### WELLIGENT QUICK REFERENCE GUIDE Setting Up a Protocol or Specialized Health Care Service in Disease Management Module (DMM)



**Step 2** Search for the student's name



Step 3 Enter Last Name, First Name. *Show All Fields* (right side) in the Student Search screen allows you to enter more information.



**Step 4** Select the correct student by click the Edit icon (pencil)

| Last Name | e:         |                   | First Name:     |          |       | Agency ID/Client ID: Glob | al Search: |
|-----------|------------|-------------------|-----------------|----------|-------|---------------------------|------------|
| sample    | sample     |                   | Type First Name |          |       | Agency ID/Client ID       |            |
| Edit Inf  | o Alert    | Student           | DOB             | ID       | Grade | Location                  | Status 🔨   |
| 1 t       | 1          | Sample, Chdp      | 01-Jan-2001     | W2211646 |       | Lausd Central Office      | Active     |
| / +       |            | Sample, Chdp Jr   | 24-Dec-2005     | W2221628 |       | Lausd Central Office      | Active     |
| / +       | $\bigcirc$ | Sample, Gl Sample | 01-Feb-2007     | 123456   | 05th  | Lausd Central Office      | Active     |
| / +       | v 1        | Sample, Misis     | 01-Oct-2012     | 1516968  | 01st  | Lausd Central Office      | Active     |

**Step 5** From the *Record Navigator* screen, click **Program History**. The Record Navigator closes and open depending on where the cursor is positioned.

| □ Assessments  | ~  | △ Reminders               |              |   |              |  |
|--|----|---------------------------|--------------|---|--------------|--|
| Case Management  |    | Date Due                  |              | Activity                                    | Detail       |  |
| Case Notes   |    | Date Date                 |              | incurrey.                                   | octan        |  |
| Consents Consents Consents Conservers                        |    |                           | Click HE     | RE to view a list of reminders for Misis Sa | mple.        |  |
|  |    |                           |              |   |              |  |
| <ul> <li>Health Events</li> <li>IEP Event Listing</li> </ul> |    | Schedule for Aug 13, 2017 |              |   |              |  |
| A Lab Tests  |    | Time                      | Provider     | Description                                 | Status       |  |
| Ø Medications  |    |                           | Misis Sample | has no appointments or events schedule      | d for today. |  |
| an Office Visits   |    |                           |              |   |              |  |
| the Program Histor   | -1 | Active Medicati           | on List      |   |              |  |
| Qt Screenings  | 1  |                           |              |   |              |  |

**Step 6** Program History will have the *Programs* with their statuses. If there is no active enrollment for Disease Management Module (DMM), **click** <u>*New*</u>.

If there is <u>no</u> Disease Management Module with **Active Status**, click the circle under **Enroll**. Click **Save**.

|     | ind provide standard to standard  |         |        |            |                | menorine energy opportunity runs | tioner all to amplifying |
|-----|---|---------|--------|------------|----------------|----------------------------------|--------------------------|
| 6   | Student: Sample Eec Sample (DOE   |         |        |            |                |                                  | Action -                 |
|     | Denardam Hannan   |         |        |            |                | Befre                            |                          |
|     | a second s |         |        |            |                |                                  |                          |
| Ā   | Search Criteria   |         |        |            |                |                                  |                          |
|     | 200000000000000000000000000000000000000   | 9       |        |            |                |                                  |                          |
|     | Program Status:   | 1       |        |            |                |                                  | L                        |
|     | Edit Print  | Program | Status | Admit Date | Discharge Date | Lead Clinician                   | 1                        |
| .m. |   |         |        |            |                |                                  |                          |
| 4   |   |         |        |            |                |                                  | *                        |
| ٢   |   |         |        |            |                |                                  |                          |
| Δ   |   |         |        |            |                |                                  |                          |
| 0   |   |         |        |            |                |                                  |                          |
| æ   |   |         |        |            |                |                                  |                          |
| di  |   |         |        |            |                |                                  |                          |
| 8   |   |         |        |            |                |                                  |                          |

If there is an existing DMM enrollment and the status is active, click *Edit (see below) on DMM with Active status,* instead of clicking *New.* 

**NOTE: DO NOT discharge** student from DMM enrollment when processing a protocol renewal or if the student leaves one LAUSD to transfer to another (Elementary to Middle School)

| T Assessments  | ABC |         | 22       |                           |            |             |                |                    |   |
|--|-----|---------|----------|---------------------------|------------|-------------|----------------|--------------------|---|
| Case Management  | ^   | ogram   | History  |                           |            |             |                | Refresh New        |   |
| Case Notes   | 1   | Sear    | ch Crite | ria                       |            |             |                |                    |   |
| Consents   |     | 37.525  |          |                           |            |             |                |                    |   |
| P Health Events  | 5   | Program | m Status |                           |            |             |                |                    |   |
| EP Event Listing   |     |         |          |                           |            |             |                |                    |   |
| Lab Tests  |     | Edit    | Print    | Program                   | Status     | Admit Date  | Discharge Date | Lead Clinician     |   |
| Medications  |     | 1       | e        | Section 504               | Active     | 15-May-2017 |                | APOLONIA TOLENTINO |   |
| Office Visits  |     |         | Ð        | Disease Management Module | Active     | 17-Sep-2015 |                | SALLY NEWCOMER     | T |
| Secondary  | ÷   | 1       | Ð        | Disease Management Module | Discharged | 31-Aug-2015 | 17-Sep-2015    | APOLONIA TOLENTINO | T |
| and the second sec |     |         |          |                           |            |             |                |                    |   |

