



**Office of  
Mental Health**

# **PSYCKES Mobile App for iPhones & iPads**

**We will begin shortly**

**To hear the webinar, click “Call Me” in the Audio Connection box and enter your phone number - the WebEx system will call your phone**

**If you do not see the Audio Connection box, go to the top of your WebEx screen, click “Communicate” > “Audio Connection” > “Join Teleconference”**

**Melanie Mongillo, MPH  
PSYCKES Medical Informatics Team  
May 14, 2020**

# Q&A via WebEx

- All phone lines are muted
- Access “Q&A” box in WebEx menu at the right of your screen; if you expanded the view of the webinar to full screen, hover cursor over green bar at top of screen to see menu
- Type questions using the “Q&A” feature
  - Submit to “all panelists” (default)
  - Please do not use Chat function for Q&A
- Slides will be emailed to attendees after the webinar

# Agenda

- PSYCKES Overview
- How to Install and Login to the Mobile App
- Enable Access to Protected Health Information (PHI) with Consent, Emergency, or Attestation of Service
- Look Up a Client to View Clinical Summary
- Safety Plan/CSSRS
- Training & Technical Assistance
- Question & Answer

# PSYCKES Overview

# What is PSYCKES?

- A secure, HIPAA-compliant web-based platform for sharing Medicaid claims and encounter data and other state administrative data
- Designed to support data-driven clinical decision-making and quality improvement
- Ongoing data updates
  - Clinical Summary, including mobile app updated weekly
  - Quality Indicator reports updated Monthly

# Who is Viewable in PSYCKES?

- Over 8 million New York State (NYS) Medicaid enrollees (currently or previously enrolled)
  - Fee for service claims
  - Managed care encounter data
  - Dual-eligible (Medicare/Medicaid): Medicaid data only
- Behavioral Health Population, i.e., at least one of the following:
  - Psychiatric or substance use service,
  - Psychiatric or substance use diagnosis, OR
  - Psychotropic medication
- Provides all data – general medical, behavioral health, residential

# What Data is Available in PSYCKES Mobile App?

- Clinical Summary provides up to 1 year of data\*, updated weekly
- All Medicaid Fee For Service (FFS) claims and Managed Care (MC) encounter data, across treatment settings
  - Medications, medical and behavioral health outpatient and inpatient services, Emergency Room (ER), care coordination, residential, etc.
  - Time lag varies from weeks to months, depending on how quickly providers bill and Managed Care plans submit to Department of Health (DOH)
- “Real time” (0-7 day lag) data sources currently in PSYCKES:
  - Care plan documents (e.g., safety plans) uploaded or created
  - State Psychiatric Center EMR
  - CAIRS: Assertive Community Treatment (ACT) provider and contact information
  - TACT: Assisted Outpatient Treatment (AOT) provider and contact information
  - MAPP: Health Home enrollment and Care Management provider information
  - NIMRS: Suicide attempt
  - Managed Care Enrollment Table: MC Plan & HARP status

\* Alerts & Incidents and Hospital Utilization data have different timeframes

# Quality Indicators “Flags”

- PSYCKES identifies clients flagged for quality concern in order to inform the treating provider and to support clinical review and quality improvement
- When a client has a quality flag, the provider is allowed access to that individual’s Clinical Summary
- Examples of current quality flags include:
  - Medication-Related, e.g., Polypharmacy, Low Adherence
  - Acute Care Utilization, e.g., High utilization, Readmission
  - General Medical, e.g., No Diabetes Screening on Anti-Psychotic (AP), No Outpatient Medical Visit > 1 year
  - HARP-Enrolled, Not Health Home Enrolled

# PSYCKES Mobile App Overview

- PSYCKES users can rapidly access a client's clinical summary from the field, office, or ER using an iPhone or iPad
- User-friendly streamlined design
- Review overview of critical information and drill in to more detail as needed
- Enable consent or emergency access as needed
- Access recently viewed clients easily without having to re-enter search criteria
- Complete Safety Plans or CSSRS/PHQ-9 from field
- Free in the App Store

# Install & Login

# Technical Requirements for the Mobile App

- iOS device: iPhone, iPad, iPod
- Latest version of iOS;
  - Check to see if an upgrade is needed by navigating to Settings > General > Software Update
- iPhone 5s and above; iPad Mini 2 and above; iPad Air; iPad Pro 9.7 & 12.9; THE iPad
- Password protecting your iOS device is strongly encouraged when using the PSYCKES mobile app

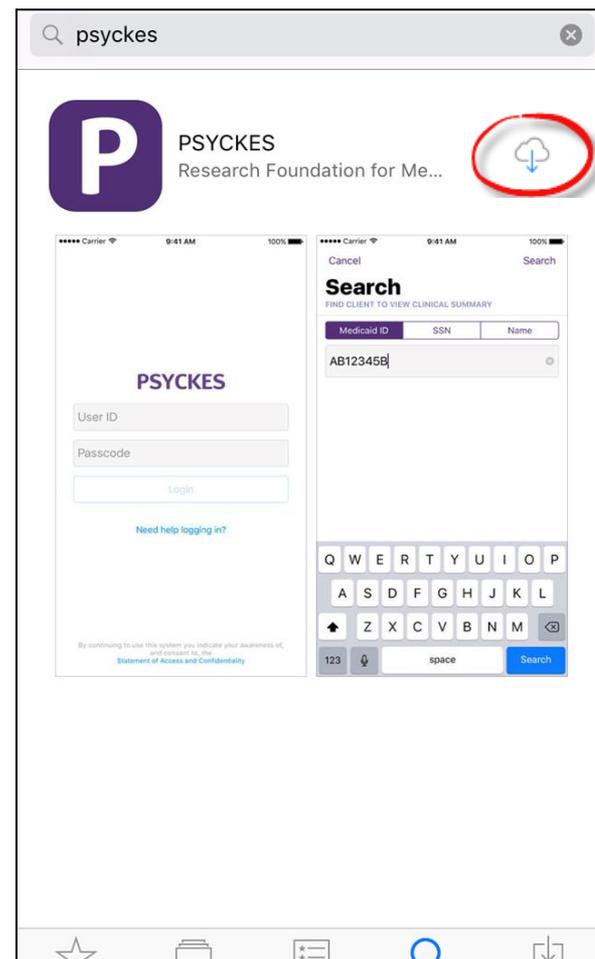
# Pre-login Requirements for the Mobile App

- Users must be granted access to PSYCKES by their organization in order to receive a User ID and token
- Access for individual users is managed by an organization's Security Manager(s)
- First time login to PSYCKES must be done on the desktop version to set a PIN; subsequent logins can be done on the mobile app

# Install the PSYCKES Mobile App

Install the Mobile App from the App Store:

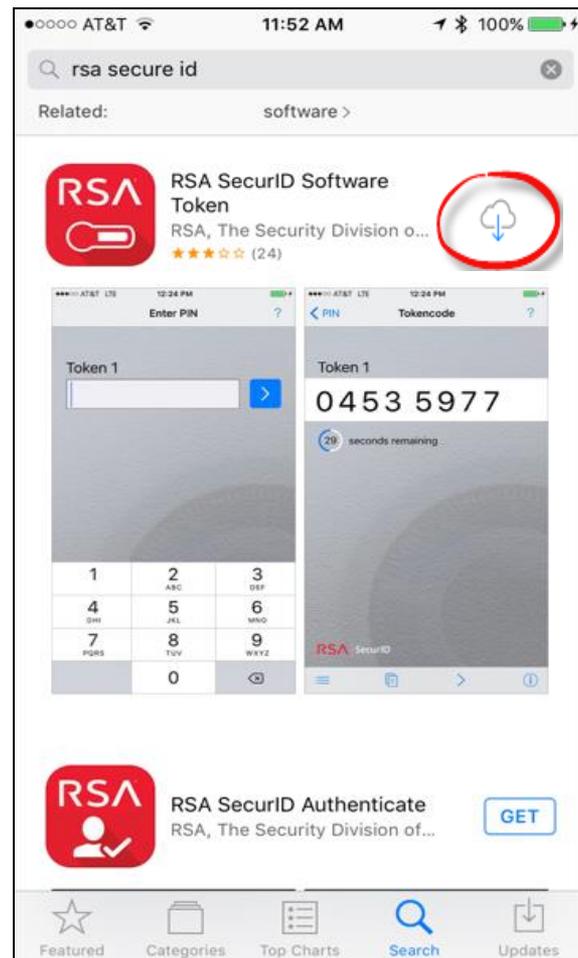
1. Tap the App Store icon on iOS device
2. Search for “PSYCKES”
3. Install the free PSYCKES Mobile App
  - App Store account password may be required



# Install the RSA SecurID App

Install the RSA SecurID Software Token for Convenience:

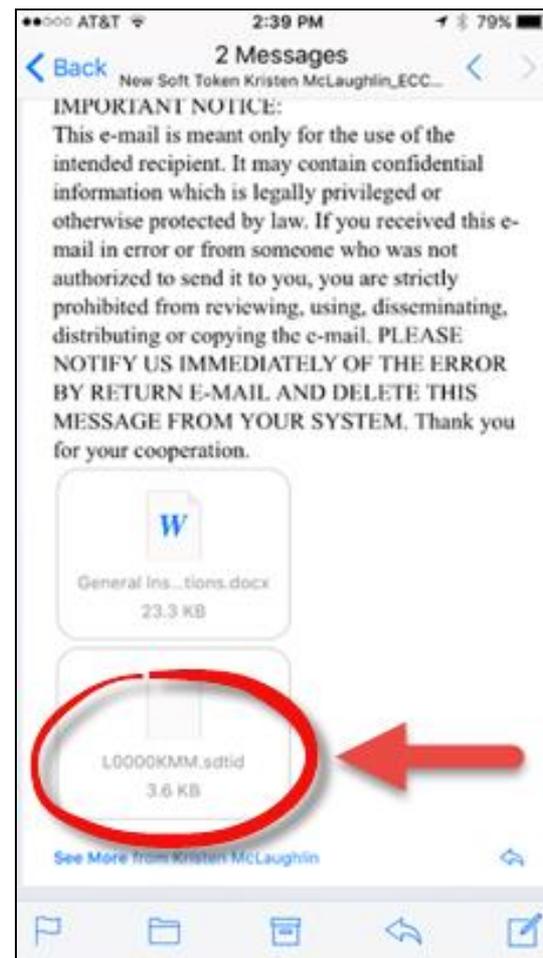
1. Tap the App Store icon on iOS device
2. Search for “RSA SecurID”
3. Install the RSA SecurID app
  - App Store account password may be required



# Import Token from Email

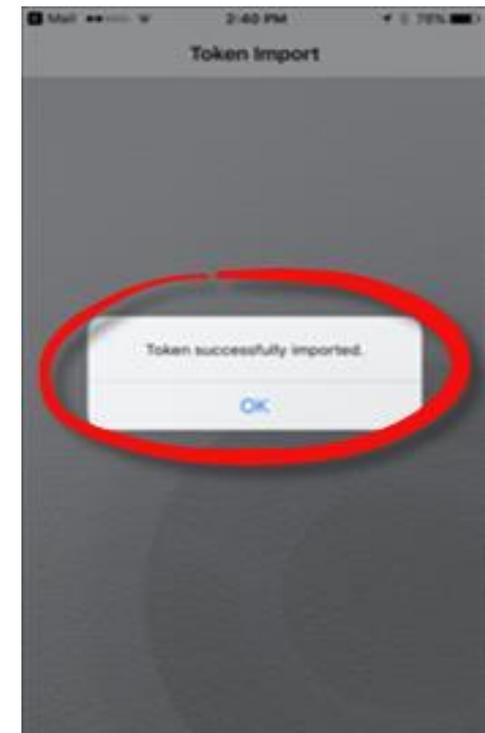
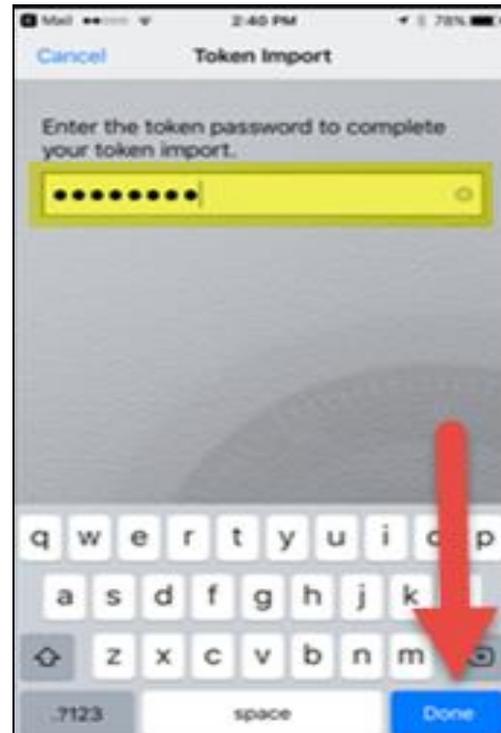
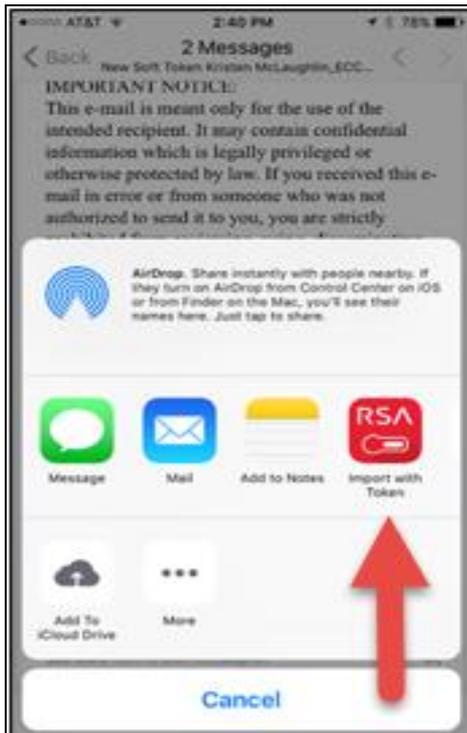
Soft tokens are sent via email to user's email address listed in SMS

- Locate the token email by searching email inbox for: *Information\_Security\_Office OR its.sm.bhp.bs.omh.sao@its.ny.gov*
  - Forward token email to an email account that can be accessed on iOS device
- Open token email from iOS device
- Tap on the token file attachment; it will look like this: “userID/sdtid”



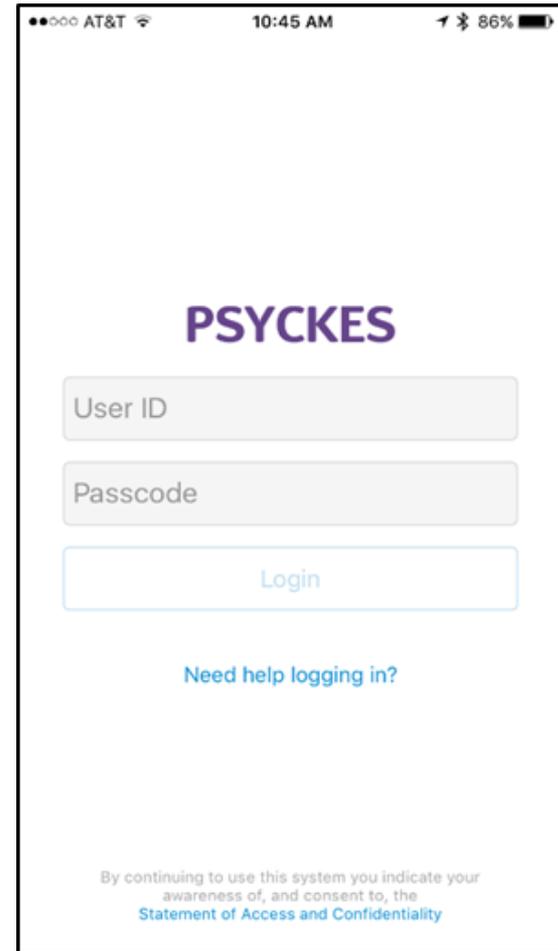
# Import Token from Email (cont.)

