Thank you for joining us, the WebEx will begin shortly.
Patient Characteristic Survey-PCS training

- You will not be able to talk during the call, only listen.

- Please be sure to phone in to the conference call (refer to the email for the phone number) or you will not be able to hear the presentation.

- If you are experiencing trouble with audio or video, this Webcast will be recorded and a link posted to the PCS Homepage (https://omh.ny.gov/omhweb/pcs/submissions/)

- If you have questions during the WebEx, please send them to pcs@omh.ny.gov or call 1-800-430-3586
What is the Patient Characteristics Survey (PCS)?

- The PCS is the primary source of information about individuals served by the Mental Health system in New York State.

- All public programs that provide Mental Health services in New York State participate.

- 180,000 individuals received Mental Health services in 4,000 programs during the PCS week in 2017.
Why do we need PCS?

- Information gathered is used to support implementation and evaluation of new programs

- PCS supplies required data for continued receipt of Federal funding through the Community Mental Health Block Grant (approx. $28 million in FFY 2018)

- PCS Tableau Data Visualizations offers rapid access to statewide data
  https://omh.ny.gov/omhweb/tableau/pcs.html
Important Definitions

• **Facility Survey (FS)** – conducted through MHPD prior to PCS, collects data about *providers* of mental health services

• **Patient Characteristics Survey (PCS)** – conducted every other year, collects data about *consumers* of mental health services

*Note*: Information for PCS is gathered from client records kept by your facility.
Facility/Unit/Site

- Facilities are divided into Units, and some of these Units are further divided into Sites (FUS)
Important Definitions

- **PCS Coordinator** is the person at your facility who serves as OMH’s contact during PCS.

- **Security Manager** is the person at your facility who uses SMS to grant access to Supervisors and Submitters, to add users and to reset passwords.

**Note:** If your facility does not have a Security Manager, please contact us at 1-800-430-3586 or PCS@omh.ny.gov.
PCS Roles

- **PCS Submitter** – A User assigned to enter data and view/print reports in PCS for the Units or Sites with which the User is associated.

- **PCS Supervisor** – A User allowed to see and enter data for ALL Unit/Sites at the Facility, and to upload and download Facility data. The Supervisor also certifies that the Facility has completed its data entry by locking Unit/Sites or explains why a particular Unit/Site has not provided data.
Survey Changes

Please refer to the **What’s New for 2019** document found on the PCS Homepage

**Changes to the Survey Form**

- **Question 6 Transgender**: The “Yes, transgender does not identify as male or female” response option has been changed to “Yes, transgender, non-conforming”.

- **Question 16 Preferred Language**: Revised the Yiddish response to add Pennsylvania Dutch/Other West Germanic languages.

- **Question 15 Residence Zip Code**: We added 77777 to the list of zip codes and should be used when selecting “Other State in the United States” or “Other Country” Residence County option.

- **Question 24 Disability or Disorder**: Hearing and Visual Impairment are now two separate items (Questions 24i and 24j, respectively).

- **Question 25 Chronic Medical Conditions**: For each Chronic Medical Condition question (25a-q), you must individually select “No”, “Yes”, or “Unknown.” If all information for Chronic Medical Conditions is Unknown, select “Unknown” for all items. If patient has No Chronic Medical Conditions, select “No” for all items.
Survey Changes (continued)

- **New Questions Added:**
  - Religious Preference (Question 17a)
  - Religious Affiliation (Question 17b)
  - Disability or Disorder: Opiate Related Disorder (Question 24g)
  - Disability or Disorder: Speech Impairment (Question 24k).
  - Cannabis Use: Recreational (Question 26)
  - Cannabis Use: Prescribed (Question 27)
  - Alcohol Use Counseling or Medication (Question 29)
  - Opiate Related Counseling or Medication (Question 30)
  - **Any Other** Drug/Substance Use Counseling or Medication (Question 31)

- **Criminal Justice or Juvenile Status Question:** “Drug Court Treatment” has been added to the “Alternative to Incarceration (ATI) status, Mental Health Court, Court Diversion” response option.

- **Date of Client Service:** Dates were revised to reflect the 2019 Survey Week (October 21 - October 27).
Application Changes

• Improved survey layout and design. Questions are now separated into different sections for better organization and will also allow you to save sections and complete the rest of the survey at a later date.

• Upgraded user interface – new web page header, footer and navigation menus.

• Ability to use IE 11 and Chrome without having to enable compatibility mode in the browser.

• Error messages and validations for survey questions are easily visible next to the corresponding question which will allow you to quickly identify what errors and sections still need to be completed prior to submitting a survey.

• Reports updated to support new survey questions.
OMH Website:  https://www.omh.ny.gov

The OMH Website has a link to Resources & Tools…
Information for Service Providers

Behavioral Health Providers

Behavioral Health Resources & Tools:

Mental Health Provider Data Exchange (MHPD)
The MHPD is a Web-based application designed to support an accurate and timely master directory of providers in the New York State public mental health system. The MHPD enables local mental health authorities and providers to use the ease of the Internet to verify or request changes to program information they are required to submit to OMH.