**Step 7** The DMM opens to the first tab-**DMM** where the Program Admit Date/Time and School Nurse's name are located.

(a) Verify the School Nurse's name. This is the <u>only</u> field that needs to be updated as needed by clicking the magnifying glass. After updating the School Nurse's name,
(b) click **Save**

|              | Client ID: SAMPLE8 🛕 🚫           |                      | · · ·              |                  |                    |  |  |  |
|--------------|----------------------------------|----------------------|--------------------|------------------|--------------------|--|--|--|
|              | Program Episode Details - Diseas | se Management Module |                    |                  |                    |  |  |  |
| _            | Program Status:                  | Active ¥             |                    | DMM 🍑 IHPs (Tx P | lan) 👄 📑 Services  |  |  |  |
| -            | Admission Information:           |                      |                    |                  |                    |  |  |  |
|              | Program Admit Date:              |                      | 16-FEB-2023        | Time: 01:58pm    | 0*                 |  |  |  |
|              | School Nurse                     |                      | Apolonia Tolentino | Q,*              |                    |  |  |  |
| 1            | Discharge Information:           |                      |                    |                  |                    |  |  |  |
| I            |                                  |                      |                    |                  |                    |  |  |  |
|              |                                  |                      |                    |                  |                    |  |  |  |
|              |                                  |                      |                    |                  |                    |  |  |  |
| Step 8 Click | the IHP/Tx Plan tab              | IHPs (Tx Plan)       | Click New Tre      | eament Plan      | New Treatment Plan |  |  |  |

For a guide on which Tx Plan to select, see a separate handout: <u>Guidelines on</u> <u>Treatment Plan, Protocol and DMM Service</u>

Select a Tx Plan template appropriate for the protocols. For example, if transcribing a Gastrostomy Feeding: Bolus Method and Gastrostomy: Tube Replacement, select **Gastric Tube** Click the circle to the left of the Tx Plan name template Click **Next** 

| elect                      | Library Name  | Short Description        |     |  |
|----------------------------|---|--------------------------|-----|--|
| 0                          | Don't Use a Treatment Plan Template   |                          |     |  |
| 0                          | Abdominal Pain  | No Description Available | 4 7 |  |
| 0                          | Anaphylaxis   | No Description Available |     |  |
| 0                          | Asthma  | No Description Available |     |  |
| 0                          | Attention Deficit Disorder  | No Description Available |     |  |
| 0                          | Cancer  | No Description Available |     |  |
| 0                          | Cardiac Output, Decreased   | No Description Available |     |  |
| 0                          | Catheterization   | No Description Available |     |  |
| 0                          | Cerebral Palsy  | No Description Available |     |  |
| 0                          | Cystic Fibrosis   | No Description Available |     |  |
| 0                          | Depression/Suicide  | No Description Available |     |  |
| 0                          | Diabetes Mellitus Type I  | No Description Available |     |  |
| 0                          | Diabetes Mellitus Type II   | No Description Available |     |  |
| 0                          | Dysmenorrhea  | No Description Available |     |  |
| 0                          | Dysreflexia   | No Description Available |     |  |
| 0                          | Eating Disorder: Anorexia and Bulimia   | No Description Available |     |  |
| 0                          | Eating Disorder: Obesity  | No Description Available |     |  |
| ۲                          | Gastric Tube  | No Description Available |     |  |
| Nursin<br>Nursin<br>Nursin | g Diagnosis (NANDA): Feeding self-care deficit (00102<br>g Diagnosis (NANDA): Risk for aspiration (00039 )<br>g Diagnosis (NANDA): Risk for impairment of swallowing (00103 ) |                          |     |  |
| 0                          | Headaches   | No Description Available |     |  |
|                            | 1   |                          |     |  |

#### Step 9 Treatment Plan tab: Section of DMM where the protocol information are transcribed.

Template name prefills the Treatment Plan Name. DO NOT change this name as it is used for reporting purposes.

**Example:** Sample Student has an order for Gastrostomy Tube Feeding: 1 can Nutren Jr, 250m: Bolus Method 2x a day, 9am and 12pm. The authorization dates are Healthcare provider (HCP) 8-3-2023 and Mother: 8-4-2023. The Protocol **start date** at school is <u>mm/dd/yyyy</u> when the order has been handed to the school nurse and planned start date.

Select the *Protocol (1)* value – Gastrostomy Feeding: Bolus Method (2) Gastrostomy Tube Replacement

**Start Date** – when the service is going to start at school (not necessarily the date of prescription) *Frequency* – based on the doctor's order. If there is a frequency combination i.e. 2x a day and PRN, options are available to select it once.