- Select RSA's "Import with Token" option
- Enter the token file password that was provided in token email
- Confirmation message will display once token is successfully imported



# Login to PSYCKES Mobile App

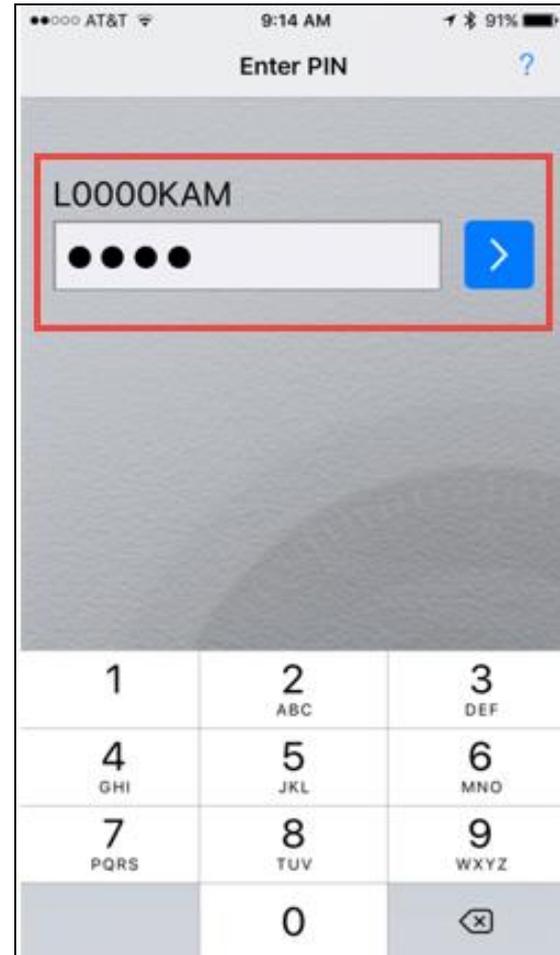
- Tap on the PSYCKES app icon
- Enter User ID into the first box



The screenshot shows the PSYCKES mobile app login interface. At the top, the status bar displays "AT&T", "10:45 AM", and "86%". The app title "PSYCKES" is centered in purple. Below it are two input fields: "User ID" and "Passcode". A "Login" button is positioned below the input fields. A link "Need help logging in?" is located below the button. At the bottom, a disclaimer states: "By continuing to use this system you indicate your awareness of, and consent to, the Statement of Access and Confidentiality".

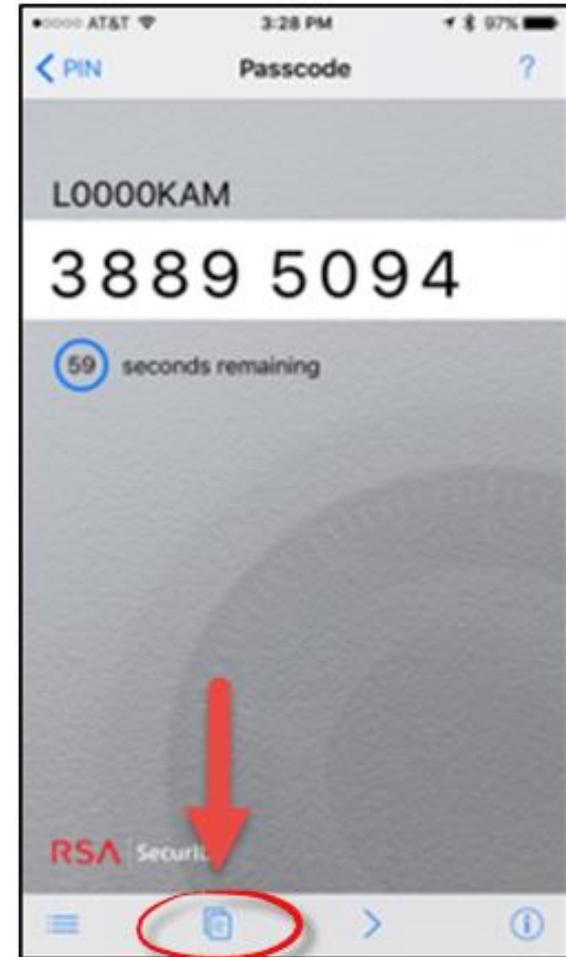
# Login to PSYCKES Mobile App (cont.)

- If RSA token is installed on your iOS device, open the RSA app
- Input your PIN
- Tap blue arrow



# Login to PSYCKES Mobile App (cont.)

- 8-digit time-sensitive passcode will appear in soft token app
- Tap the copy icon at the bottom of the screen
- Return to PSYCKES app login page
- Double tap to paste passcode
- Tap Login



# Medicaid Confidentiality

- Medicaid Confidentiality Standards will appear on every login, like on the desktop version of PSYCKES
- Tap 'Agree' to complete your login
- If you tap 'Disagree' you'll be brought back to the login screen

11:52

Log out

## Medicaid Confidentiality

PLEASE AGREE TO THE TERMS AND CONDITIONS BEFORE ACCESSING PSYCKES

Please Note: Medicaid recipient level data is confidential and is protected by State and Federal laws and regulations. It can be used only for purposes directly connected to the administration of the Medicaid program. You are required to read, understand and comply with these regulations. There are significant State, Civil and Federal criminal penalties for violations.

Please follow your agency's protocols for handling and transmitting PHI and other information protected by the Health Insurance Portability and Accountability Act (HIPAA).

### Federal Medicaid Confidentiality Standards

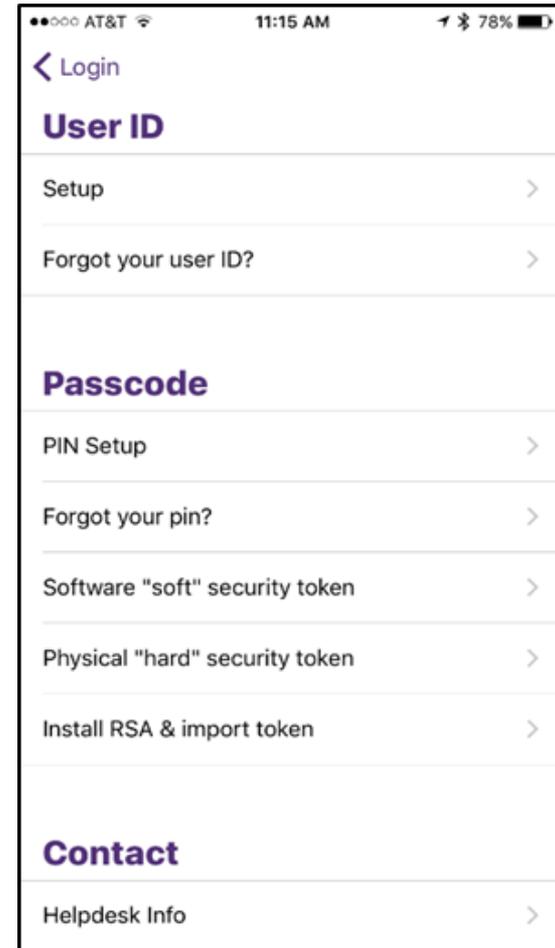
The Federal Medicaid confidential data standard is established by §1902(a)(7) of the Social Security Act (42 USC §1396a(a)(7)). The law requires that a "State plan for medical assistance must: (7) provide safeguards which restrict the use or disclosure of information concerning applicants and recipients to purposes directly connected with the administration of the plan." This statutory requirement is implemented in regulations at 42 CFR §431.300 et seq.. 42 CFR §431.302 defines Medicaid program administration to include:

- Establishing Eligibility;
- Determining the amount of Medical Assistance;
- Providing services for recipients; and

Disagree Agree

# Need Help Logging in?

- The “Need help logging in?” link from the mobile app login page provides instructions about common login questions
- Contact information is provided for both the PSYCKES and ITS helpdesks



# Enable PHI Access

# PHI with Special Protection

- Client-level data is available to provider agency users when clients they serve are positive for a quality flag, with client consent, or in a clinical emergency
- Certain categories of PHI are subject to additional special protections
- Information with special protections include:
  - Substance Use
  - HIV
  - Family Planning
  - Genetic information

# Enable Access to PHI with Special Protection

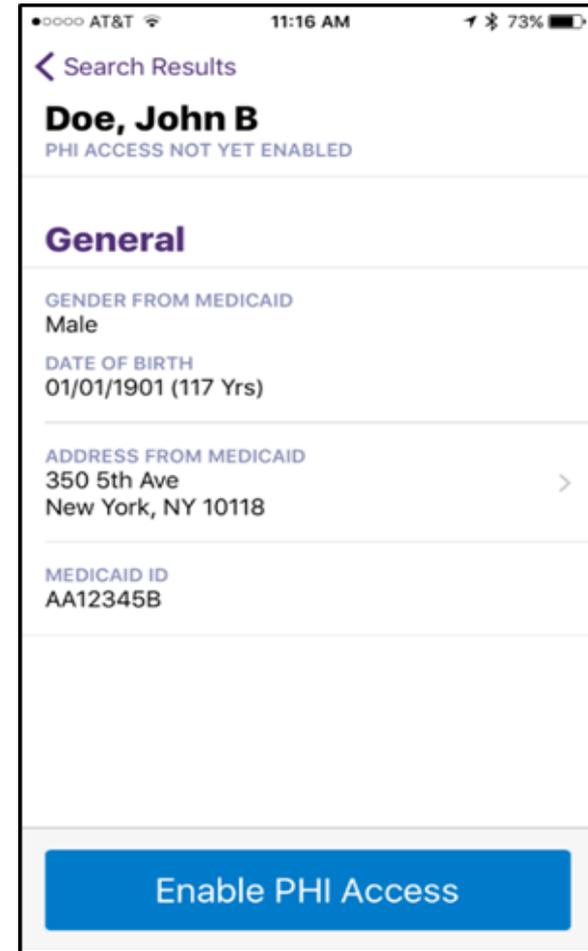
- Data with special protections will be displayed when:
  - Signed consent (PSYCKES, BHCC, DOH 5055) *or*
  - Agency attests to clinical emergency (data available for 72 hours)
- The PSYCKES Consent Form can be printed from the PSYCKES desktop version, in the Registrar Menu or on our public website
- NOTE: Users with state level access and users from Managed Care Organizations will see all available data, including data with special protections, without client consent

# How to Enable PHI Access

- Look up client in the “Search” page
- Confirm you found the correct match
- Mobile app will prompt you to “Enable PHI Access”
- Follow steps to attest to why your provider agency has the right to access PHI and that the client's identity has been confirmed

# Step 1: Search for client in the full PSYCKES database

- Enter Medicaid ID, SSN, or Last Name + First Name + DOB
- Confirm client found matches who you were looking for
  - If results do not match intended client, return to Search Results
  - If data matches intended client, tap “Enable PHI Access”



## Step 2: Select reason for agency's right to access client's data

- If the client signed consent, indicate the consent that was signed:
  - PSYCKES consent
  - BHCC consent
  - DOH 5055
- In the absence of signed consent, select:
  - This is a clinical emergency, or
  - Client is currently served by or being transferred to my agency (access to clinical summary if client is positive for a quality flag)

1:03 LTE

Cancel

### PHI Access

DOE, JOHN

Why are you allowed to view this data?