Patient Characteristics Survey (PCS)

PCS Data Collection
Programs funded or licensed by OMH report client-level demographic, clinical, and service descriptions for persons they served during the week of the survey. All survey data are submitted to OMH electronically using the Web-based PCS application. This page provides mental health providers with information about the survey timeframe and requirements for preparing for and obtaining access to the Web-based PCS application.

Security Management

Security Management System (SMS)
The Security Management System (SMS) is an OMH Web-based application that state and local facilities use to grant their staff access to secured OMH Web-based applications including the Patient Characteristics Survey (PCS) and PSYCKES Medicaid.

• Patient Characteristics Survey (PCS) Home Page, where you will find information about PCS, a user manual, and links to the application itself.
The Patient Characteristics Survey (PCS)

What is the PCS?
The PCS is conducted every two years, and collects demographic, clinical, and service-related information for each person who receives a public mental health service during a specified one-week period.

Why is the PCS so important?
The PCS is the only Office of Mental Health data source that collects this type of client-level information from all public mental health service programs. Due to an exceptional level of cooperation and participation from service providers, the PCS is a reliable and invaluable resource for helping to manage New York State’s public mental health system, complying with federal reporting requirements, assisting local governments with the mental health services planning process, and informing the distribution of funding.

Survey Resources
Preparation for the Survey
- 2019 PCS Calendar — includes all of the important dates for 2019
- What’s New for 2019 — summarizes changes to the form and application

The Data Entry Web Application
- 2019* PCS Application (User Identification and Password Required)

PCS Reference Materials
- 2019 Survey Form — for informational purposes only — not for data collection
- 2019 PCS Guidelines — covers general reporting instructions (PDF)
- 2019 Using the Electronic Data Upload Feature — contains information on:
  - File Layout
  - Validations
  - Valid County Zip Code Combinations
  - Valid DSM-5 Codes Sorted by Label
  - Valid DSM-5 Codes Sorted by Codes
  - Data Upload Notification Form
- 2019 Frequently Asked Questions (FAQS)

Other Resources
- Mental Health Provider Data Exchange (MHPD) web page — includes the MHPD Basic User Manual and Facility Survey Manual
- Security Management System (SMS) web page — includes the SMS Reference Manual
- PCS Reports and Data Briefs web page — access to the PCS public web portal

Questions about the information on this page or issues with document accessibility can be directed to the PCS Team in the Surveillance and Surveys Unit.
How to log in to the PCS

- Log in using your User ID and password or token
- Remember you can use either a password or token
PCS Application Home Page

Welcome to PCS 2019

Welcome to the Home Page of the 2019 Patient Characteristics Survey (PCS). The survey information is collected for the week of October 21 through October 27, 2019. Choose your task by selecting from the menu at the top of this page.

YOU ARE CURRENTLY LOGGED INTO THE "PRACTICE PLATFORM".

This practice platform will be available until Monday October 14, 2019. Please 'try out' our new PCS application with the comfort of knowing that all survey submissions made during this practice time will be erased after that date. The application will be unavailable October 15 through October 20, 2019.

Beginning Monday October 21, 2019, when you log in, you'll be brought to the ACTUAL 2019 Patient Characteristics Survey, and this "PRACTICE PLATFORM" will no longer be available.

Following is a note from PCS Administrators at OMH Central Office:

This is a test message (from PCSWEB in DEV) for PCS2019.

Percent of Unit/Sites that are Locked: 0%

The following table is a list of all the Unit/Sites that are participating in the Patient Characteristics Survey. When each Unit/Site has finished data entry, a PCS Supervisor must go to the Supervisor Page and Lock its data. This signifies to OMH that data entry for that site is complete. When a particular Unit/Site is locked, neither further data entry nor editing will be possible unless a PCS Supervisor subsequently unlocks it. When 100% of your Unit/Sites are locked, you have completed the PCS.

- Clicking on "Submissions 2019" for a particular row will bring you to the list of submissions for that Unit/Site. If "Submissions 2019" is not an active link, then you are a submitter who is not authorized to view data for this Unit/Site.
- Clicking on "Number of Users" for a particular row will display the names of users who have permission from their Security Manager to view and edit the data for that Unit/Site. If this column displays a zero, then there are no users authorized and no list will be shown.
- If you feel you need authorization for additional Unit/Sites, please contact your facility’s Security Manager to obtain it.