Step 10 Click the Diagnosis Tab on the left.

| Fil€ | welligent.lausd.       | net/pls/iepweb,         | /ihp_proc.IHPDATA                   |                         |            |               |                      |       |      | Q        |
|------|------------------------|-------------------------|-------------------------------------|-------------------------|------------|---------------|----------------------|-------|------|----------|
| 4    | RWTreatment Plan Detal |                         |                                     |                         | Othe       | er » Copy IHP | Print                | Close | Save | <u> </u> |
| Pas  | Treatment<br>Plan      | Treatment Plan<br>Name: | Gastric Tube                        | Plan Status:            | Pending V  |               |                      |       |      |          |
| lipb | Diagnosis              | Protocol (1):           | Gastrostomy Feeding: Bolus Method 🗸 | Start Date: 28-AUG-2023 | Frequency: |               | Twice (2x) a Day     | PRN:  |      |          |
| f.   | Ļ                      | Protocol (2):           | Gastrostomy: Tube Replacement 🗸     | Start Date: 28-AUG-2023 | Frequency: |               | PRN, As Needed Basis | PRN:  | <    |          |
|      | Authorizations         | Protocol (3):           | <b>↓</b>                            | Start Date:             | Frequency: |               | ~                    | PRN:  |      |          |
|      | Protocol<br>Details    | Protocol (4):           | <b></b>                             | Start Date:             | Frequency: |               | ~                    | PRN:  |      |          |
|      | Warnings               | Protocol (5):           | <b>Q</b>                            | Start Date:             | Frequency: |               | ~                    | PRN:  |      |          |

#### Step 11 Diagnosis Tab – Diagnosis Tab has the following fields:

(1) Nursing Diagnosis (prefilled)

#### (2) Assessment (Nursing)

#### LVN: Type in "School Nurses to complete Assessment"

**School Nurses (RN):** complete the Assessment with your Nursing Assessment which may include the student's knowledge of the condition or ability to perform the procedure.

(3) Medical Diagnosis (ICD 10 search feature) After verifying the (1) Nursing Diagnoses, completing the (2) Assessment & (3) Medical Diagnosis, *click Save* 

| 💕 RWTreatment Pl      |                   |                                    | ~~~~                      |                       |         | Copy IHP    | Print        | Close       | Save |
|-----------------------|-------------------|------------------------------------|---------------------------|-----------------------|---------|-------------|--------------|-------------|------|
| Treatment<br>Plan     | Nursing Diagr     | noses and Assessment               |                           |                       |         |             |              |             |      |
| •                     | Diagnosis 1:      | Feeding self-care deficit          |                           |                       | 00102   |             |              |             |      |
| Diagnosis             | Delated Te:       | Dhusian dischilitur and aus        | reien                     |                       |         |             |              |             |      |
| 1                     | Related To:       | Physical disability, oral ave      | rsion                     |                       |         |             |              |             |      |
| Authorizations        | Diagnosis 2:      | Risk for aspiration                |                           |                       | 00039   |             |              |             |      |
| Ļ                     | Related To:       | Food, liquids or secretions        | entering bronchi          |                       |         |             |              |             |      |
| Protocol<br>Details   | Diagnosis 3:      | Risk for impairment of swa         | llowing                   |                       | 00103   |             |              |             |      |
| Ļ                     | Related To:       | Associated with deficit in st      | ructure or function       |                       |         |             |              |             |      |
| Warnings              | Diagnosis 4:      |                                    |                           |                       |         |             |              |             |      |
| Ļ                     | Related To:       |                                    |                           |                       |         |             |              |             |      |
| Education             | Diagnosis 5:      | -(7))                              |                           |                       |         |             |              |             |      |
| •                     | Related To:       |                                    | Г                         |                       |         |             |              |             | _    |
| Outcomes<br>Referrals | Assessment        | \$Y                                |                           | When clicked inside t | he Pri  | mary diag   | nosis field, | the search  |      |
|                       | Assessment.       |                                    |                           | screen appears. See b | pelow.  | After click | ing check i  | nark to the |      |
|                       | Student unable to | o feed self using gastrostomy tube | e feeding, unable to swal | low food by mouth!    | crintio | n the dia   | mosis dosc   | rintion and |      |
|                       |                   |                                    |                           |                       | u i puo | n, the ula  | gilosis desc |             |      |
|                       |                   |                                    |                           | code populate the fie | las.    |             |              |             |      |
|                       | Medical Diagn     | noses (ICD Codes)                  |                           |                       |         |             |              |             |      |
|                       | Primary:          | Gastrostomy Status                 | .0(.3)                    |                       | Z931    | *           |              |             |      |
|                       | Secondary:        |                                    |                           |                       |         |             |              |             |      |
|                       | Tertiary:         |                                    |                           |                       |         |             |              |             |      |
|                       |                   |                                    |                           |                       |         |             |              |             |      |

Step 12: Click Authorization Tab after saving the diagnosis.