**The client signed consent**  
*only select consents that apply*

Client signed PSYCKES consent form

Client signed a BHCC Patient Information Sharing Consent

Client signed a DOH-5055 Health Home Patient Information Sharing Consent

**The client did not sign consent**

This is a clinical emergency

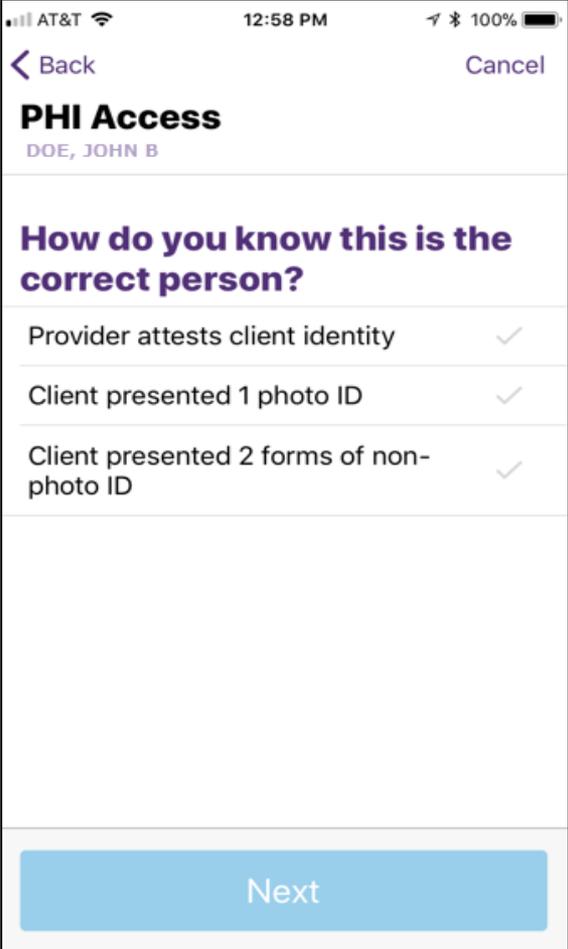
Client is currently served by or being transferred to my facility

Cancel Next

## Step 3: Indicate how client's identity was verified and submit

Attest to client identity via one of the following:

- Select “Provider attests to client identity,” if you or someone at your agency has experience with the client and tap ‘Next’
- Select “Client presented 1 photo ID” or
- Select “Client presented 2 forms of non photo ID”



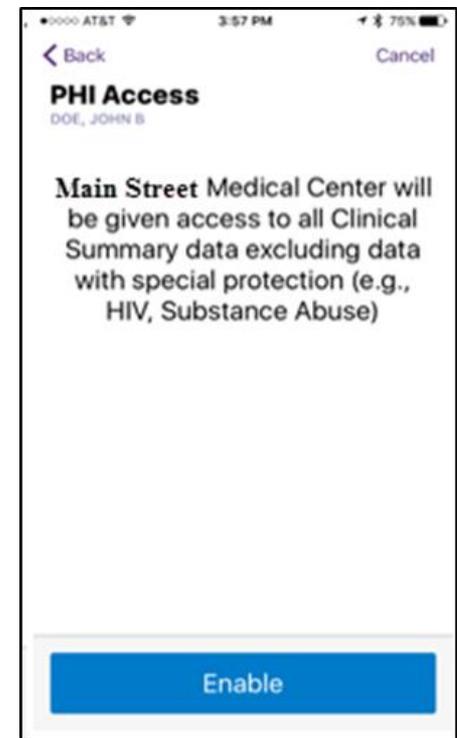
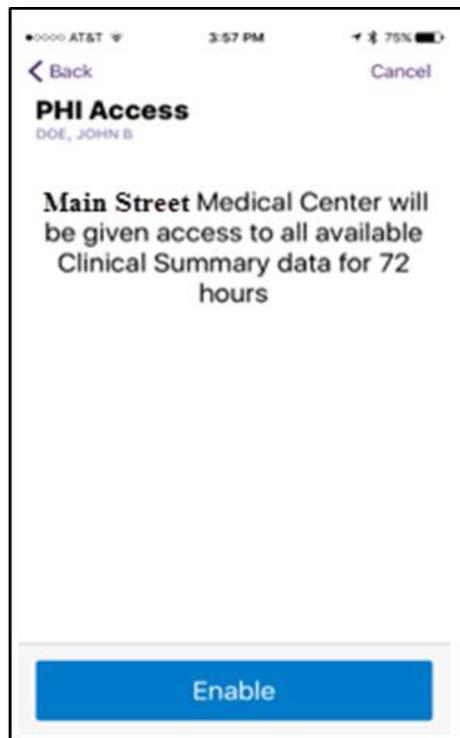
The screenshot shows a mobile application interface for "PHI Access" for a client named "DOE, JOHN B". The screen displays a question: "How do you know this is the correct person?". Below the question are three radio button options, each with a checkmark indicating it is selected:

- Provider attests client identity ✓
- Client presented 1 photo ID ✓
- Client presented 2 forms of non-photo ID ✓

At the bottom of the screen is a large blue button labeled "Next". The top of the screen shows a status bar with "AT&T", "12:58 PM", and "100%" battery. Navigation options "Back" and "Cancel" are visible at the top left and right respectively.

# Step 4: Enable Access

Based on the reason selected for your agency's right to access the client's data, the "Enable" page will display a specific message:



# Change PHI Access

- The Clinical Summary will display the level of PHI Access your agency has for the client (consent, emergency, or quality flag) at the top
- Tap “Change Access” to change the level of PHI access (e.g., to change from Quality Flag access to consent)



# Recipient Search



**Office of  
Mental Health**

# Recipient Search Options

Search for Client with:

- Medicaid ID
- Social Security Number (SSN)
- First Name
- Last Name
- Date of Birth (DOB)



The screenshot shows a mobile application interface for searching Medicaid recipients. At the top, there is a status bar with "AT&T", "11:53 AM", and "72%" battery. Below the status bar, there are "Cancel" and "Search" buttons. The main heading is "Search" in bold, followed by the subtitle "FIND CLIENT TO VIEW CLINICAL SUMMARY". There are three tabs: "Medicaid ID" (selected), "SSN", and "Name". Below the tabs is a search input field containing the text "Medicaid ID (i.e, AA12345A)". At the bottom of the screen, there is a navigation bar with three icons: a magnifying glass labeled "Search", a person icon labeled "Recent", and a gear icon labeled "Settings".

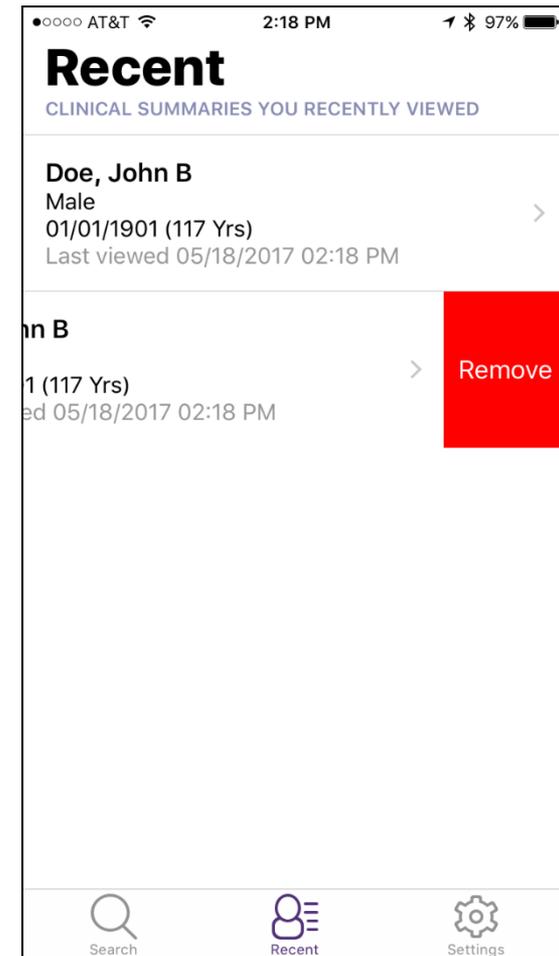
# Recent Clients Viewed

- “Recent” tab is located at bottom of Search page
- Lists clients you recently viewed in the app, including time they were viewed; tap name to view summary again



# Remove Recipients from Recent List

- To remove a client name from the recent list, swipe left on the client name and select “Remove”



# Clinical Summary

# Clinical Summary

- The Clinical Summary in the mobile app provides the past **one year** of information on an individual client across treatment settings
- This is difference from the desktop version, which displays the past 5 years of information
- **NOTE**
  - Alerts & Incidents (e.g., suicide attempt) in the mobile app will not be limited to the past one year only, but will include all available alerts and incidents data
  - Hospital Utilization (5 years) will display up to 5 years of ER and Inpatient hospitalization data

# Clinical Summary Sections

The Clinical Summary is organized in 10 sections:

- General
- Current Care Coordination
- Active Medicaid Restrictions
- Alerts & Incidents
- Quality Flags
- Plans & Documents
- Screenings & Assessments
- Diagnoses
- Medications
- Services

# General

- Gender from Medicaid
- DOB
- Address from Medicaid
- Medicaid ID
- Dual-Eligibility (Medicaid & Medicare)
- Managed Care Plan
- PCP Assignment
- HARP HCBS Reassessment Status
- DSRIP PPS

12:43  LTE 

[← Back](#)

**Doe, John**  
CLINICAL SUMMARY AS OF 02/29/2020

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## General

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**GENDER FROM MEDICAID**  
Male

**DATE OF BIRTH**  
01/01/1950 (70 Yrs)

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**ADDRESS FROM MEDICAID**  
123 Main St  
New York, NY 12345

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**MEDICAID ID**  
XYZ12345

**DUAL-ELIGIBLE (MEDICAID & MEDICARE)**  
Yes

**MANAGED CARE PLAN**  
Fidelis Care New York (LTC Partial Cap)

**HARP STATUS**  
Eligible Pending Enrollment (H9)

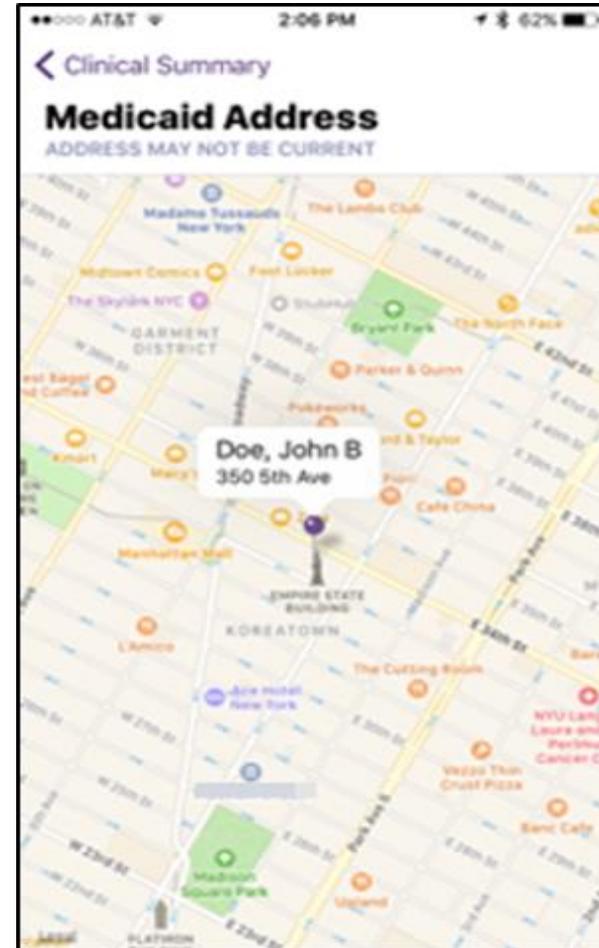
**HARP HCBS ASSESSMENT STATUS**  
Tier 2 HCBS Eligibility (Reassess by 03/20/2020)

**MC PLAN ASSIGNED PCP**  
Malmazada, Meir

**DSRIP PPS**  
Westchester Medical Center PPS

# Medicaid Address

- The mobile app links to a map to the client's address when you tap the address
- Note: Address may not be current, depending on the accuracy of the Medicaid information and when it was last updated



# Current Care Coordination

Current status and contact information is displayed for the following if applicable:

- Health Home/Care Management Agency
- OnTrack Enrollment
- Health Home Plus eligibility
- OPWDD NYSTART eligibility
- POP High User and/or POP Potential Clozapine Candidate
- Assisted Outpatient Treatment (AOT)
- Assertive Community Treatment (ACT)
- Medicaid Eligibility Alert - New York State of Health (NYSoH) Enrollment Required
- Office of Mental Health State PC - lost to contact alert

12:00 📶 🔋

[← Back](#)

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### Current Care Coordination

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**Health Home (Enrolled)**  
GREATER ROCHESTER HLTH HOME NETWORK  
(Begin Date: 10/01/2017 - Current)

Staff Name [555-555-5555](#)  
Staff Email address

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**Care Management (Enrolled)**  
PARK RIDGE MENTAL HLTH CTR MH

---

**POP Potential Clozapine Candidate**  
Evaluate for potential clozapine initiation/referral due to schizophrenia high psychiatric inpatient/ER use and no recent clozapine use. For a clozapine provider referral or questions contact:  
Excellus BlueCross BlueShield  
Case Management Services [555-555-5555](#)  
Staff Email Address

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**POP High User**  
In the event of emergency department/inpatient hospitalizations client is eligible for intensive care transition services. To coordinate contact:  
Excellus BlueCross BlueShield  
Case Management Services [555-555-5555](#)  
Staff Email Address