© Show Unit/Site(s) I Have Access to  ® Show All Unit/Site(s)
• Application Guidelines and Reference materials
• Send us an email by clicking “Contact Us” in the Help Menu
• Locate contact information
PCS Application Home Page

- Countdown Calendar lists number of days left to complete PCS
- Progress bar tracks submissions and percentage of submissions that are locked
### PCS Application Home Page – List of Unit/Sites

- **Show Unit/Site(s) I Have Access to**
- **Show All Unit/Site(s)**

#### Table:

<table>
<thead>
<tr>
<th>Unit-Site Code</th>
<th>Unit Name</th>
<th>Site Name</th>
<th>Program Type Name</th>
<th>Submissions 2017</th>
<th>Submissions 2019</th>
<th>Unit/Site Locked?</th>
<th>Reason for No Data (RFND)</th>
<th>Number of Users</th>
</tr>
</thead>
<tbody>
<tr>
<td>001-1000</td>
<td>Transportation Program</td>
<td>Transportation Program</td>
<td>Home and Community Based Services (HCBS) Waiver</td>
<td>1</td>
<td></td>
<td>No</td>
<td></td>
<td>9</td>
</tr>
<tr>
<td>010-1000</td>
<td>Recovery PROS</td>
<td>Recovery PROS</td>
<td>Comprehensive PROS with Clinical Treatment</td>
<td>2</td>
<td></td>
<td>No</td>
<td></td>
<td>9</td>
</tr>
<tr>
<td>456-1000</td>
<td>Test - Add a Program</td>
<td>Test - Add a Program</td>
<td>Supported/Single Room Occupancy (SRO)</td>
<td></td>
<td>0</td>
<td>No</td>
<td></td>
<td>9</td>
</tr>
</tbody>
</table>

| Totals:        | 0               | 3               |                                                         |                  |                  |                    |                          |                 |

**Search:**

- **Previous**
- **1**
- **Next**

*NEW YORK STATE OF OPPORTUNITY. Office of Mental Health*
• On the toolbar, click the Submission tab

• In the dropdown menu, click Create New Submission tab

• This will bring up the Enter/Edit Submission page
New Submission

- Begin by selecting the correct unit from the “Unit Name” drop down menu.
- If your unit has multiple sites, you will need to select the correct site from the “Site Name” drop down menu.
- After filling in questions 1 – 5 in this section, click next to continue the survey.
### New Submission - continued

<table>
<thead>
<tr>
<th>Field</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Unit Code</td>
<td>456</td>
</tr>
<tr>
<td>2. Site Code</td>
<td>1000</td>
</tr>
<tr>
<td>Program Code</td>
<td>5070</td>
</tr>
<tr>
<td>3a. Client's First Name</td>
<td>Joe</td>
</tr>
<tr>
<td>3b. Client's Last Name</td>
<td>Unknown</td>
</tr>
<tr>
<td>4. Date of Birth</td>
<td>99 99 1959</td>
</tr>
<tr>
<td>5. Assigned Sex at Birth</td>
<td>Male</td>
</tr>
</tbody>
</table>

- Once a Unit and Site are selected, these fields auto populate.
- Enter Client’s Name, DOB, and Gender.
- Clicking “Next” checks for duplicate entries, then allows you to continue to the next screen.
Creating a Submission
Duplicate Alert Message

There are survey records with the same name, DOB, gender. Is this the same person?

If this may be the same person, select a sheet number to view and edit the existing submission:

Sheet number

2

If this is not the same person, and you'd like to create a new submission, press 'Create New Submission' button to begin a new submission.

Create New Submission
PCS Questions

4. Date of Birth *

mm  dd  yyy
01  01  2013

12. Parental Status *

- [ ] No children
- [ ] Has children over 18 years old
- [ ] Has minor children, in client’s custody
- [ ] Has minor children, NOT in client’s custody
- [ ] Expectant parent
- [ ] Unknown

18. Does client have prior or current active U.S. military service? *

- [ ] No
- [ ] Yes
- [ ] Unknown

19. Employment Status *

(Select the first outcome that applies)

- [ ] Not In Labor Force: unemployed but not looking for work, retired, homemaker, student, incarcerated, or psychiatric inpatient

- Questions auto populate based on age
- Do not try to overwrite
PCS Questions

8a. Hispanic Ethnicity *
- No, not Hispanic/Latino
- Yes
- Unknown

8b. If Yes to Question 8a, select one of the following *

9. Race *
- White
- Black/African American
- Asian
- American Indian/Alaska Native
- Native Hawaiian/Other Pacific Islander
- Other
- Unknown

9h. If 9b. Black/African American is selected, select one of the following *

- Questions with round check boxes are “select one”
- Questions with square check box are “select all that apply”
PCS Questions

5. Assigned Sex at Birth or Sex on Birth Certificate *
   - Male
   - Female
   - Unknown

6. Does client self-identify as transgender? *
   - Make Your Selection
     - No
     - Yes, transgender female to male
     - Yes, transgender male to female
     - Yes, transgender, gender non-conforming
     - Client didn't answer
     - Unknown

7. Sexual Orientation *
   - Make Your Selection
     - Straight or heterosexual
     - Lesbian or gay
     - Bisexual
     - Other
     - Client didn't answer
     - Unknown

1. Information is asked of everyone
2. Allows for improved care
3. HIPAA protected and kept completely confidential

Note: Please refer to OMH Bureau of Cultural Competency link for training videos to help in asking these important questions.
https://www.omh.ny.gov/omhweb/cultural_competence/cultural_population.html
PCS Questions: Question #10 - Living Situation

• Living Situation
  • Inpatient programs report on PRIOR Living Situation and RTF unless:
    • Client transferred directly from another inpatient setting
    • Client has been in residence in this inpatient setting for over one year
      – All other programs report on CURRENT Living Situation
  • Homeless (Shelter, Street, Transitional Living Situation)
    – If you know the county of residence prior to being homeless, select that for county of residence
    – If you do not know the county of residence prior to being homeless, use the county of the homeless shelter
PCS Questions: Question #25 – Chronic Medical Condition

- Chronic Medical Conditions are individual questions with “No”, “Yes”, “Unknown” responses.