Complete the Authorization information. *Skip the Authorization Expiration Date*. Allow the system to prefill the value, this eliminates the mistake of entering the wrong date.

|  |   | Other >     | Copy IHP Print Close |
|--|---|-------------|----------------------|
| Authorization for Protocol(1): Gastrostomy Feeding: Bolu | s Method                                      |             |                      |
| Authorization Expiration Date: 03-AUG-2024               | Propagate Protocol Data to subsequent fields: |             |                      |
|  | Authorization Type                            | Date        | Name/Relationship    |
| Health Care Provider                                     | Written 😽                                     | 03-AUG-2023 | Doctor Sample        |
| Parent/Guardian  | Written 🗸                                     | 04-AUG-2023 | Mother 🗸             |
|  |   |             |                      |
| Authorization for Protocol(2): Gastrostomy: Tube Replace | ment  |             |                      |
| Authorization Expiration Date: 03-AUG-2024               | 1   |             |                      |
|  | Authorization Type                            | Date        | Name/Relationship    |
| Health Care Provider                                     | Written 🗸                                     | 03-AUG-2023 | Doctor Sample        |
| Parent/Guardian  | Written 🗸                                     | 04-AUG-2023 | Mother 🗸             |

**Step 13:** Complete the *Protocol Details* (1) Special instructions (2) Level of Supervision (student's level of supervision or ability to perform protocol) (3) Setting

|                     |  | Copy IHP | Print | Close | Save |
|---------------------|--|----------|-------|-------|------|
| Treatment<br>Plan   | Protocol 1: Gastrostomy Feeding: Bolus Method                    |          |       |       |      |
| Ļ                   | Level of Supervision: Total V * Setting: IEP V *                 |          |       |       |      |
| Diagnosis           | 1 can Jevity + 90cc water bolus twice a day at 9:00am and 2:00pm |          |       |       |      |
| Ļ                   |  |          |       |       |      |
| horizations         |  |          |       |       |      |
| ł                   |  |          |       |       |      |
| Protocol<br>Details |  |          |       |       |      |
| Ļ                   |  |          |       |       |      |
| /arnings            | Protocol 2: Gastrostomy: Tube Replacement                        |          |       |       |      |
| Ļ                   | Level of Supervision: Total                                      |          |       |       |      |
| ducation            | Snerial Instructions for Gastrostomy: Tube Benlacement           |          |       |       |      |
| 1                   | Gastrostomy Tube Replacement Kit Expiration Date: 9-2019         |          |       |       |      |
| outcomes            |  |          |       |       |      |

#### Click Save

### Welligent will take the screen back to the first tab – see below

#### Final check:

#### LVNs:

Check **Protocol Provider** (it should have RN's name)

• LVN notify the School Nurse (RN) to review and change the Tx Plan Status

#### School Nurses' (RNs):

- (1) Complete the **Reviewed By**
- (2) Change the Status to Active
- (3) Enter the E-Signature (SSO password)

|                |                             | 2                                  |                                 |              | Copy IHP | Print                | Close | _     | Save |
|----------------|-----------------------------|------------------------------------|---------------------------------|--------------|----------|----------------------|-------|-------|------|
| atment<br>Plan | Treatment Plan<br>Name:     | Gastric Tube                       | Treatment Plan Status           | Active 🔽     |          |                      |       |       |      |
| 1              |                             | Contrasteriu Seedler: Balus Mathed | Start Date                      |              |          |                      |       |       |      |
| inosis         | Protocol (1):               |                                    | 11-SEP-2018                     | Frequency:   |          | Twice (2x) a Day     | v     | PRN:  |      |
|                |                             | 7                                  |                                 |              |          |                      |       |       |      |
|                | Destand (2)-                | Castrostomy: Tube Replacement      | Start Date:                     | Francisco    |          | BBN As Needed Preis  |       | DDAL  | v    |
| izations       | Protocol (2).               | 9                                  | 11-5EP-2018                     | Frequency.   |          | PRN, AS NECOLU BUSIS |       | PRIN; | ^    |
|                |                             |                                    | Start Date:                     |              |          |                      |       |       |      |
| larat          | Protocol (3):               |                                    |                                 | Frequency:   |          |                      | V     | PRN:  |      |
| tails          |                             | Q                                  | <b>*</b>                        |              |          |                      |       |       |      |
|                |                             |                                    | Start Date:                     |              |          |                      |       |       |      |
| ninge          | Protocol (4):               | <u> </u>                           |                                 | Frequency:   |          |                      | ×     | PRN:  |      |
| ining.s        |                             |                                    |                                 |              |          |                      |       |       |      |
|                | Destaced (E)-               | V                                  | Start Date:                     | Economic     |          |                      | 1221  | DDNI: |      |
| ation          | Protocol (5)                | 9                                  | m •                             | Frequency.   |          |                      | •     | PRIN  |      |
|                | Treatment Plan<br>Template: | Gastric Tube                       |                                 |              |          |                      |       |       |      |
| omes<br>rrals  | Implementation<br>Date:     | 11-SEP-2018                        | Effective Until                 | 06-SEP-2019  | <b>*</b> |                      |       |       |      |
|                | Confidential:               | Confidential 💟 *                   |                                 |              |          |                      |       |       |      |
|                | Prepared By                 | APOLONIA TOLENTINO                 | Date Prepared                   | 10-SEP-2018  | <b>*</b> |                      |       |       |      |
|                | Reviewe 1                   |                                    | Date Reviewed                   |              | <b>#</b> |                      |       |       |      |
| $\bigcap$      | Protocol<br>Provider        | Apolonia Tolentino                 | Additional Protocol<br>Provider | Role: N/A    |          |                      |       |       |      |
| (3)            | ·                           |                                    |                                 | in the horse |          |                      |       |       |      |