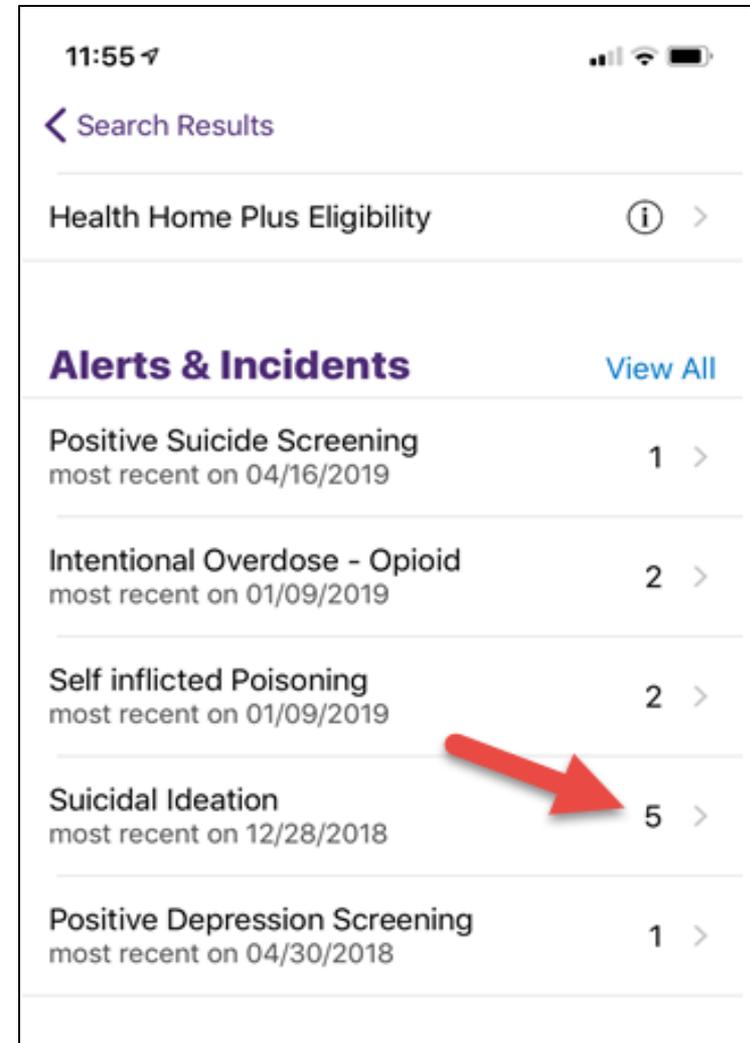
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**Health Home Plus Eligibility** ⓘ [➔](#)

# Alerts & Incidents

## NIMRS & Medicaid data – all available

- Suicide Attempt
- Suicide Ideation
- Self Inflicted Harm
- Self Inflicted Poisoning
- Overdose Risk – Concurrent Opioid & Benzodiazepine
- Overdose – Opioid\*
- Positive Suicide Screening (C-SSRS)\*
- Positive Depression Screening (PHQ-9)\*



11:55 7

< Search Results

Health Home Plus Eligibility ⓘ >

**Alerts & Incidents** [View All](#)

Positive Suicide Screening most recent on 04/16/2019	1 >
Intentional Overdose - Opioid most recent on 01/09/2019	2 >
Self inflicted Poisoning most recent on 01/09/2019	2 >
<b>Suicidal Ideation</b> most recent on 12/28/2018	<b>5 &gt;</b>
Positive Depression Screening most recent on 04/30/2018	1 >

\* These alerts are considered ePHI and will require Consent/ER

# Alerts & Incidents

## Drill-In

- Name of the Incident/Alert
- Date of Incident/Alert type
- Service Type
- Name of Hospital/Provider
- Diagnoses/High Risk/Results

[← Clinical Summary](#)

### Suicidal Ideation

7 MONTHS AGO

12/28/2018

**ER - MH**

SAMARITAN HOSPITAL OF TROY, NEW YOR

Suicidal ideations

12/27/2018

**ER - MH**

SAMARITAN HOSPITAL OF TROY, NEW YOR

Suicidal ideations

12/24/2018

**Inpatient - MH**

ALBANY MEDICAL CTR HOSPITAL

Suicidal ideations

12/22/2018

**ER - Medical**

SAMARITAN HOSPITAL OF TROY, NEW YOR

Suicidal ideations

12/22/2018

**Inpatient - Medical**

ALBANY MEDICAL CTR HOSPITAL

Suicidal ideations

12/13/2018

**Inpatient - MH**

SAMARITAN HOSPITAL OF TROY, NEW YOR

Suicidal ideations

# Quality Flags

- Displays any active Quality Flag the client is positive for
- Certain ePHI related flags will be hidden if consent/ER is not indicated

11:44   

[< Search Results](#)

## Quality Flags

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**GENERAL MEDICAL HEALTH**  
No Outpatient Medical Visit >1 Yr

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**HIGH UTILIZATION - INPT/ER**  
2+ ER - BH  
2+ ER - MH  
2+ ER - Medical  
2+ Inpatient - BH  
2+ Inpatient - MH  
2+ Inpatient - Medical  
4+ Inpatient/ER - MH  
POP : High User  
POP : Potential Clozapine Candidate

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**READMISSION POST-DISCHARGE FROM ANY HOSPITAL**  
BH to BH  
MH to All Cause  
Medical to Medical

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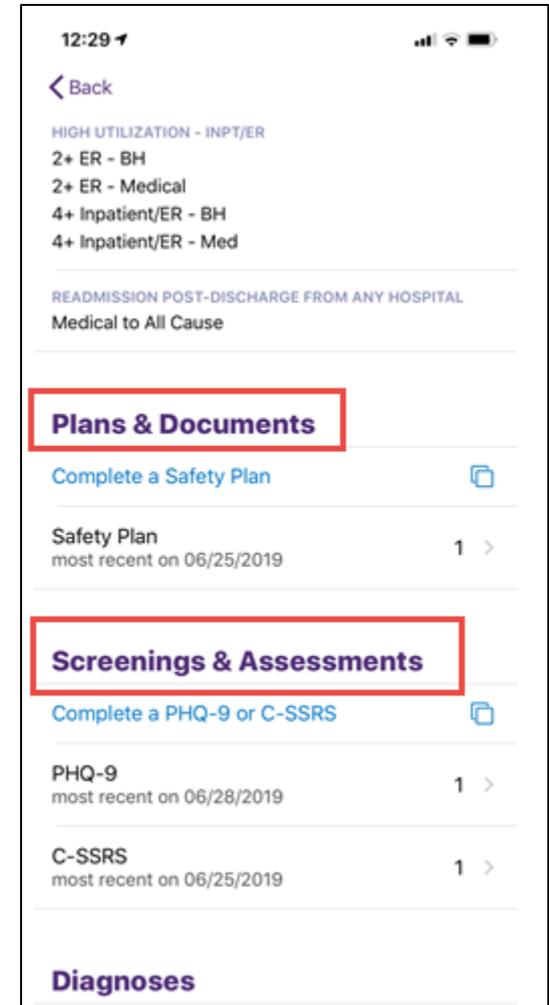
**SUBSTANCE USE DISORDERS - AS OF 11/01/2018**  
No Initiation of Medication Assisted Treatment (MAT) for New Episode of Opioid Use Disorder (OUD)  
No Utilization of Medication Assisted Treatment (MAT) for Opioid Use Disorder (OUD)

# Plans & Documents

- View Plans/documents that have been uploaded to client's clinical summary
- Create Safety Plan using Stanley Brown Template\*

# Screenings & Assessments

- View CSSRS or PHQ-9 entered and attached to client's clinical summary
- Complete CSSRS or PHQ-9\*\*

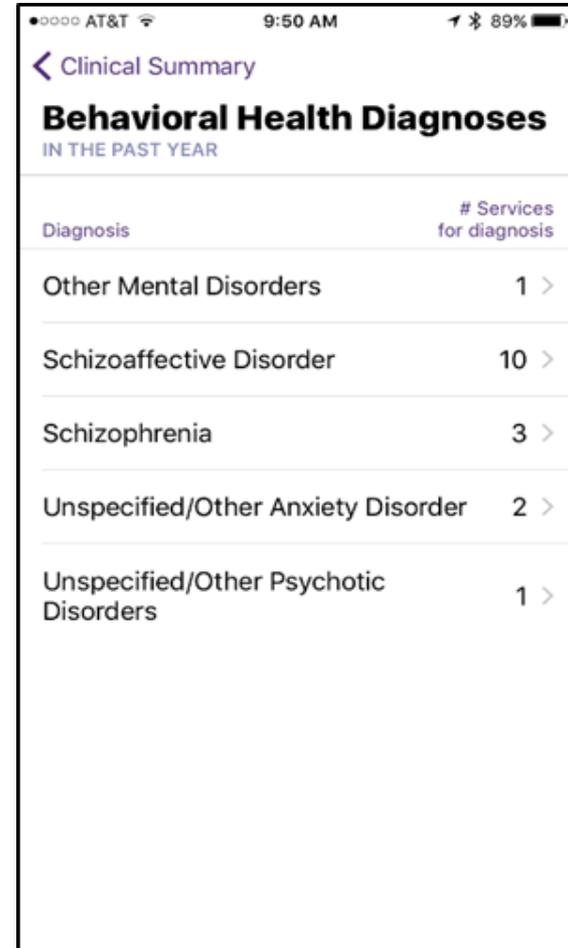


\*Steps to create Safety Plan start on slide 56

\*\*Steps to complete CSSRS start on slide 85

# Diagnoses

- Diagnostic information in the Clinical Summary is split into 2 sections:
  - Behavioral Health
  - General Medical
- Each section lists the number of diagnoses given in the past year
- Tap on the Behavioral Health or General Medical sections to view all primary and secondary diagnoses associated with any Medicaid claim submitted in the past year
- Tap on the diagnosis to view provider invoices associated with the diagnosis, including the provider's name and date of service



The screenshot shows a mobile application interface for a 'Clinical Summary'. The title is 'Behavioral Health Diagnoses IN THE PAST YEAR'. Below the title is a table with two columns: 'Diagnosis' and '# Services for diagnosis'. The table lists five categories of diagnoses with their respective service counts and a right-pointing arrow next to each count.

Diagnosis	# Services for diagnosis
Other Mental Disorders	1 >
Schizoaffective Disorder	10 >
Schizophrenia	3 >
Unspecified/Other Anxiety Disorder	2 >
Unspecified/Other Psychotic Disorders	1 >

# Medications

- Medication information in the Clinical Summary is split into 3 sections:
  - Controlled Substances
  - Behavioral Health
  - General Medical
- Tap on the sections to view list of medications the client picked up within the past year, including information on drug class, date of last pick-up, and number picked up in past year
- NOTE: Pickup records in the past 45 days may not be available AND Medicare clients will have some medication records not available

Sketch 9:41 AM 100%

< Clinical Summary

## Behavioral Health Medications

IN PAST YEAR  
Pickup records in past 45 days may not be available  
Medicare client: some medication records not available

Medication	# Picked Up Past Year
<b>Nortriptyline Ncl</b> Antidepressant Last Pick Up: 7/20/2016 Dose: 30 MG, 2/day Quantity: 60	3
<b>Diphenhydramine Hcl</b> Antidepressant Last Pick Up: 7/20/2016 Dose: 30 MG, 2/day Quantity: 60	4
<b>Generic (Brand Name if different)</b> Nonsteroidal Anti-inflammatory Agents (NSAIDs) Last Pick Up: 7/20/2016 Dose: 600 MG, 4/day Quantity: 30	1

# Services

The Clinical Summary provides information on the following services, if paid for by Medicaid in the past year:

- Outpatient Behavioral Health
- Outpatient Medical
- Hospital & ER (5 years)
- Radiology
- Laboratory & Pathology
- Living Support & Residential
- Dental
- Vision
- Transportation

# Services (cont.)

- Each service row displays the number of service types provided in the past year, with an option to “view all”
- Tap on a service category to drill into the specific services provided, including date(s) of service, provider name, and diagnosis given

Services	View All
Outpatient Behavioral Health	2 >
<b>Outpatient Medical</b>	<b>20 &gt;</b>
Hospital & ER (5 Years)	13 >
Radiology	7 >
Laboratory & Pathology	1 >
Living Support & Residential	1 >
Dental	13 >
Vision	2 >
Transportation	22 >

Clinical Summary data as of 07/23/2019  
[Learn about data sources](#)



Clinical Summary	
Outpatient Medical	
IN PAST YEAR	
LAST MONTH	LAST MONTH
06/06/2019 Physician - Ophthalmology PROVIDER/DOCTOR NAME Hypertensive retinopathy, bilateral	06/06/2019 Physician BENTSIA Other subj
Service Types	
View All	
Physician - Internal Medicine	13 >
Clinic - Medical Specialty	2 >
Nurse Practitioner	1 >
Physician - Ophthalmology	3 >
Physician - Urology	1 >

# Hospital & ER (5 Years)

- Rows are organized by service type with number of services for each type.
- If provider only has a quality flag level of access, Mental Health and Substance Use services will combine into one category: Behavioral Health

< Clinical Summary

## Hospital & ER (5 Years)

IN PAST 5 YEARS

---

LAST MONTH	LAST MONTH
06/09/2019 - 06/10/2019 ER Mental Health BETH ISRAEL MEDICAL CENTER Adjustment disorder, unspecified	06/10/2019 ER Mental Health BETH ISRAEL MEDICAL CENTER Adjustment disorder, unspecified

---

**Service Types** [View All](#)

ER Mental Health	4 >
ER Substance Use	6 >
ER Medical	3 >
Inpatient Mental Health	2 >
Inpatient Substance Use	5 >
Inpatient Medical	1 >

2:20

< Clinical Summary

## Hospital & ER (5 Years)

IN PAST 5 YEARS

---

LAST MONTH	LAST MONTH
06/10/2019 - 06/10/2019 ER Behavioral Health BETH ISRAEL MEDICAL CENTER Adjustment disorder, unspecified	06/09/2019 ER Behavioral Health BETH ISRAEL MEDICAL CENTER Adjustment disorder, unspecified