There are now check boxes if:
- All Chronic Medical Conditions are “No”
- All Chronic Medical Conditions are “Unknown”
### PCS Questions: Questions #33 and #34 - Diagnosis

#### 33. Primary Psychiatric Diagnosis *

<table>
<thead>
<tr>
<th>Make Your Selection</th>
</tr>
</thead>
<tbody>
<tr>
<td>FO280 Major neurocognitive disorder due to Possible Frontotemporal Lobar Degeneration, without behavioral disturbance</td>
</tr>
<tr>
<td>FO280 Major neurocognitive disorder due to prion disease. Without behavioral disturbance</td>
</tr>
<tr>
<td>FO280 Major neurocognitive disorder due to probable Alzheimer’s disease, Without behavioral disturbance</td>
</tr>
<tr>
<td>FO280 Major neurocognitive disorder due to probable frontotemporal lobar degeneration, Without behavioral disturbance</td>
</tr>
<tr>
<td>FO280 Major neurocognitive disorder due to traumatic brain injury, Without behavioral disturbance</td>
</tr>
</tbody>
</table>

#### 34. Additional Diagnosis *

<table>
<thead>
<tr>
<th>Make Your Selection</th>
</tr>
</thead>
<tbody>
<tr>
<td>FO280 Major neurocognitive disorder due to Alzheimer’s disease, Probable, Without behavioral disturbance</td>
</tr>
<tr>
<td>FO280 Major neurocognitive disorder due to another medical condition, Without behavioral disturbance</td>
</tr>
<tr>
<td>FO280 Major neurocognitive disorder due to HIV infection, Without behavioral disturbance</td>
</tr>
<tr>
<td>FO280 Major neurocognitive disorder due to Huntington’s disease, Without behavioral disturbance</td>
</tr>
<tr>
<td>FO280 Major neurocognitive disorder due to multiple etiologies, Without behavioral disturbance</td>
</tr>
</tbody>
</table>

- Type either the DSM-5 Code or label to filter the list.
- Note that a given code may have multiple labels.
Admission Date

- Programs that do complete formal admission paperwork should:
  - Enter the date of the client's current admission to the reporting FUS (do not consider admissions to other FUS's.)
  - Be sure that the admission date neither precedes the client's birth date nor follows the first date of service during the survey week.
  - If date of admission cannot be determined, then selected “If unknown admission date, check here.” The date box will be auto-populated with “99999999”.

- Programs that do not have a formal admission process should:
  - Enter the date the client first started coming to the program
  - If that can’t be determined, select “If program does not do formal admission paperwork, check here” The date box will be auto-populated with “77777777”
PCS Questions: Question #40 - Date of Client Service

- ONLY complete surveys for clients who received services during the survey week.
- Check off each day that the client received services in this program.

40. Date(s) of Client Service During Survey Week *

(Select all that apply)

- Oct 21
- Oct 22
- Oct 23
- Oct 24
- Oct 25
- Oct 26
- Oct 27

- Select all the Dates During Survey Week for Client Service.
Creating a Submission
Moving through and saving a submission

• After entering data for a section, you can click the **Select Section** dropdown menu, “Previous” or “Next” buttons, or the “Save” button.
Creating a Submission
Navigating the Survey

• Click on the Patient Characteristics Survey 2019 in the upper left-hand corner of the screen to take you back to the beginning

• Do not click on the back button in the browser

• Click on the Patient Characteristics Survey 2019 in the upper left-hand corner of the screen to take you back to the beginning
Creating a Submission

Saving a submission

- After entering data for a submission, click the save button at the bottom of the screen.

- Once you click the save button, you will see a message displaying the newly created sheet number and that the survey is saved.
Creating a Submission
Problems and Peculiarities

- Upon clicking the Save button, any answers left blank or with conflicting data will appear in a pop-up window.

- Areas of concern are easily identified with highlighted text below each question.
Problems and Peculiarities

40. Date(s) of Client Service During Survey Week *

(Select all that apply)

- Oct 21
- Oct 22
- Oct 23
- Oct 24
- Oct 25
- Oct 26
- Oct 27

- Select all the Dates During Survey Week for Client Service.

The following items are problematic. Please correct each item in order to make the submission valid.

- 27. In the last 12 months, did client use cannabis (marijuana, weed, pot or hashish) for medical purposes? must be answered.

Review your submission for the following peculiarities:

- Unit Name: This program serves children but you indicated an age above 21 years old. Please make sure you are reporting on the child and not the parent or collateral.

- 22. You reported client is 97 years old but Education Level is 'Third grade'. That is unusual. If that is not correct, please edit the submission.

