welcome Screen

6.1.3. Completing an Administration

• Patients now see the view in the following figure (Figure 143).
  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.

**Figure 143: Patient Entry Completing Administration**

- Questions can be answered by clicking on the button next to the appropriate answer.
  
  a. 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 144).
- 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.
• Clicking a different instrument’s name in the navigation bar moves patient to that instrument. Current progress will be saved.

**Figure 146: Patient Entry Skipped Question**

![ATQ Icon with Progress: 37%]

- If questions have been skipped, the tab will display a red exclamation mark (Figure 146).

• A popup will show any skipped questions and ask patient to confirm their choice (Figure 147).

**Figure 147: Patient Entry Incomplete Assignment**

```
Incomplete Assignment

These questions in the BSL-23 have been skipped:

#9-23.

If you move to the next instrument, your responses will be saved but not submitted. Are you sure you would like to move on?

[No] [Yes]
```

• Once all applicable questions have been answered, click **Submit** (Figure 148).
  - The **Submit** button is only available once all questions in a questionnaire have been viewed.
  - Submitting sends the finished questionnaire to the assigning clinician and all answers are final.
• If there are multiple questionnaires in a patient’s assigned administration, they are shown this screen confirming they have been submitted (Figure 149).

Figure 149: 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 150).
  o Patients are informed how many days remain to complete the questionnaire.
• Patients still have the option to **Continue** or **Save & Exit**.

**Figure 150: Patient Entry Incomplete Assessment**

6.1.4. **Navigating Patient Entry**

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

**Figure 151: Patient Entry Navigation**

• 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 152).

Figure 152: Patient Entry Review Answers

<table>
<thead>
<tr>
<th>#</th>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>In the course of last week...it was hard for me to concentrate.</td>
<td>Much</td>
</tr>
<tr>
<td>2</td>
<td>In the course of last week...I felt helpless.</td>
<td>Rather</td>
</tr>
<tr>
<td>3</td>
<td>In the course of last week...I was absent-minded and unable to remember what I was actually doing.</td>
<td>Much</td>
</tr>
<tr>
<td>4</td>
<td>In the course of last week...I felt disgust.</td>
<td>A little</td>
</tr>
<tr>
<td>5</td>
<td>In the course of last week...I thought of hurting myself.</td>
<td>Rather</td>
</tr>
</tbody>
</table>

• 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.
  o The tab will have 100% progress, a checkmark, and will be disabled.

Figure 153: Patient Entry Completed Assessment

BSL-23 ✔
Progress: 100%
• Answer all questions on remaining questionnaires and click **Submit** on each.

*Figure 154: Submit Button*

![Submit Button Image]

• 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.
  - At any other point within the application, idle logout happens after 5 minutes. Patients are notified before this occurs.
  - On this page, automatic logout will occur in 10 seconds.

*Figure 155: Submitted Notification*

![Submitted Notification Image]

Submitted!

Thank you! You have successfully completed all questionnaires.

Please return this device to your provider.

Logout
7. Troubleshooting

7.1. Error Selecting a Division

This is actually a very common problem in the MHA Web user community but it’s an issue that is out of the control of the MHA Web 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 (YourIT - KB0013359) for more information.

7.2. Service Errors

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

Each error can be collapsed to save screen space:

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 Web 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**

<table>
<thead>
<tr>
<th>Term</th>
<th>Meaning</th>
</tr>
</thead>
<tbody>
<tr>
<td>CAT</td>
<td>Computerized Adaptive Testing</td>
</tr>
<tr>
<td>CCOW</td>
<td>Clinical Context Object Workgroup</td>
</tr>
<tr>
<td>CPRS</td>
<td>Computerized Patient Record System</td>
</tr>
<tr>
<td>CSRE</td>
<td>Comprehensive Suicide Risk Evaluation</td>
</tr>
<tr>
<td>HRP</td>
<td>High-Risk Patient</td>
</tr>
<tr>
<td>IAM</td>
<td>Identity and Access Management</td>
</tr>
<tr>
<td>MBC</td>
<td>Measurement Based Care</td>
</tr>
<tr>
<td>MH</td>
<td>Mental Health</td>
</tr>
<tr>
<td>MHA</td>
<td>Mental Health Assistant</td>
</tr>
<tr>
<td>MHC</td>
<td>Mental Health Checkup</td>
</tr>
<tr>
<td>MHP</td>
<td>Mental Health Package</td>
</tr>
<tr>
<td>MoCA</td>
<td>Montreal Cognitive Assessment</td>
</tr>
<tr>
<td>OIT</td>
<td>Office of Information and Technology</td>
</tr>
<tr>
<td>PDF</td>
<td>Portable Document Format</td>
</tr>
<tr>
<td>PIN</td>
<td>Personal Identification Number</td>
</tr>
<tr>
<td>PIV</td>
<td>Personal Identity Verification</td>
</tr>
<tr>
<td>PRF</td>
<td>Patient Record Flags</td>
</tr>
<tr>
<td>SPP</td>
<td>Suicide Prevention Package</td>
</tr>
<tr>
<td>SSN</td>
<td>Social Security Number</td>
</tr>
<tr>
<td>SSOi</td>
<td>Single Sign-On Internal</td>
</tr>
<tr>
<td>VA</td>
<td>Veterans Administration</td>
</tr>
<tr>
<td>VistA</td>
<td>Veterans Information System and Technology Architecture</td>
</tr>
</tbody>
</table>