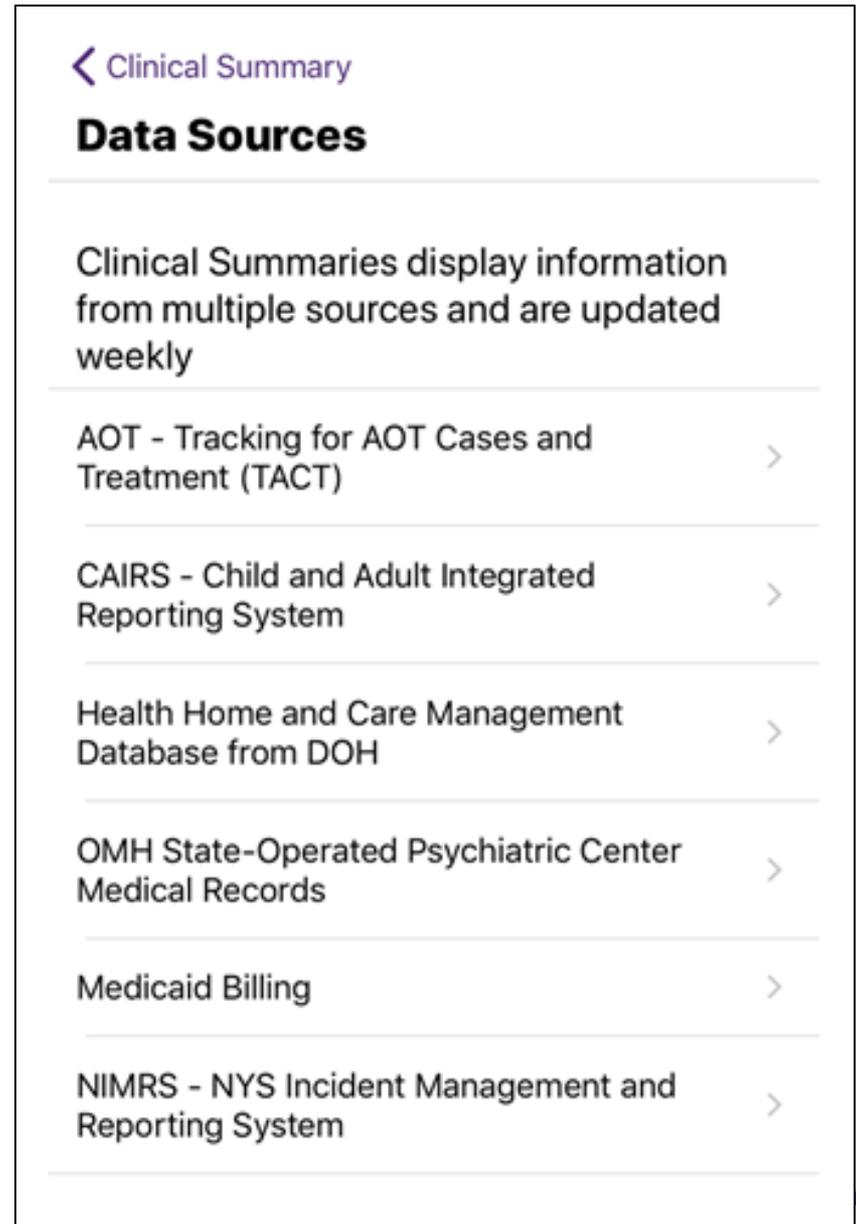
---

**Service Types** [View All](#)

ER Behavioral Health	10 >
ER Medical	3 >
Inpatient Behavioral Health	7 >
Inpatient Medical	1 >

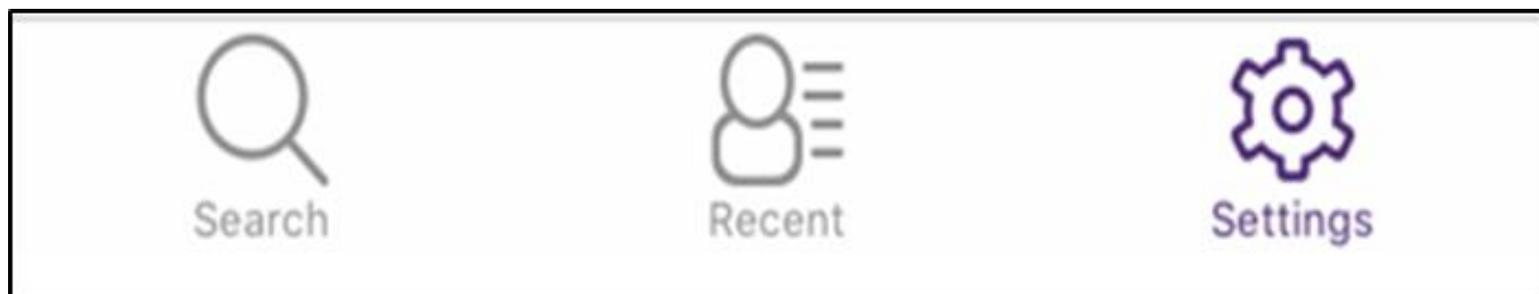
# Data Sources

- Tap “learn about data sources” at the bottom of the Clinical Summary.
- View a list of data sources that are displayed within Clinical Summary with the ability to drill-in for more information:



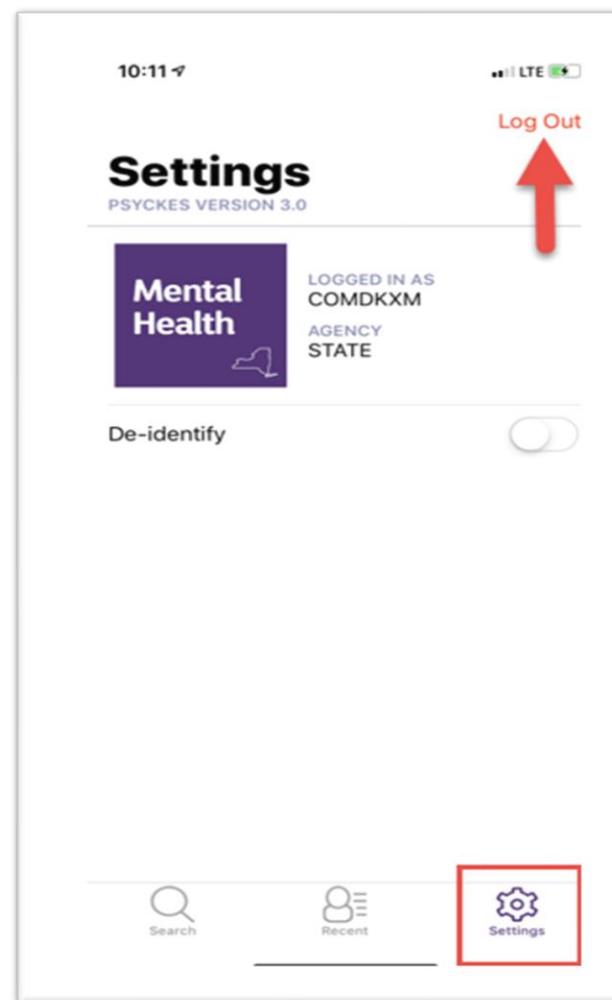
# Settings & How to Log Out

Tap “Settings” at the bottom of the PSYCKES mobile app screen to access the settings page and Log Out



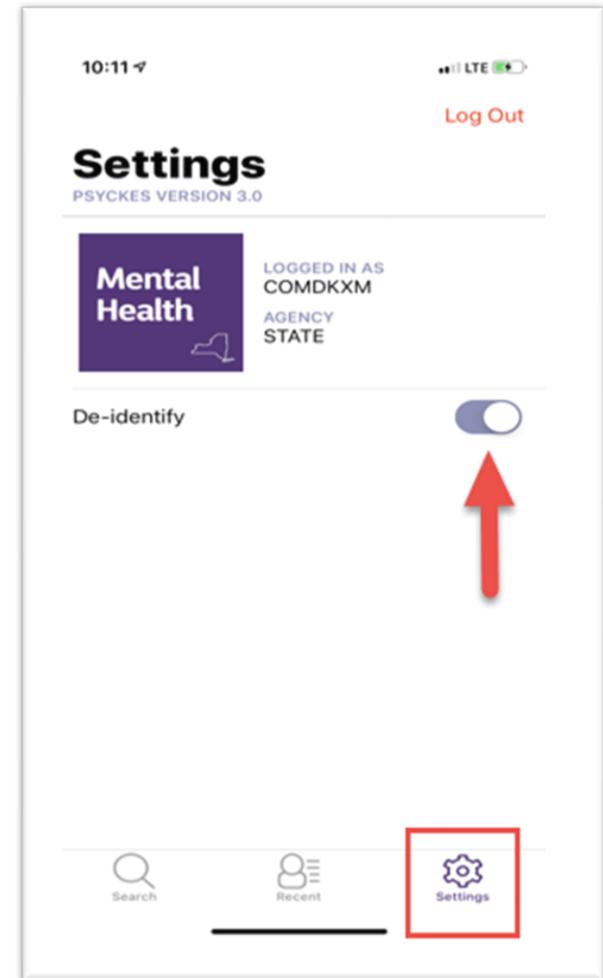
# Settings & How to Log Out (cont.)

- The settings page displays:
  - Your PSYCKES User ID
  - The agency you are logged in as
- Tap “Log Out” at the top right corner of the settings page to log out
- Note: Your mobile app session will time out after 10 minutes and will prompt you to enter your user ID and passcode; this provides an additional layer of security for the mobile app



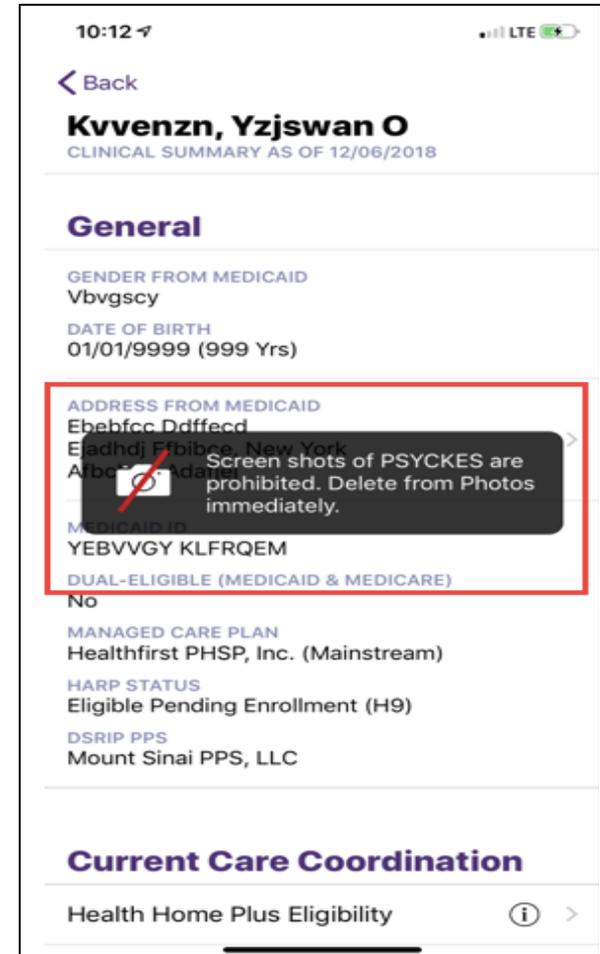
# De-Identify Feature

- De-Identify feature scrambles client identifiers
- Useful for trainings and/or demos



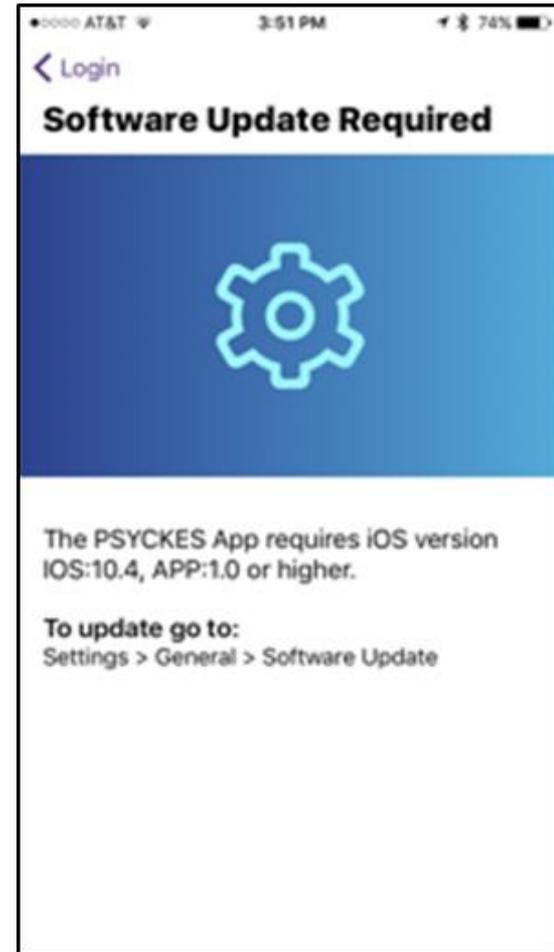
# Screenshots Prohibited

- In order to protect PHI, users are prohibited from taking screenshots while using the PSYCKES mobile app
- If you take a screenshot, a message will pop up instructing you to go into your iOS device photos and remove the screenshot



# Updates to PSYCKES Mobile App

- There are two possible updates for the PSYCKES mobile app:
  - iOS Software Update
  - PSYCKES app version update
- You will receive automatic messages with instructions when it is necessary to update either the iOS software or the PSYCKES



# Create a Safety Plan

# How to Create a Safety Plan in Mobile App

1. Search for client and open Clinical Summary
2. Locate “Plans and Documents” section
3. Tap “Complete Safety Plan”
4. Complete information in each section of the template
  - Required fields are marked with \*
5. Tap “Continue” when completed
6. Confirmation page opens
  - Confirm correct client name
  - Select date safety plan was created if not today
7. Tap “Add to Clinical Summary”