41. Sheet No.:

1

Facility Code

2222

- Red background problematic items must be corrected

- Yellow background peculiar items should be reviewed

- The sheet number is displayed at the top, above facility code, making it easier to look up this submission again later
Problems and Peculiarities

- If there are any problems or peculiarities, they will also appear in the drop down menu as well.

- In order to move back and forth through the survey, you can only use the drop down menu.
Problems and Peculiarities

Click the Edit button to make corrections immediately.

Click Create New Submission button to start a new survey.
### Data Imported from CAIRS or MHARS

- After selecting a Unit and Site, note that the data source indicates information pulls in from MHARS

<table>
<thead>
<tr>
<th>Data Source</th>
<th>Facility Code</th>
<th>Facility Name</th>
<th>Unit Code</th>
<th>Unit Name *</th>
<th>Site Code</th>
<th>Site Name *</th>
<th>Program Code</th>
<th>Program Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>MHARS</td>
<td>2222</td>
<td>Test Facility (for user manual)</td>
<td>456</td>
<td>Test - Add a Program</td>
<td>1000</td>
<td>Test - Add a Program</td>
<td>5070</td>
<td>Supported/Single Room Occupancy (SRO)</td>
</tr>
</tbody>
</table>
Select a Client from the List

- The drop down list will show all Clients currently admitted to your program.
- If a Client is not on the list, you will be able to add them directly by scrolling to the bottom of the list and choosing “Enter data for a different client.”
If Client is not on the list, enter by clicking here.
List of Submissions

- Filter by Unit and Site to narrow your list
- Submitters will only see unit/sites to which they have access

<table>
<thead>
<tr>
<th>Unit-Site Code</th>
<th>Unit Name</th>
<th>Site Name</th>
<th>Sheet Num.</th>
<th>Client's First Name</th>
<th>Client's Last Name</th>
<th>Valid?</th>
<th>Number Problematic</th>
<th>Number Unknown</th>
<th>View/Edit/Delete/Copy</th>
<th>Creator Name</th>
<th>Updater Name</th>
<th>Date Last Saved</th>
</tr>
</thead>
<tbody>
<tr>
<td>456-1000</td>
<td>Test - Add a Program</td>
<td>Test - Add a Program</td>
<td>102</td>
<td>Joe</td>
<td>Unknown</td>
<td>N</td>
<td>74</td>
<td>1</td>
<td>View/Edit/Delete/Copy</td>
<td>Paul, Paula X</td>
<td>Paul, Paula X</td>
<td>2019/10/11</td>
</tr>
<tr>
<td>456-1000</td>
<td>Test - Add a Program</td>
<td>Test - Add a Program</td>
<td>105</td>
<td>Jane</td>
<td>Doe</td>
<td>N</td>
<td>69</td>
<td>0</td>
<td>View/Edit/Delete/Copy</td>
<td>Paul, Paula X</td>
<td>Paul, Paula X</td>
<td>2019/10/16</td>
</tr>
<tr>
<td>456-1000</td>
<td>Test - Add a Program</td>
<td>Test - Add a Program</td>
<td>104</td>
<td>Jane</td>
<td>Unknown</td>
<td>N</td>
<td>11</td>
<td>28</td>
<td>View/Edit/Delete/Copy</td>
<td>Paul, Paula X</td>
<td>Paul, Paula X</td>
<td>2019/10/16</td>
</tr>
</tbody>
</table>
**List of Submissions**

The following table displays all the submissions for your facility:

<table>
<thead>
<tr>
<th>Unit-Site Code</th>
<th>Unit Name</th>
<th>Site Name</th>
<th>Sheet Num.</th>
<th>Client's First Name</th>
<th>Client's Last Name</th>
<th>Valid?</th>
<th>Number Problematic*</th>
<th>Number Unknown</th>
<th>View</th>
<th>Edit</th>
<th>Delete</th>
<th>Copy</th>
<th>Creator Name</th>
<th>Updater Name</th>
<th>Date Last Saved</th>
</tr>
</thead>
<tbody>
<tr>
<td>001-1000</td>
<td>Transportation Program</td>
<td>Transportation Program</td>
<td>1</td>
<td>Harold</td>
<td>Leonard</td>
<td>N</td>
<td>1</td>
<td>2</td>
<td>View</td>
<td>Edit</td>
<td>Delete</td>
<td>Copy</td>
<td>View</td>
<td>Edit</td>
<td>Delete</td>
</tr>
<tr>
<td>010-1000</td>
<td>Recovery PROS</td>
<td>Recovery PROS</td>
<td>3</td>
<td>Robin</td>
<td>Blake</td>
<td>N</td>
<td>74</td>
<td>0</td>
<td>View</td>
<td>Edit</td>
<td>Delete</td>
<td>Copy</td>
<td>View</td>
<td>Edit</td>
<td>Delete</td>
</tr>
<tr>
<td>010-1000</td>
<td>Recovery PROS</td>
<td>Recovery PROS</td>
<td>2</td>
<td>Michael</td>
<td>Moore</td>
<td>Y</td>
<td>0</td>
<td>0</td>
<td>View</td>
<td>Edit</td>
<td>Delete</td>
<td>Copy</td>
<td>View</td>
<td>Edit</td>
<td>Delete</td>
</tr>
</tbody>
</table>

**Totals:**

- **Number of submissions:** 3
- **Number of submissions valid:** 1

*A Problematic Item* is either of:

a. a response that conflicts with another response, such as "Date of Admission" preceding "Date of Birth;" or
b. an item that remains unanswered (i.e., a "missing" response.)