View of the IHP (Tx Plan) Listing. After the Tx Plan completion. Click on Services tab (right)

|   | Use <b>Refresh Listing</b> if IHP<br>or changes in IHP are not<br>visible<br>Refresh Listing New Treatment Plan   |   |
|---|---|---|
| Ē | Program - Disease Management Edit Print   | × |
|   | Treatment Plan Name:Gastric TubeTreatment Plan Status:ActiveImplementation Date:11-Sep-2018Effective Until:06-Sep-2019Date Reviewed:-reatment Plan Temple::Gastric Tube | « |

Step 14 Scheduling is done by the School Nurse in the Services tab of the DMM module.
The two services listed were created when the Tx Plan containing the Protocols:
Gastrostomy Tube Replacement & Gastrostomy Feeding Bolus Method are automatically created. The scheduled times need to be created at this point.
Current View is Details. Click Session Note

|  |  |                                      |                               | sease Managem                         | ent Module  |   |  | _  |  |   |   | -                              |                  |          |        |        |             | Other »     |
|--|--|--------------------------------------|-------------------------------|---------------------------------------|---|---|--|--|--|---|---|--------------------------------|------------------|----------|--------|--------|-------------|-------------|
| <u> </u>   | Program  | Status:                              |                               | Active                                | ▼ *   |   | DMM  | IHPs (T)   | Plan) 🦈  | Services -  | R<br>Medications                                  |                                |                  |          |        |        |             |             |
| <u> </u>   | -  | ires                                 |                               |                                       |   |   |  |  |  |   |   |                                |                  |          |        |        |             |             |
| 1  | Edit   | New                                  | Schd                          | Note Sc                               | arvice  |   |  |  | Status   | Provider  |   | last Session                   | Completed        | Schedule | ud Can | relled | Service Sta |             |
|  | -  |                                      |                               | - DI                                  | WW Gastrostor   | ov Feeding: Polys I   | Method   |  | Active   | Tolectino Ano   | lonia   |                                | 0                | 0        | 0      | icencu | 28 AUG 28   |             |
| í í  | •  | ÷.                                   |                               |                                       | VIVI: Gastrostor  | ny Peeuing: Bolus I   | wentou .   |  | Active   | Telestine Apo   | lente   |                                | 0                | 0        | 0      |        | 28-AUG-25   |             |
|  | -  | ÷.,                                  | 9                             |                                       | WWW. Gastroston   | ny. Tabe Replacem   | ien.   |  | Active   | rolenano, Apo   | NOT TR  |                                | 0                | 0        | 0      |        | 20,400,25   |             |
| udent San  | nple S Sa  | mple (Di                             | OB: 07-Ju                     | ul-2010) (8 yr                        | -s 2 mths) (0   | irade Kinderg   | arten) (Scho   | ol Lausd Cent  | ral Office)  |   | Cliv  | sk Soco                        | ion              |          |        |        | -           |             |
| ient ID: SAI   | UPIESAN  | 1 🔊                                  |                               |                                       |   |   |  |  |  |   |   | JK Sess                        | ion              |          |        |        | A           | ction 🚽     |
| MM: Gastro   | stomy Fe   | reding B                             | iolus Me                      | thod                                  |   |   |  |  | <  |   | NO  | τes                            |                  |          | Prin   | it.    | Close       | 1           |
|  |  |                                      |                               |                                       |   |   | Details  | Session N  | otes   | IHP Treat   | tn 9  | tart or                        | astina           |          |        |        | 2.          | -           |
|  |  |                                      |                               |                                       |   |   |  |  |  |   |   |                                |                  |          |        |        |             |             |
|  |  |                                      |                               |                                       | 8   | Refresh   |  | Scheduler  | Re   | currence  | Dele  | ete Incomplete                 | Events           |          |        |        |             |             |
| Item   |  |                                      |                               | Tota                                  | l Descrip   | otion   |  |  |  |   |   |                                |                  |          | Date   |        | New         | v           |
| Events   |  |                                      |                               | 0                                     | (Session  | Notes: Comple   | eted, Pendin   | ig, Cancelled)   |  |   |   |                                |                  |          |        |        |             | •           |
|  |  |                                      |                               |                                       |   |   |  |  |  |   |   |                                |                  |          |        |        |             | _           |
| Case Not   | es   |                                      |                               | 0                                     | Generaliz   | ed case notes   | related to ti  | his individual's   | s encounte   | 26.   |   |                                |                  |          |        |        | -           | F           |
| Case Not   | es<br>I  |                                      |                               | 0                                     | Generaliz<br>Laborator  | ed case notes<br>ry tests related   | a related to t<br>d to this enc  | his individual':<br>ounter   | s encounte   | er,   |   |                                |                  |          |        |        |             | •           |
| Case Not   | es<br>I  |                                      |                               | 0<br>0<br>0                           | Generaliz<br>Laborator<br>Internal r  | ed case notes<br>ry tests relate<br>nessages, ren   | related to t<br>d to this enc<br>ninders and   | his individual'<br>ounter<br>alerts created  | s encounte<br>in Wellige   | er.<br>ent related to   | this encou  | nter                           |                  |          |        |        | 4           | F<br>F      |
| Case Not<br>Lab Tests<br>Messages<br>Attached                                    | es<br>I<br>Docume  | nts                                  |                               | 0<br>0<br>0                           | Generaliz<br>Laborator<br>Internal r<br>Electronic  | ed case notes<br>ry tests related<br>nessages, ren<br>: files attached  | a related to the other of the other of the other of the other of the other oth | his individual'<br>ounter<br>alerts created<br>nt as related/  | i encounte<br>in Wellige<br>considered   | er.<br>ent related to<br>I documentat                           | this encou  | nter                           |                  |          |        |        |             | •           |
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| Case Not<br>Lab Test:<br>Messages<br>Attached<br>Studer<br>Client I<br>9 DMM: Ge | es<br>Docume<br>ht: Sampl<br>hD: SAMP<br>astrostomy                              | e 8 Samp<br>LE8 A Samp               | ole 8 (DOE<br>Bolus Metr      | 0<br>0<br>0<br>8:08-Aug-200<br>nod    | Generaliz<br>Laborator<br>Internal r<br>Electronic<br>08) (15 yrs 0   | ed case notes<br>ry tests related<br>nessages, ren<br>c files attached<br>mths) (Genders<br>Description   | s related to th<br>d to this enc<br>minders and<br>d to this eve<br>c)<br>Re   | his individual's<br>ounter<br>alerts created<br>nt as related/<br>De<br>sfresh   | in Wellige<br>considered   | ers.<br>eduler  | this encous<br>tion.<br>IHP Treatr<br>Recurrence  | nter<br>nent Plan<br>Delete Is | ncomplete Events | Other »  | Delete |        | Save        |             |
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### Session Notes view. Click Recurrence