## Quality Flags

### GENERAL MEDICAL HEALTH

- No Outpatient Medical Visit >1 Yr

### HIGH UTILIZATION - INPT/ER

- 2+ ER - BH
- 2+ Inpatient - BH

## Plans & Documents

Complete a Safety Plan



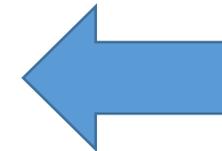
Safety Plans

most recent 3/21/2015

1 >

## Screenings & Assessments

Complete a PHQ-9 or C-SSRS



Sketch 9:41 AM 100%

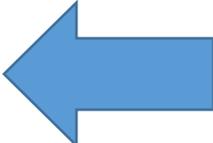
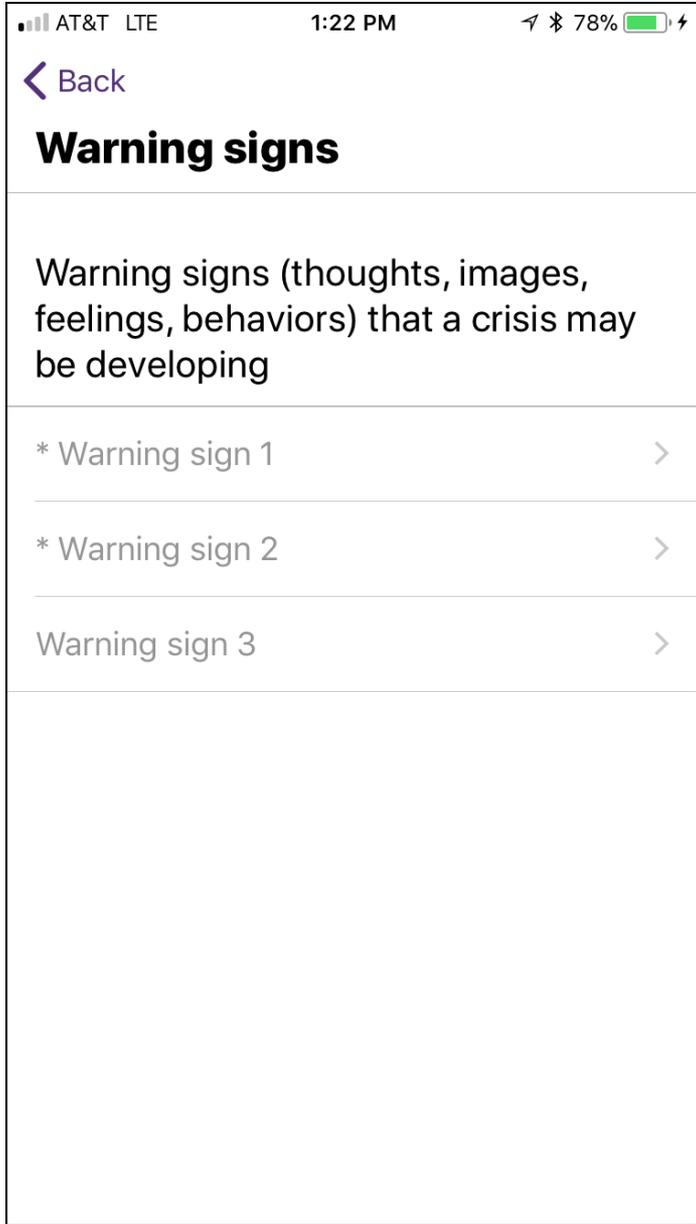
Close

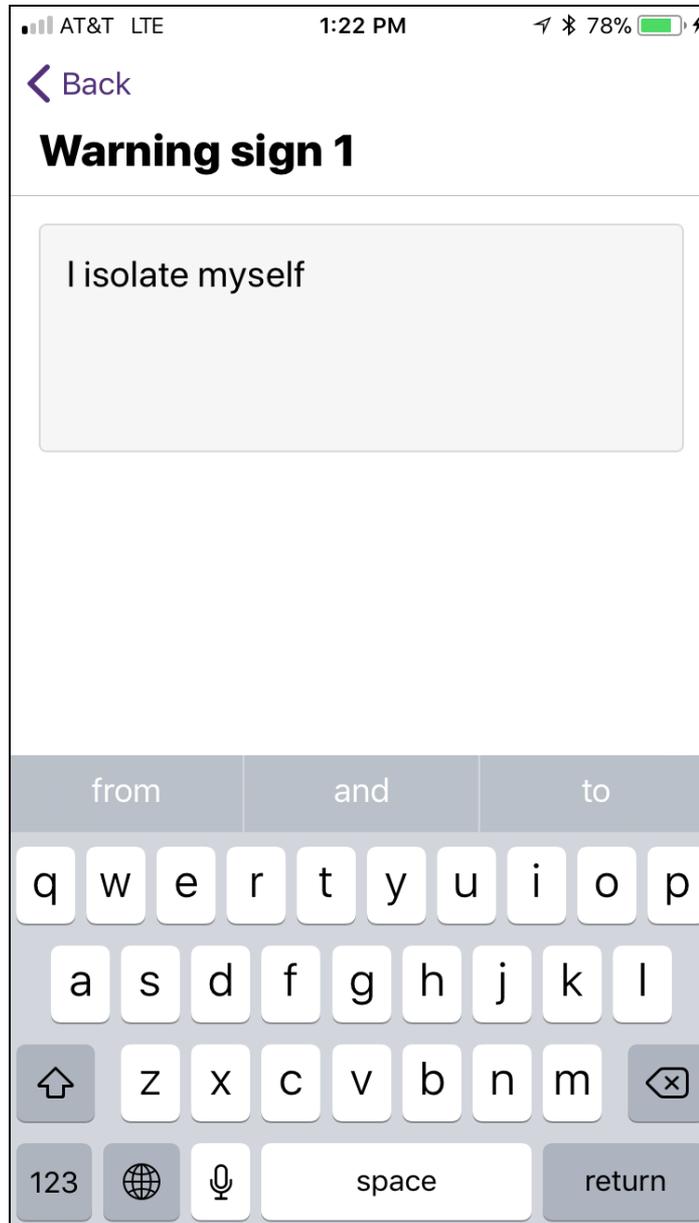
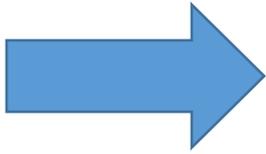
## Safety Plan for Doe, John

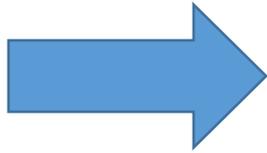
Complete each section of the Stanley Brown Template

- Warning signs >
- Internal coping strategies >
- Social supports and settings >
- Family and friends for crisis help >
- Professionals and agencies >
- Making the environment safe >
- Reason for living >

Continue







AT&T LTE 1:23 PM 78%

[Back](#)

## Warning signs

Warning signs (thoughts, images, feelings, behaviors) that a crisis may be developing

Warning sign 1  
I isolate myself  >

Warning sign 2  
I feel hopeless  >

Warning sign 3 >

AT&T 3:31 PM 81%

Cancel

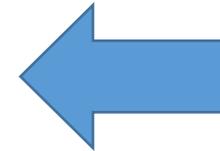
## Safety Plan

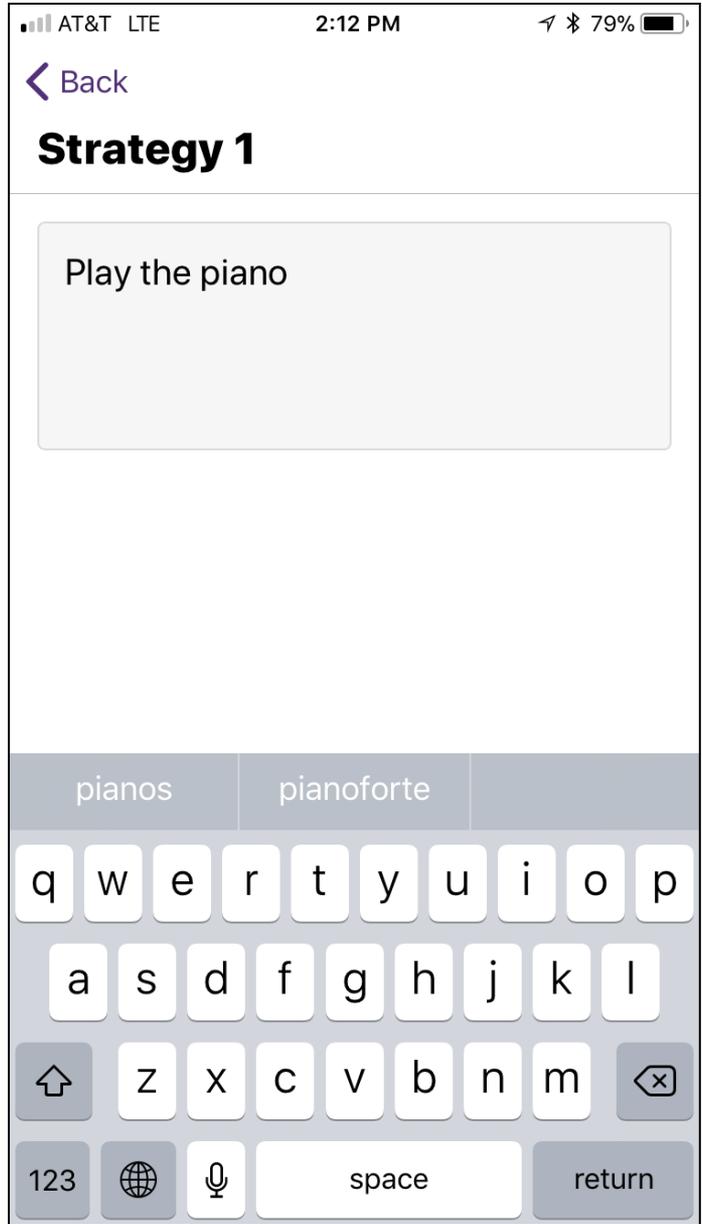
Smith, John

Enter information in each section.  
Required fields are marked with \*

- Warning signs  >
- Internal coping strategies >
- Social supports & settings >
- Family & friends for crisis help >
- Professionals & agencies >
- Making the environment safe >
- Reason for living >

Continue





[Back](#)

## Internal coping strategies

Things I can do to take my mind off my problems without contacting another person (distracting and calming activities)

Strategy 1  >  
Play the piano

\* Strategy 2 >

Strategy 3 >

[Back](#)

## Social supports & settings

People and social settings that provide distraction

### People

\* Person 1 >

Person 2 >

### Places

\* Place 1 >

Place 2 >

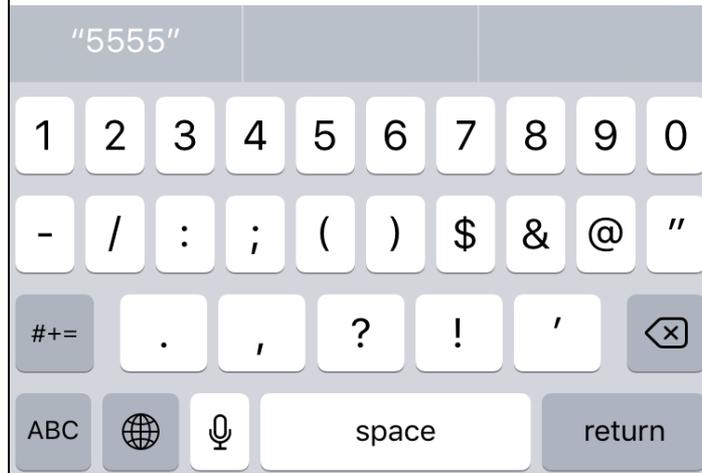
AT&T LTE 2:14 PM 79%

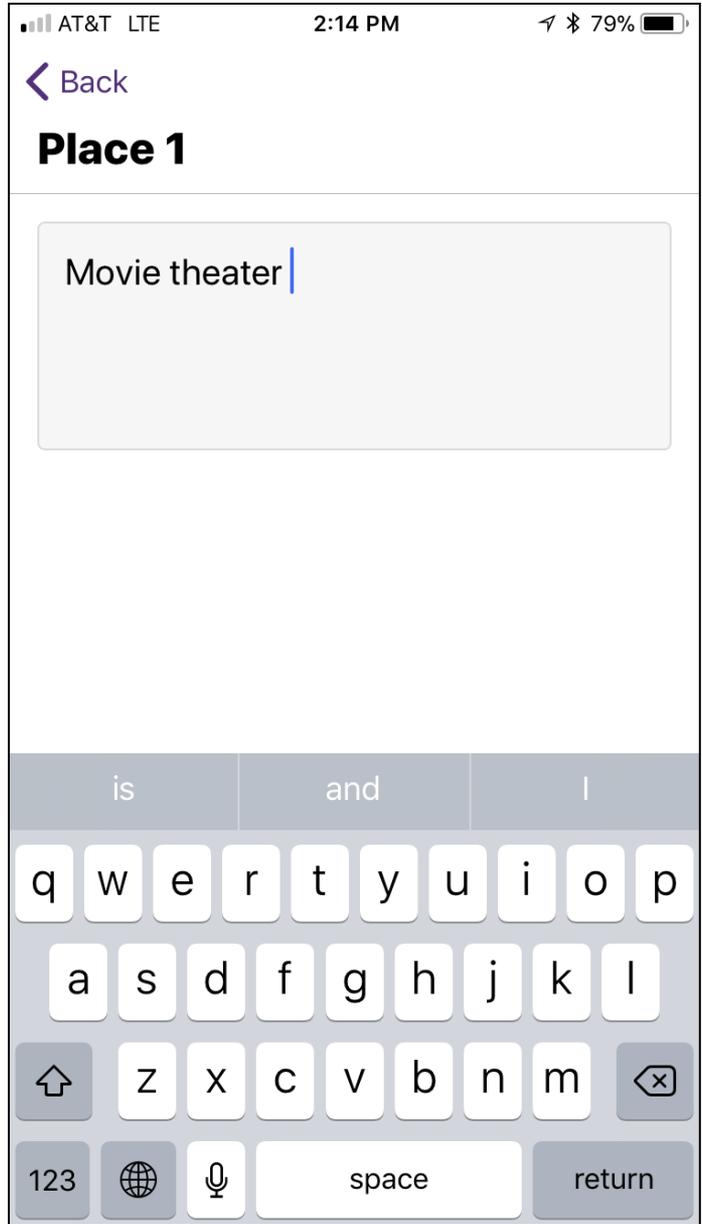
[Back](#)

## Person 1

\* Name

Phone Number



< Back

## Family & friends for crisis help

People I can ask for help with the crisis

\* Person 1 >

Person 2 >

Person 3 >

AT&T LTE 2:15 PM 79%

[Back](#)