- **NOTE:** If Edit and Delete are missing, this submission is in a Unit that is locked. See your PCS supervisor to unlock the unit if you need to edit this sheet.
- **Print one or more submissions using the Print feature**
Copy Submission

<table>
<thead>
<tr>
<th>Sheet Number:</th>
<th>2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Client Name:</td>
<td>Michael Moore</td>
</tr>
<tr>
<td>FROM:</td>
<td></td>
</tr>
<tr>
<td>Unit Name:</td>
<td>Recovery PROS</td>
</tr>
<tr>
<td>Site Name:</td>
<td>Recovery PROS</td>
</tr>
<tr>
<td>TO***:</td>
<td></td>
</tr>
<tr>
<td>Unit Name:</td>
<td>Make Your Selection***</td>
</tr>
<tr>
<td>Site Name:</td>
<td>Make Your Selection***</td>
</tr>
</tbody>
</table>

- The Copy Submission box appears right under the List of Submissions, when you choose Copy in the row of the sheet you wish to copy.

- Select the Unit and Site you wish to copy to, then click “Copy Submission”.

Once you have copied a submission, you will be returned to the List of Submissions.

Please note that:
1. copying a submission does **not** delete it from the originating Unit/Site.
2. copied submissions do not include diagnosis codes, dates of service, admission dates, or the dates last served before the survey week. After copying, you must edit the new submission to complete these few items.

*** If you do not see a particular Unit/Site in this list, then either:
A. You are a submitter that does not have access to that Unit/Site, OR
B. The Unit/Site is locked and must be unlocked by a Supervisor before further submissions may be entered.
Copy Submission – Duplicate Records

If a record with the same name already exists in the new Unit/Site, PCS will ask if you wish to view the existing record or continue with the copy.
Viewing Reports

- Quality Assurance Reports help improve the quality of the data submitted to OMH.
- Select a QA Report from the menu.
QA Report 1: Percent of Valid Submissions by Unit/Site

The following table is a list of all the Unit/Sites that are participating in the Patient Characteristics Survey. For each Unit/Site, the percent of valid submissions is displayed. In order for the PCS Supervisor to "Lock" a Unit/Site, all submissions within it must be valid. When all of your Unit/Sites are "Locked," you have completed the PCS.

- Clicking on a number in either of the columns "Submissions Total," "Submissions Valid," or "Submissions Invalid" will bring you to the respective list of submissions for that Unit/Site. If a particular row in the table does not have active links, then you are a submitter who is not authorized to view data for that Unit/Site. If you feel you need access to that Unit/Site then please contact your Security Manager who can grant you authorization.
- If "Percent Valid" displays "na" then there are no submissions for that Unit/Site.

<table>
<thead>
<tr>
<th>Unit-Site Code</th>
<th>Unit Name</th>
<th>Site Name</th>
<th>Program Type Name</th>
<th>Submissions Total</th>
<th>Submissions Valid</th>
<th>Submissions Invalid</th>
<th>Percent Valid</th>
</tr>
</thead>
<tbody>
<tr>
<td>001-1000</td>
<td>Transportation Program</td>
<td>Transportation Program</td>
<td>Home and Community Based Services (HCBS) Waiver</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>010-1000</td>
<td>Recovery PROS</td>
<td>Recovery PROS</td>
<td>Comprehensive PROS with Clinical Treatment</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>50</td>
</tr>
<tr>
<td>456-1000</td>
<td>Test - Add a Program</td>
<td>Test - Add a Program</td>
<td>Supported/Single Room Occupancy (SRO)</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>na</td>
</tr>
<tr>
<td></td>
<td>Totals:</td>
<td></td>
<td></td>
<td>3</td>
<td>1</td>
<td>2</td>
<td>33.33</td>
</tr>
</tbody>
</table>

- Allows users to see how many submissions require corrections to make them valid
### QA Reports

**QA Report 2: Percent of Unknown Responses by Unit/Site**

The following table is a list of all the Unit/Sites that are participating in the Patient Characteristics Survey.

- Clicking on "Submissions Total" for a particular row will bring you to the list of submissions for that Unit/Site. If "Submissions Total" is not an active link, then you are a submitter who is not authorized to view data for this Unit/Site.
- If you feel you need authorization for additional Unit/Sites, please contact your facility’s Security Manager to obtain it.

