Synthesis Provider Note Entry
Tutorial
(for services other than Crisis Stabilization)
(Revised: 2/4/16)

**PROCESS STEPS**
1) Entering the Note
2) Linking Note to a Service Line and Signing the Note
3) Supervisory Approval
4) Printing Notes (OPTIONAL)

**STEP 1: Entering the Note**
Select "Provider Notes" from the Table of Content (TOC) area

A screen similar to the one below will appear. (If no notes exist for the youth - a blank data entry screen appears.)

Select the Youth's Name.
To look up the youth’s name - type part of the last name in the Search box and click “Search.” Click on the envelope to open that record.

Click on **Add Note**.
The screen below will appear. It lists all of the Service Authorizations for that youth for the past 3 months. Select which Service Line this Note relates to, and press "Select." (If no Service Line yet exists, simply press "Select Without SAR." You will link this note to a SAR Line later in the process.)
Data Entry Screen for Provider Notes:

Date of Contact: The date the contact occurred. Multiple contacts for one day CAN BE recorded in a single note (but this is not required), as long as the text of the note covers those multiple contacts.

Recipient: Generally, this will be the youth. However, it may be a family member OTHER THAN the identified enrollee if that is what was authorized on the SAR.

Contact Start and End Times: These are required fields. The start time and end time is reflective of the start time and end time of the face-to-face contact being made. The time must reference a.m. or p.m. If you are documenting a No-Show or a phone contact you must leave both fields blank. For phone contacts it is advisable to indicate the time of the phone contact within the text of the note.

Contact Location: Select the location where the contact occurred. Self-explanatory. “Facility” references locations such as a group home, residential center, shelter care.

Note/Service Type: Select what type of contact was made (Enrollee, Collateral, Travel, etc.). You can select multiple types for one note.

- **Enrollee Contact:** ANY type of contact with the identified enrollee alone or with collaterals.
- **Collateral Contact:** ANY type of contact with COLLATERALS ONLY. Collaterals may be family members, caregivers, other team members, the care coordinator, school personnel, etc. If the enrollee was a part of the contact, use the “Enrollee Contact” code. Coincidental collateral contacts where a planned contact with the enrollee resulted in a “No Show” should be documented as a “No Show”
- **Meetings:** Used to document the monthly Child and Family Team meetings and/or Plan of Care meetings or other meetings in which the provider’s attendance is requested, i.e., IEP meetings, staffings. The service recipient and/or identified enrollee must be present.
- **No Show:** Use this code when no covered service was provided, i.e. - the youth/service recipient was not available when the provider arrived at the place of contact.
- **Other:** Use this code if service time you are documenting cannot be identified as any other service type
DO NOT use the following Note/Service Type Codes:

1. Crisis Supervision
2. Crisis Stabilization
3. Recordkeeping
4. Release of Information
5. Travel

Service Hour Reporting:
- **Contact Time:** This will auto-calculate based on the Start and End Times entered.
- **Travel Time:** Leave blank.
- **Documentation Time:** Leave blank.

Provider Note Text: Activity/conversation engaged in, service recipients' mood/any significant behaviors or verbalizations/reactions, plans for future interventions/contacts.

After you're done entering the note, click on Insert. The blue bar area at the top changes to the following:

You can use the Spell Check feature at any time during data entry. However, Spell Check DOES NOT SAVE YOUR ENTRY. You must always click “Update” to save your note. If you insert your note first and then do a Spell Check - you must click “Update” to save any changes.

You can make any edits or corrections to the note. Simply make your changes and click “Update.”

**STEP 2: Linking the Note to a Service Line and Signing Notes**
Both of these functions can be done from the main screen.

**LINKING NOTES**
If the Service Line did not exist when you entered the Note (which would occur if the Care Coordinator had not entered a Service Authorization for the enrollee for the month), you’ll need to go back to any Notes that you did not link to a Service Line at the time you entered the Note. You do this from the main Provider Notes screen.

A Billing Status will appear next to each note:
- **Not Linked:** The note is not linked to a SAR and thus can't be billed.
- **Linked, Not Billed:** The Note is linked to a SAR but has not yet been billed.
- **Linked, Billed:** The Note has been linked to a SAR and billed for. No changes can be made.
Then just select which SAR line the Notes relate to and click “Select.” Those Notes are now linked to the Service Authorization so your agency can bill for them.

**SIGNING NOTES**

Notes must be signed. After you sign a note - it is no longer editable by you. (NOTE: Supervisors will later Reject or Approve each note; if a note is Rejected, the note will become editable again.) Notes can be signed individually, or in a batch for an enrollee.

To sign an individual note, simply click the "Sign Note" button on the Provider Note screen.

Signing a batch of notes for an enrollee is done from the initial display screen shown after you select a specific person's name.

Select which notes you want to sign by putting checkmarks in the Sign column, and then press "Sign Notes."

For the Worker - this is the final step in the process unless your Supervisor rejects your note. If you have Notes rejected by your supervisor, you will receive a login message informing you of that Rejection, which will contain a link to the Note(s) that need to be edited. You will be able to edit those notes, and will need to re-sign them when done.
If you are a Supervisor, you will be responsible for approving all of the workers’ notes. You can do this by individual enrollee (as described above for the workers), or you can do a group of supervisees and all of their notes for a specific time frame.

**STEP 3: Supervisory Approval**

To approve notes for multiple workers/enrollee/dates at one time:

After you click on the Provider Progress Notes in the Table of Content (TOC) area, the following screen appears. Select “Supervisor Access.”

The screen that follows will allow you to approve or reject groups of notes for groups of staff. Simply enter the date range you want to approve, select the provider(s) that you want to approve notes for, select which types of notes you want to approve, and click “Approve.” (You can also Reject batches of notes this way. If you Reject note(s), the note becomes editable by the worker again, and a login message is sent to that worker to update the note.). After you approve the notes, they are no longer editable, and are ready for billing.

**NOTE:** Synthesis serves as the medical record for our youth, which is why you cannot edit or delete a note after it has been signed. However - there are times when the NON-TEXT portions of a note can be updated. This would occur if a note was dated wrong, if the wrong service type or location.
STEP 4: Printing Notes (OPTIONAL)

To print Provider Notes, first click on Provider Notes in the Table of Contents (TOC) area.

Then, select the enrollee name you wish to print notes for:

Click on “Print Notes”

The following screen appears. Enter the date range you wish to print, and click “Print Notes.”
Printing Plans of Care (POCs) and Crisis Plans

The most current APPROVED POC and Crisis Plan can be printed from the initial display screen shown after you select a name. You can sign your notes from this screen, or print POCs and/or Crisis Plans.

Simply choose "Print POC" or "Print Crisis Plan," and a screen similar to the one displayed below will appear:

Simply click the Printer icon to send the document to your printer.