## Person 1

\* Name

 ✕

Phone Number

777-777-7777

moms

mom's

q w e r t y u i o p

a s d f g h j k l

⬆ z x c v b n m ⬅

123

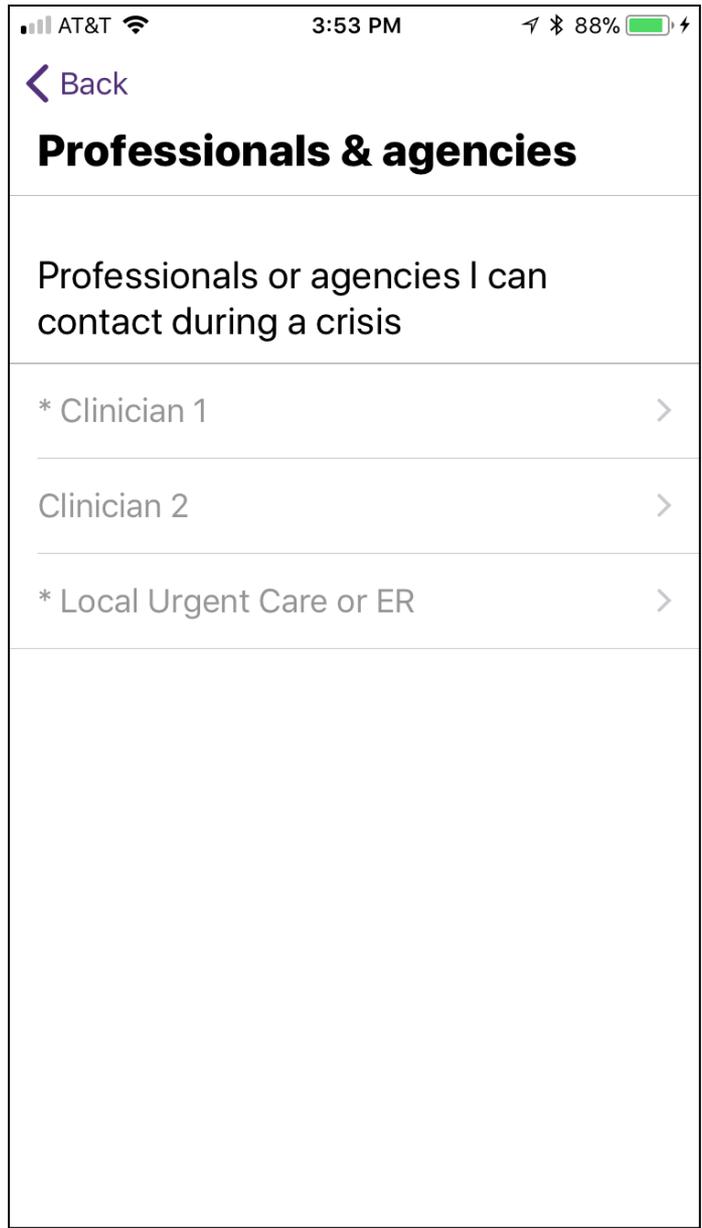


space

return



Office of  
Mental Health



AT&T 3:56 PM 89%

[Back](#)

## Clinician 1

\* Clinician Name

\* Phone Number

\* Clinician Emergency Contact #

 ✕

AT&T 4:00 PM 90%

[Back](#)

## Local Urgent Care or ER

\* Urgent Care or Hospital Name

General Hospital

\* Address

123 Main St  
New York, NY 10001

\* Phone Number

111-111-1111

q w e r t y u i o p  
a s d f g h j k l  
⌂ z x c v b n m ✕  
123 🌐 🗣️ space return

< Back

## Professionals & agencies

Professionals or agencies I can contact during a crisis

Clinician 1  
Dr. Jones  
888-888-8888  
999-999-9999  >

Clinician 2 >

Local Urgent Care or ER  
General Hospital  
123 Main St  
New York, NY 10001  
111-111-1111  >

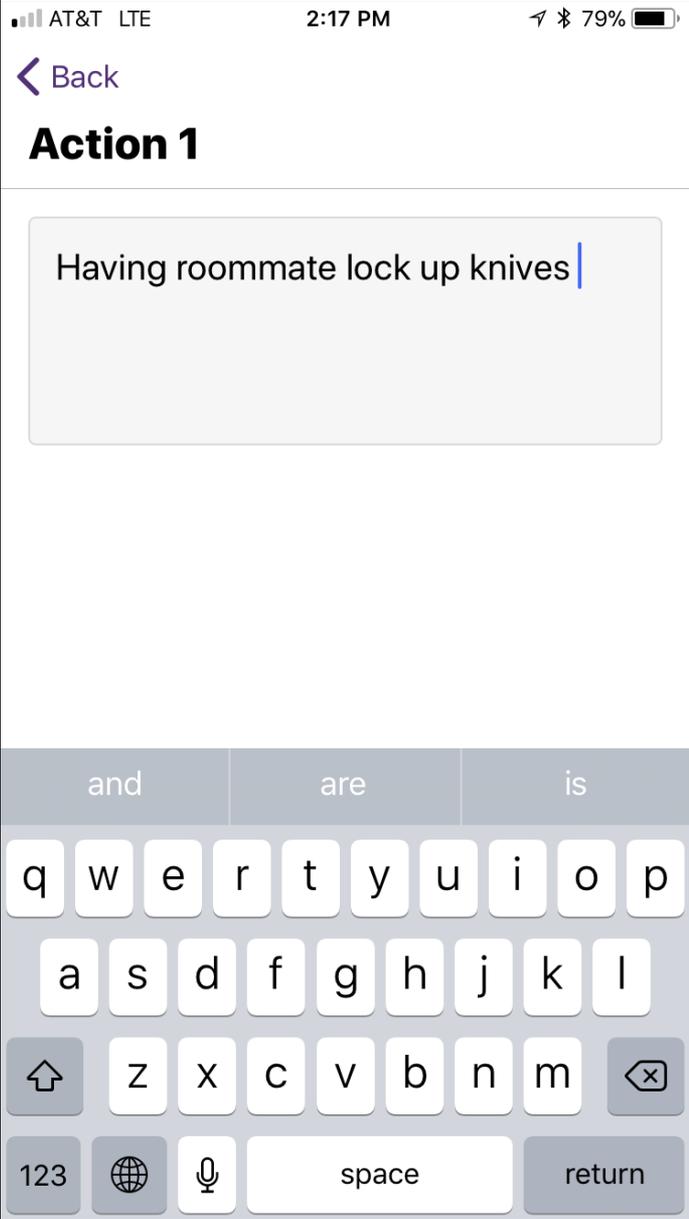
[Back](#)

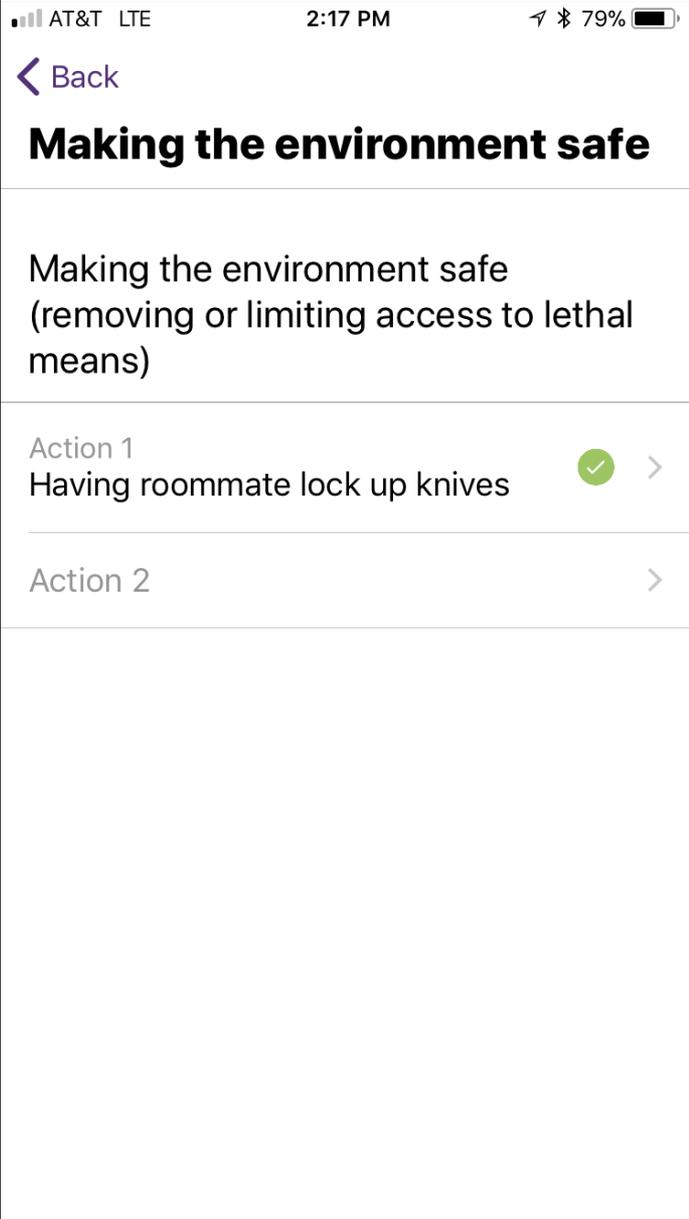
## Making the environment safe

Making the environment safe  
(removing or limiting access to lethal means)

\* Action 1 >

Action 2 >





< Back

## Reason for living

For my family



AT&T LTE 2:17 PM 79%

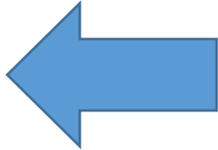
Cancel

Enter information in each section.  
Required fields are marked with \*

- Warning signs ✓ >
- Internal coping strategies ✓ >
- Social supports & settings ✓ >
- Family & friends for crisis help ✓ >
- Professionals & agencies ✓ >
- Making the environment safe >
- Reason for living ✓ >

Safety Plan Template ©2008 Barbara Stanley and Gregory K. Brown, is reprinted with the express permission of the authors. No portion of the Safety Plan

Continue



AT&T LTE 2:17 PM 79%

Cancel

Enter information in each section.  
Required fields are marked with \*

- Warning signs ✓ >
- Internal coping strategies ✓ >
- Social support ✓ >
- Family support ✓ >
- Professional support ✓ >
- Making the environment safe >
- Reason for living ✓ >

Safety Plan Template ©2008 Barbara Stanley and Gregory K. Brown, is reprinted with the express permission of the authors. No portion of the Safety Plan

Continue

**Required Sections**  
In order to continue you must complete all required fields

OK

AT&T LTE 2:18 PM 78%

Cancel

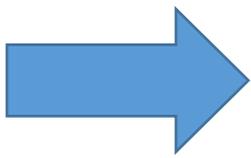
## Safety Plan

BACON, THOMAS

Enter information in each section.  
Required fields are marked with \*

- Warning signs ✓ >
- Internal coping strategies ✓ >
- Social supports & settings ✓ >
- Family & friends for crisis help ✓ >
- Professionals & agencies ✓ >
- Making the environment safe ✓ >
- Reason for living ✓ >

Continue



AT&T LTE 2:18 PM 78%

[Back](#)

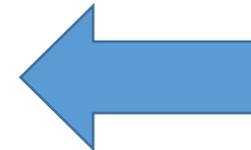
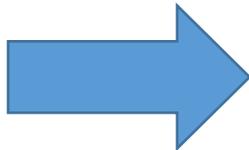
Please confirm that you wish to submit this safety plan and attach it to the Clinical Summary for **Smith, John.**

Date Completed **Nov 20, 2017**

**Add to Clinical Summary**

Agencies and hospitals with access to PSYCKES will be able to view this safety plan within the client's Clinical Summary after they obtain the client's consent or in the case of a clinical emergency.

August	22	2014
September	23	2015
October	24	2016
<b>November</b>	<b>25</b>	<b>2017</b>
December	26	2018
January	27	2019
February	28	2020



AT&T LTE
2:28 PM
70%

[Recent](#)

(Schizophrenia)  
 No Diabetes Monitoring (DM & Schizophrenia)

---

HARP ENROLLED - NOT HEALTH HOME ENROLLED  
 HARP Enrolled - Not Health Home Enrolled

---

POLYPHARMACY  
 Antipsychotic Two Plus  
 Psychotropics Four Plus

---

**Plans & Documents**

Safety Plan 1 >  
 most recent 11/20/2017

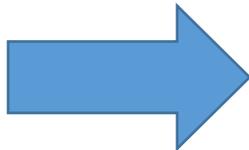
---

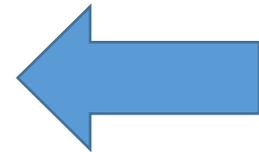
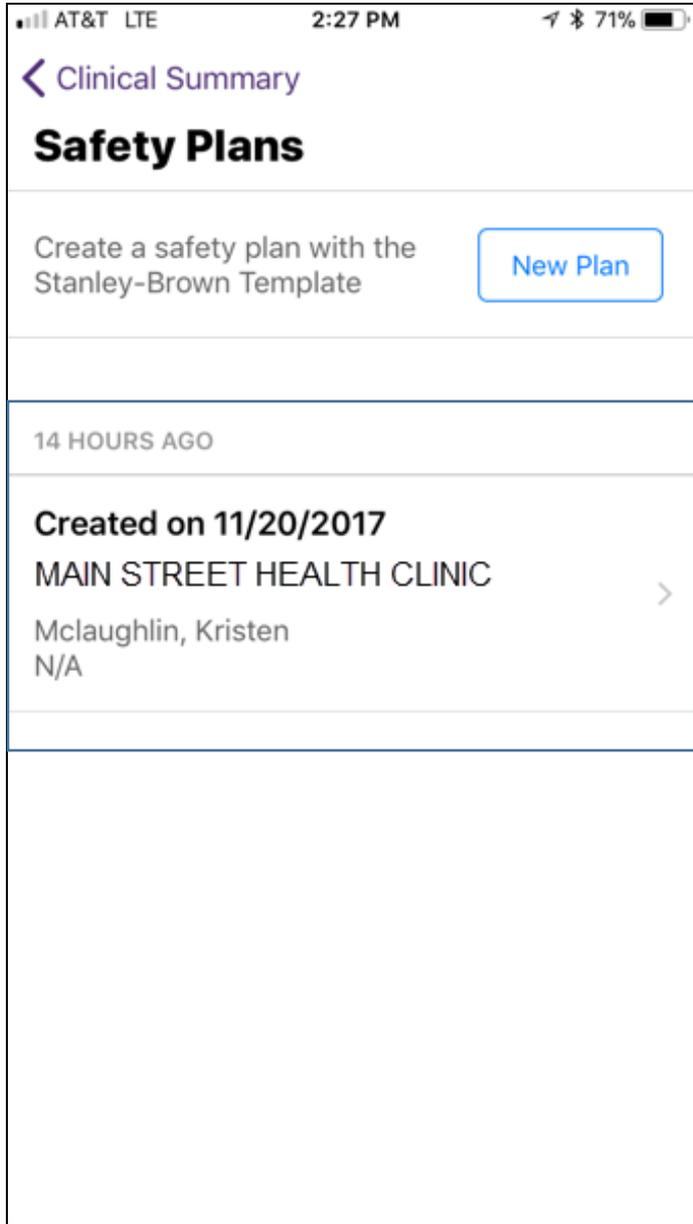
**Diagnoses**