|             | ) St<br>Cl    | udent: Sample S Sample (DOB: 07-Jul-201)<br>ient ID: SAMPIESAM 🏅 🚫 | 0) (8 yrs | 2 mths) (Grade:Kindergarten) (School:Lausd Central Office)                             |       | Action 🗸 |
|-------------|---------------|--|-----------|--|-------|----------|
| ≎<br>▲<br>▲ | ∎ <b>î</b> DM | IM: Gastrostomy Feeding: Bolus Method                              |           | Details Session Notes IHP Tree Recurrence  | Print | Close    |
|             |               |  |           | Refresh Scheduler Recurrence Delete meomplete Events                                   |       |          |
|             |               | Item   | Total     | Description  | Date  | New      |
|             | ÷             | Events   | 0         | (Session Notes: Completed, Pending, Cancelled)   |       | +        |
|             | ÷             | Case Notes   | 0         | Generalized case notes related to this individual's encounter.                         |       | +        |
| ₫           | ÷             | Lab Tests  | 0         | Laboratory tests related to this encounter   |       | +        |
| <u>A</u>    | +             | Messages   | 0         | Internal messages, reminders and alerts created in Welligent related to this encounter |       | +        |
| <br>.⊛      | ÷             | Attached Documents   | 0         | Electronic files attached to this event as related/considered documentation.           |       | +        |
| #           |               |  |           |  |       |          |