#### Percent of Unknown Responses by Unit/Site

<table>
<thead>
<tr>
<th>Unit-Site Code</th>
<th>Unit Name</th>
<th>Site Name</th>
<th>Program Type Name</th>
<th>Submissions Total</th>
<th>Percent of 'unknown' answers</th>
<th>Rating (1-5) 5=Best</th>
</tr>
</thead>
<tbody>
<tr>
<td>001-1000</td>
<td>Transportation Program</td>
<td>Transportation Program</td>
<td>Home and Community Based Services (HCBS) Waiver</td>
<td>1</td>
<td>3.92%</td>
<td>2</td>
</tr>
<tr>
<td>010-1000</td>
<td>Recovery PROS</td>
<td>Recovery PROS</td>
<td>Comprehensive PROS with Clinical Treatment</td>
<td>2</td>
<td>0.00%</td>
<td>5</td>
</tr>
<tr>
<td>456-1000</td>
<td>Test - Add a Program</td>
<td>Test - Add a Program</td>
<td>Supported/Single Room Occupancy (SRO)</td>
<td>0</td>
<td>n/a</td>
<td>n/a</td>
</tr>
</tbody>
</table>

**Note:** "Rating" is a measure of each site's usage of the response "Unknown". It compares your site's percent of "unknown" responses with all other sites of the same program type. Sites which use "unknown" least often are given the highest rating (they are given a "5" on a scale of 1 to 5). If "Rating" displays blank then there are no submissions for that site. If "Rating" displays "n/a" then there is no baseline data of that particular program type for comparison.

- Compares your facility’s percent of unknown responses to those of all other sites of the same type in the State
QA Report 3: Percent of Unknown Responses by Item

- Allows Facilities to track what information they are not collecting in general

<table>
<thead>
<tr>
<th>Item</th>
<th>Percentage of Unknown</th>
<th>Rating (1-5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>03 Client's Name</td>
<td>0.00%</td>
<td>5</td>
</tr>
<tr>
<td>04 Date of Birth</td>
<td>0.00%</td>
<td>5</td>
</tr>
<tr>
<td>05 Assigned Sex at Birth</td>
<td>0.00%</td>
<td>5</td>
</tr>
</tbody>
</table>
QA Reports

QA Report 4: Number/Percent of Responses by Item for Uploaded Data

<table>
<thead>
<tr>
<th>PCS Item</th>
<th>Outcome</th>
<th>Count</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>04) Age</td>
<td>0-9</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>10-19</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>20-29</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>30-39</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>40-49</td>
<td>12</td>
<td>100</td>
</tr>
<tr>
<td></td>
<td>50-59</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>60-69</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>70-79</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>80-89</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>90-99</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>100-109</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>110</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>04) Date of Birth</td>
<td>Unknown</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>05) Assigned Sex at Birth</td>
<td>Unknown</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

- It is designed to facilitate the review of the upload of a data file to identify unexpected values.
Click on the menu bar to access the Supervisor Page.

You must be a PCS Supervisor to access this page.
The following table is a list of all the Unit/Sites participating in the 2019 Patient Characteristics Survey. This page will be updated with additional features like locking, unlocking of a Unit/Site, entering a "Reason for No Data", etc.

<table>
<thead>
<tr>
<th>Unit/Site Code</th>
<th>Unit Name</th>
<th>Site Name</th>
<th>Program Name</th>
<th>Submissions 2017</th>
<th>Submissions 2019</th>
<th>Unit/Site Locked</th>
<th>Reason for No Data (RFND)</th>
<th>Last Updated by</th>
<th>Other RFND Requested by</th>
<th>Other RFND Req. Supervisor Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>001-1000</td>
<td>Transportation Program</td>
<td>Transportation Program</td>
<td>Home and Community Based Services (HCBS) Waiver</td>
<td>3</td>
<td>3</td>
<td>No</td>
<td>1</td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>010-1000</td>
<td>Recovery PROS</td>
<td>Recovery PROS</td>
<td>Comprehensive PROS with Clinical Treatment</td>
<td>1</td>
<td>1</td>
<td>No</td>
<td>3</td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
</tbody>
</table>

Unit/Site 010-1000 Recovery PROS

has 1 submissions of which 1 are VALID and 0 are INVALID.

This Unit/Site is CURRENTLY UNLOCKED and available for continued data entry.

Do you wish to LOCK this Unit/Site, preventing further data entry and indicating to OMH that you have finished submitting data for this Unit/Site?

Yes, Lock

- Click anywhere in the row of the Unit/Site you wish to lock, and if all the submissions are valid, the option to lock will appear below the list.
Locking and Unlocking

• When unlocked, a site with valid submissions displays the “Lock” button

Unit/Site 010-1000 ACME TEST PROGRAM
has 5 submissions of which 5 are VALID and 0 are INVALID.

This Unit/Site is CURRENTLY UNLOCKED and available for continued data entry.
Do you wish to LOCK this Unit-site, preventing further data entry and indicating to OMH that you have finished submitting data for this Unit/Site?

Yes, Lock

• When locked, a site with valid submissions displays the “Unlock” button

Unit/Site 010-1001 ACME TEST PROGRAM2
has 1 submissions of which 1 are VALID and 0 are INVALID.

This Unit/Site is CURRENTLY LOCKED and unavailable for continued data entry.
Do you wish to UNLOCK this Unit/Site, and allow further data entry?