# **Recurrence View. Enter** (1) Start Time (2) Session Length (3) Setting (4) Recurrence Click Save

|                               |  | I https:/             | /welligent.lausd.net/?sid=2483757&itemid=690&log=5&prid=&GRPtD=-Welligen   | o ×   |  |  |
|-------------------------------|--|-----------------------|--|---|--|--|
|                               |  | 4440                  | Shttps://welligent.lausd.net/ - Welligent Event Scheduler - Internet Explorer provided b                                   | L - D X   |  |  |
| https://welligent.lausd.net/? | sid=2483757&itemid=690&log=5&prid=&GRPID= - Welligen           | D X                   | Section of Contraction Section 201   | e Cancel  |  |  |
|                               | Steel Location Calendar  | Capral                | Provider: APOLONIA TOLENTINO   |   |  |  |
| arrence scheduler             | June Cocaccor Calenda  | Carton                | 4 Event Date/Time  | Conflicty With                                      |  |  |
| Service Prescription          |  |                       | Tuesday September 11, 2016 09:00AM   | eeding: bolus Hethod<br>vent(v)<br>DHH: Gastrastomy | https://welligent.lausd.net/ - Welligent Event Scheduler - Internet Explorer | r provided by L Click                                      |
| tudent: Sample Sam            | ple ID: SAMPIESAM  | Sceneral a D          | Verselagy September 12, 2018 09:00AM     Thursday September 13, 2018 09:00AM   | DHH: Castrostomy<br>eeding: Bolus Method            | Schedule Conflicts   | Save   |
| rovider: Apolonia To          | lentino Location: Lausd Central Office                         | beschedule            |  | DMM: Gastrostomy                                    | TOVIDET: A TOLENTINO   |  |
| art Date: 11-Sep-2018         | End Date: 06-Sep-2019  | re.                   | Friday September 14, 2018 09:00AH  | eeding: Bolus Hothod                                | View /Time   | Conflicts With   |
| Range of Recurrence           |  |                       | Menday September 17, 2018 09:00AH  | DHH: Gastrostomy<br>eeding: Belus Hethod<br>veri(s) | Tuesday September 11, 2018 09:00AM   | 1 DMM: Gastrostomy<br>Feeding: Bolus Method od             |
| hedule Date: 11-SEP           | 2018 🗑 End By: 06-5EP-2019                                     |                       | Thursday Sept Message from webpage Thursday Sept A scal of 259 puertic have been scheduled Housen's a scal                 | × Aus Method<br>frostomy<br>fus Method              | Wednesday September 12, 2018 09:00AM   | 1 DMM: Gastrostomy<br>Feeding: Bolus Method<br>event(s)    |
| Exclude holidays and o        | ff-days O End After: occurrenced                               | a                     | Friday Septer Association of the scheduled, children and the scheduled, children and the scheduled, children and save.     | eck Aus Method                                      | Thursday September 13, 2018 09:00AM  | 1 DMM: Gastrostomy<br>Feeding: Bolus Method od<br>event(s) |
| _ schedule events in the      | Past C End Arter: nounts sche                                  | aulea                 | Mindlay Sept Hypu do not want to force any conflicting event(s) disk Cance the conflicting event(s) will not be scheduled. | and Brostomy<br>Jas Method                          | Friday September 14, 2018 09:00AM  | 1 DMM: Gastrostomy<br>Feeding: Bolus Method od             |
| art Time:                     | 09:00am (Ex. 11:15am)  | (Ex. 11:15            | Yvenday Sept     Wednesday 5   | k Helhid<br>trostomy<br>Jus Helhid                  | Monday September 17, 2018 09:00AM  | 1 DMM: Gastrostomy<br>Feeding: Bolus Method<br>event(s)    |
| ession Length:                | 30 minutes   | ling Bolus            | Thursday September 27, 2018 09:00AM  | eeding: Bolus Hethod                                | Tuesday September 18, 2018 09:004M   | 1 DMM: Gastrostomy<br>Feedina: Rolus Method                |
| imary Action:                 | Gastrostomy Feeding: Bolus Method 💌 🔹                          | 1                     | Priday September 28, 2018 D9:00AM  | DHH: Gastrostomy<br>eeding: Bolos Hethod            |  |  |
| tting:                        | IEP 💌  |                       | Menday October 01, 2018 09:00AM  | DMM: Gastrostomy<br>eeding: Bolus Method            |  |  |
| Recurrence Pattern            |  | th Friday<br>🖌 Tuesda | Tuesday October 02, 2018 06:00AM   | DHM: Gastrostomy<br>eeding: Bolus Hethod            |  |  |
| Daily                         | Monday through Friday  | 🖂 Səturdə             | wednesday October 03, 2018 09:00AM   | DMM: Gastrostomy<br>eeding: Bolus Hethod<br>vest(s) |  |  |
| ) Monthly                     | Monday M Tursuay M Wednesday M If     Saturday Saturday Sunday | ursoay 🗔 a            | Thursday October 04, 2018 09:004H  | DHH: Castrostomy<br>eoding: Bolus Method<br>vent(a) |  |  |

Scheduling Conflict Message. Click *OK.* Click the green check mark to override the conflicts. And then click **Save.** 

To check the scheduled events, click **Refresh** and then the plus sign inside the square to the left of the **Events.** 

|   | ) 5  | tudent: Sample 1 Sample (DOB: 28-Dec-2004) (14 yrs 11 :<br>llient ID: SAMPLE 1 🚫 | mths) ( | (Grade:03rd) (School:Lausd Central Office)   |     | nution Canala I Canala (200-2                        | Line XXXIII on 11 minut                             | Scale (1eb (Grad) and Gerral Office)   |   |  |  | _                |
|---|------|--|---------|--|-----|--|---|--|---|--|--|------------------|
| • | ല് വ | MM: Gastrostomy Feeding: Bolus Method  |         |  |     | INNE ED. SAMPLE I 🔕                                  |   |  |   |  |  | Actor •          |
| 4 |      |  |         | Click Refresh Details Session Notes THP Treatment Plan                                 | 4   | an ann an Anna an Anna an Anna                       | •   | Death  | Section Males DP Trustment Plan           | and the state of t | JERK SHE HE  | n cas            |
| A |      |  |         | Datash Schadular Datasa  |     |  |   | Select   | Scheduler Recurrence Delete Incomplete Ex | eres   |  |                  |
|   |      |  |         | Reiresh Scheduler Recurrence Delete  | 0   | Direct   | Tetal   | Description  |   |  | Date   | -                |
| Ģ | Ľ    | 1 Item   | Total   | Description  |     | intra utomained events (1)                           | 194   | (Season Sides)3 Completed, 224 Peoling, 3 Calcotted)   |   |  | 84 Gel: 2028   |                  |
|   |      | Events   | 0       | (Session Notes: Completed, Pending, Cancelled)   | 4 9 | Status<br>(Pending Completion<br>Intended Completion | Provider<br>Appronia Totertino<br>Antonna Totertino | Dete Scheduled<br>Monday December (9), 2019 609 00am 1<br>Tuesday December 13, 2019 609 00am 1 |   | Duration<br>30 mins (Scheduled)<br>30 mins (Scheduled)   | Details<br>Gazerenterry Feeding Bolus Method<br>Gazerenterry facility Bolus Method | Signed Addendums |
| B | 0    | Case Notes   | 0       | Generalized case notes related to this individual's encounter.                         | •   | Fending Completion<br>Fending Completion             | Apolonia Tolentino<br>Apolonia Tolentino            | Wednesday December 11, 2019 (009 00am )<br>Thursday December 12, 2019 (009 00am )              |   | 30 mins (Scheduled)<br>30 mins (Scheduled)   | Gestrostory Feeding Bolus Method<br>Gestrostory Feeding Bolus Method               | No No<br>No No   |
| њ | G    | Lab Tests  | 0       | Laboratory tests related to this encounter   |     |  |   |  |   |  |  |                  |
| ø |      | Messages   | 0       | Internal messages, reminders and alerts created in Welligent related to this encounter |     |  |   |  |   |  |  |                  |
| Ø | 9    | Attached Documents   | 0       | Electronic files attached to this event as related/considered documentation.           |     |  |   |  |   |  |  |                  |
| Ā |      |  |         |  |     |  |   |  |   |  |  |                  |