Yes, Unlock
When indicating that a unit/site is closed, please also make sure it is closed in MHPD.

Once a reason for not submitting data has been selected, you must click “Save” to submit that reason to OMH.
Other Reason for No Data

Reason for No Data:

Other Reason for No Data - Requested

You have selected "Other Reason for No Data - Requested" and your reason must be approved by a PCS Administrator at OMH. In order to receive approval, you must provide a more detailed explanation. Please use the box below to describe:

• The services provided by your Unit/Site, and
• The information you collect about clients, and
• Why you cannot or should not report data to OMH.

You will not be allowed to SAVE unless the explanation is provided. Your request will be reviewed and either approved or you will be contacted for further information. You have 1000 characters.

Comment for 'Other Reason':

Save Cancel

• Once you select “Other Reason for No Data Requested,” you must provide more information in the comment box before saving. You must answer in detail the 3 questions listed
Other Reason for No Data – cont’d

Unit/Site 010-1000 Recovery PROS

This Unit/Site has 0 submissions. You must provide a reason for not submitting data. Please choose the appropriate reason from the drop down menu. When finished, click the ‘SAVE’ button below.

Reason for No Data:

- Other Reason for No Data - Requested

If you have inadvertently entered a reason for no data, and need to remove it so you can enter data, please click the "Remove Reason" button.

- To remove a Reason for No Data after saving, and thereby, unlock a Unit/Site for data entry, click Remove Reason
1. **Pending**: We are reviewing your request, check back to see the results

2. **Other Reason for No Data – Denied**: Your reason was not acceptable, data must be entered for this Unit/Site

3. **Other Reason for No Data – Approved**: Your reason is acceptable, this Unit/Site is locked, no further attention is needed
At any point during data entry…

A Supervisor may download your facility’s data to an Excel spreadsheet…

If you wish, you may download a copy of your facility's data (in spreadsheet format) by clicking the "Download Facility Data" button below.

NOTE: There are invalid submissions in the facility data.

• If there are invalid submissions, it will be noted here, as well as in the last column on the downloaded Excel spreadsheet.
### Uploading Data to the Web Application

- **Upload to all Unit/Sites at once** by selecting this option
- **Or select one or more Unit/Sites here**
- **A greyed out box indicates that the Unit/Site has been locked**

<table>
<thead>
<tr>
<th>Unit-Site Code</th>
<th>Unit Name</th>
<th>Site Name</th>
<th>Program Type Code</th>
<th>Program Type Name</th>
<th>Total Number of Submissions</th>
<th>Number of Uploaded Submissions</th>
<th>Number of Manually Entered Submissions</th>
<th>Upload Data?</th>
</tr>
</thead>
<tbody>
<tr>
<td>002-1000</td>
<td>FCH - Doan, Randall V.</td>
<td>782 Perine Street</td>
<td>0040</td>
<td>Family Care</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>Loading</td>
</tr>
<tr>
<td>003-1000</td>
<td>FCH - Jones, Mary Ann</td>
<td>625 Decker Avenue</td>
<td>0040</td>
<td>Family Care</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>Loading</td>
</tr>
<tr>
<td>504-2004</td>
<td>Psychiatric Inpatient Unit</td>
<td>CHILDREN &amp; FAMILIES IP - Ward 4</td>
<td>0020</td>
<td>State Psychiatric Center Inpatient</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>Loading</td>
</tr>
<tr>
<td>504-2020</td>
<td>Psychiatric Inpatient Unit</td>
<td>ADULT SERVICES UNIT - BLDG 6</td>
<td>0020</td>
<td>State Psychiatric Center Inpatient</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>Loading</td>
</tr>
<tr>
<td>504-2024</td>
<td>Psychiatric Inpatient Unit</td>
<td>ADULT SERVICES UNIT - BLDG 7</td>
<td>0020</td>
<td>State Psychiatric Center Inpatient</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>Loading</td>
</tr>
</tbody>
</table>
Uploading Data to the Web Application

- Use the “Browse” button to locate your data file on your computer

Note: PCS data file name must end with ".txt" file extension.
Uploading Data to the Web Application

- A data file must have a “.txt” file extension and when you open it, it will look like this*. See the PCS homepage for more information about formatting your data.

* Fictional Data
Uploading Data to the Web Application

• Click the “Upload Now” button and your file will be uploaded

Note: PCS data file name must end with ".txt" file extension.

PCS data file to upload: C:\Documents\PCS2019.txt
User Feedback Survey

- When the PCS is completed, the User Feedback Survey helps us make future improvements
- Allows users to identify issues and concerns with the PCS Application
- Link will be made available on the PCS Supervisor Page
QUESTIONS?

If you have any questions, please contact us via phone or email
1-800-430-3586 or pcs@omh.ny.gov

Reference documents

Patient Characteristics Surveys (PCS) Home page
https://www.omh.ny.gov/omhweb/pcs/submissions/

https://www.omh.ny.gov/omhweb/sms/

Mental Health Provider Data Exchange (MHPD) Home page
https://omh.ny.gov/omhweb/mhpd/