## For scheduled events, check the *Daily Log*

| File Edit Vie  | ew Favorites Tools Help  |  |  |                                     |                        |     |
|----------------|--|--|--|-------------------------------------|------------------------|-----|
| 🔒 🗃 Welcom     | re to the Talent Ac 🕷 California School Director 🏪 Sign in to your account 🗿 Sign In 🔮 District Nursing Services2 🎭 httpswelligent.lausd.net | SCOHR - Welcome to the                   |  | - A -                               | 🛐 • 🖂 👼 • Page • Safet | y - |
| shhs           |  |  | Q Student Search                       | ≡ Welligent                         | Reports A My Alerts    |     |
| A Daily L      | og Sample, Sample 1 x  | 😐 WellProvider                           | Education                              | Admin                               |                        | ×   |
| Saily Log      |  | and the second second                    | Active IEPs                            | Application Monitor                 |                        |     |
| ocation:       | LAUSD CENTRAL OFFICE   | Daily Log<br>Event Manage                | My IEP Summary<br>Translation Workload | Team Management<br>User Maintenance |                        |     |
| Date Displayed | 09-DEC-2019 🗂 Student Last Name  | Group Sessions<br>Mass Screening         |  |                                     |                        |     |
| how Overdue E  | Events: 🗌 Limit to Uncompleted Events: 🔲 Limit to My Events: 🔲   | My Caseload                              |  |                                     |                        |     |
| Actions        | Student/Group Name Encounter   | ThePerlan                                |  |                                     |                        |     |
| 2              | Sample,Sample 1 DMM: Gastrostomy Feeding: Bolus Method - Gastrostomy Feeding: Bolus Method   |  |  |                                     |                        |     |
| 3              | Sample, Sample DMM: CHLA - Type I Diabetic Protocol - Blood Glucose Test and Insulin Administration  | Manage Caseloads<br>Management Hierarchy |  |                                     |                        |     |
| 24 .           | Sample,Misis Med:Ritalin(5 MG 1/2 tab)   |  |  |                                     |                        |     |
|                |  |  |  |                                     |                        |     |

## For *PRN* protocol, check the *PRN Registry*.

| SH  |              |                  |                           |   |   | Q Student Se                           | arch 📰 Welligent                    | Reports AMy Alerts | (et |
|-----|--------------|------------------|---------------------------|---|---|--|-------------------------------------|--------------------|-----|
| PRN | Registry Sam | ile, Sample 1 🕱  |                           |   |   | Education                              | Admin                               | ×                  | 6 0 |
| • • | 0            | Sample, Sample 1 | Disease Management Module | DMM: Gastrostomy: Tube Replacement                | Mass Screening                          | Active IEPs                            | Application Monitor                 |                    |     |
| • • | • 0          | Sample, Sample   | Disease Management Module | DMM: Ady Hith (White) - Type I Diabetic Protocol  | My Caseload                             | My IEP Summary<br>Translation Workload | Team Management<br>User Maintenance |                    |     |
| e + | • O          | Sample, Sample   | Disease Management Module | DMM: Kaiser - Type I Diabetic Protocol            | My To Do D                              |  |                                     |                    |     |
| • • | 0            | Sample, Sample   | Disease Management Module | DMM: Kaiser Bidwn Park - Type I Diabetic Protocol | Referral                                |  |                                     |                    |     |
| r + | 0            | Sample, Sample   | Disease Management Module | DMM: LAC-USC - Type I Diabetic Protocol           | WellSupervisor                          |  |                                     |                    |     |
| e + | . 10         | Sample, Sample 1 | Medication                | Diciofenac etoplamine                             | Manage Caseloads<br>Management Herarchy |  |                                     |                    |     |
| e • | • • •        | Sample, Sample 1 | Disease Management Module | DMM: Miller CHLB - Type II Diabetic Protocol      |   |  |                                     |                    |     |
| e + | 0            | Sample, Sample 1 | Disease Management Module | DMM: Adv Httn (White) - Type I Diabetic Protocol  |   |  |                                     |                    |     |
|     | 0            | Sample, Sample 1 | Disease Management Module | DMM: CHOC - Type II Diabetic Protocol             |   |  |                                     |                    | 1   |