Behavioral Health 3 >

---

General Medical 16 >

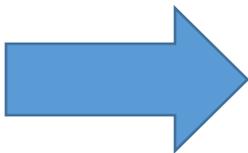




# Completing Assessments



**Office of  
Mental Health**



11:19 📶 🔋

[← Search Results](#)

---

**Plans & Documents**

[Complete Safety Plan](#) 📄

---

**Screenings & Assessments**

[Complete a PHQ-9 or C-SSRS](#) 📄

---

C-SSRS 4 >  
most recent on 01/02/2019

---

**Diagnoses**

Behavioral Health 5 >

---

General Medical 17 >

---

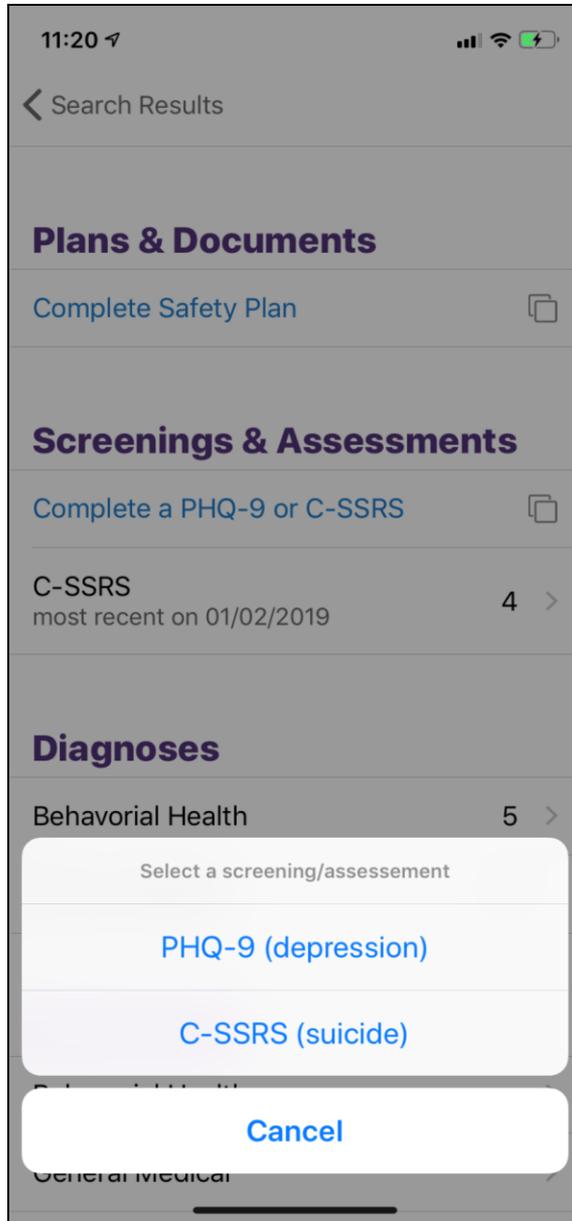
**Medications**

Behavioral Health >

---

General Medical >





5:12 📶 🔋

Cancel

### C-SSRS for Fzaukyn, Hiiknsc K

COLUMBIA-SUICIDE SEVERITY RATING SCALE

This suicide screening is intended to be administered as a Clinician-Client interview.

Date Completed Mar 6, 2019

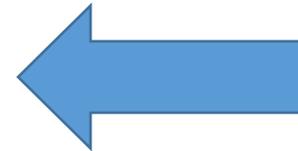
December	3	2016
January	4	2017
February	5	2018
<b>March</b>	<b>6</b>	<b>2019</b>
April	7	2020
May	8	2021
June	9	2022

Entered By L0000KAM

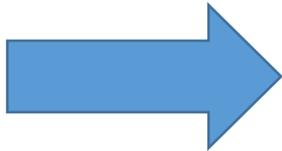
Agency GENERAL  
HOSPITAL CENTER

Survey Type

[Continue](#)



Timeframe will appear when Ongoing assessment is selected



5:12 📶 🔋

Cancel

Entered By L0000KAM

Agency GENERAL HOSPITAL CENTER

**Survey Type**

Initial assessment  
Includes lifetime questions

Ongoing assessment

**Timeframe**

Past Week

Past Month

Past 3 Months

Since Last Visit

Continue

5:13 Cancel

**C-SSRS for Hsijnwt, Fhevaji E**  
COLUMBIA-SUICIDE SEVERITY RATING SCALE

**Question 1.**  
In the past 3 months, have you wished you were dead or wished you could go to sleep and not wake up?

Yes

No

**Question 2.**  
In the past 3 months, have you actually had any thoughts about killing yourself?

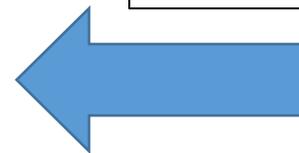
Yes

No

**Question 6.**  
In the past 3 months, have you done anything, started to do anything, or prepared to do anything to end your life?

Yes

When Question 2 is answered with “No,” user will jump to Question 6



9:22 📶 🔋

Cancel

**C-SSRS for Isdgvex, Vljdhf Q**  
COLUMBIA-SUICIDE SEVERITY RATING SCALE

**Question 1.**  
In the past 3 months, have you wished you were dead or wished you could go to sleep and not wake up?

Yes

No

**Question 2.**  
In the past 3 months, have you actually had any thoughts about killing yourself?

Yes

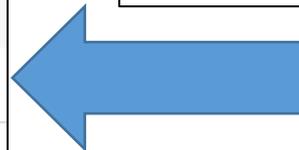
No

**Question 3.**  
In the past 3 months, have you been thinking about how you might do this?

Yes

No

When Question 2 is answered with “Yes,” Questions 3, 4, and 5 will appear



9:24



Cancel

**Question 4.**

In the past 3 months, have you had these thoughts and had some intention of acting on them?

Yes



No

**Question 5.**

In the past 3 months, have you started to work out or worked out the details of how to kill yourself? Do you intend to carry out this plan?

Yes



No

**Question 6.**

In the past 3 months, have you done anything, started to do anything, or prepared to do anything to end your life?

Yes



No



9:25   

Cancel

**Question 7.**  
Have you ever made a suicide attempt  
(took an action to end your life)?

Yes

No

How many attempts have you  
ever made?

How long ago was your most  
recent attempt?

Past 3 months

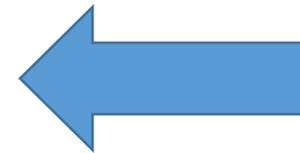
4-6 months

7-12 months

Between 1-3 years

Between 3-10 years

Over 10 years



If “yes” is selected for Question 7, you’ll need to indicate how many attempts and how long ago the most recent attempt was made

9:25 📶 🔋

Cancel

No

How many attempts have you ever made?

1

How long ago was your most recent attempt?

Past 3 months ✓

4-6 months

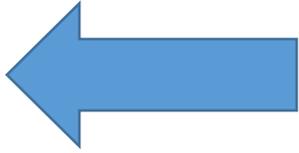
7-12 months

Between 1-3 years

Between 3-10 years

Over 10 years

Add to Clinical Summary



5:14



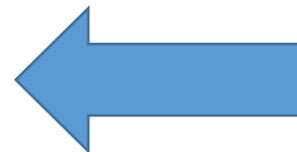
C-SSRS added for Hsijnwt, Fhevaji E

**Results summary:**

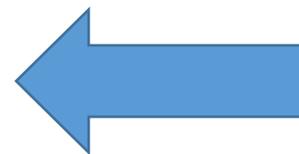
High Risk: 1 Suicide Attempt(s); Last attempt  
Past 3 months

Due to high risk, an updated Safety Plan is recommended. In the Clinical Summary, you can review existing plans or complete a new one.

[Back to Clinical Summary](#)



Office of  
Mental Health



< Clinical Summary

**C-SSRS**

COLUMBIA-SUICIDE SEVERITY RATING SCALE

Suicide screen

**03/06/2019**

GENERAL HOSPITAL CENTER

Client Self-Administered

RESULTS

High Risk: 1 Suicide Attempt(s); Last attempt  
Past 3 months

**2/10/2019**

ABC HOSPITAL

Client Self-Administered

RESULTS

High Risk: 1 Suicide Attempt(s); Last attempt  
Past 3 months

**01/02/2019**

ROCKLAND PSYCHIATRIC CENTER

Clinician 1

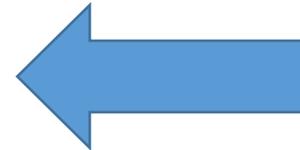
RESULTS

PSYCKES consent or emergency required to  
view results

**10/10/2018**

ROCKLAND PSYCHIATRIC CENTER

Clinician 1



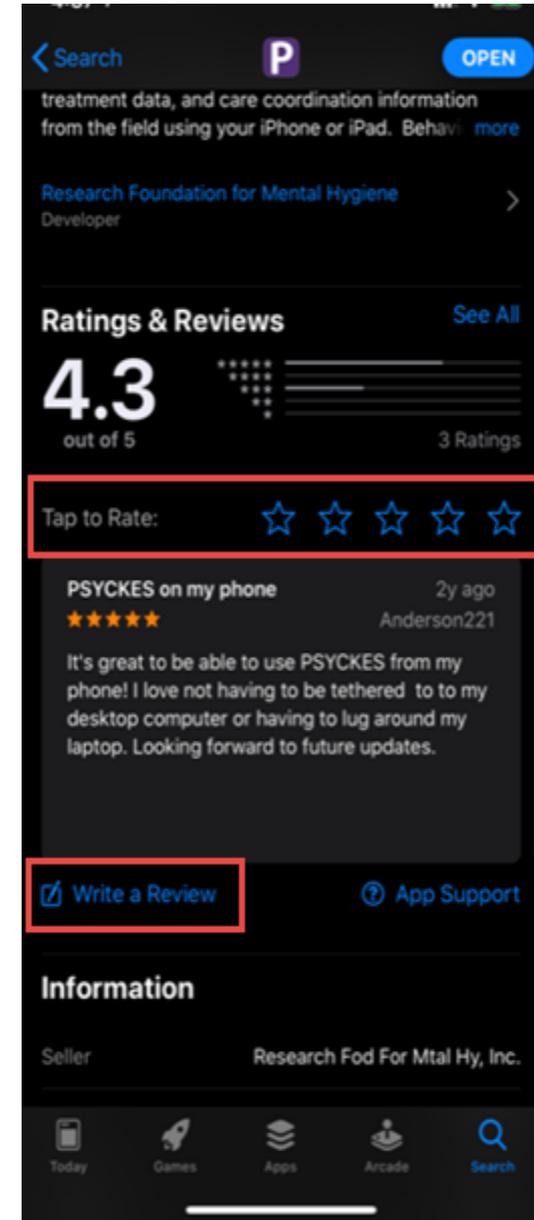
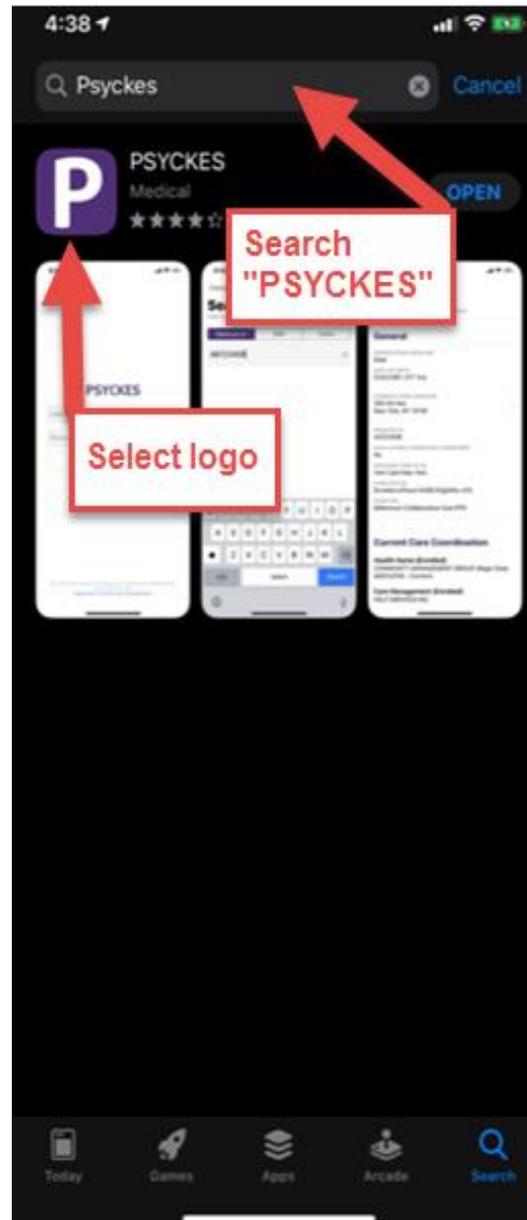
# Training & Technical Assistance

# PSYCKES Training

- PSYCKES website: [www.psyckes.org](http://www.psyckes.org)
- PSYCKES Mobile App User Guide Available on Website
- Webinars
  - Live webinars: Register on PSYCKES Calendar
  - Recorded webinars: Posted on PSYCKES Website

# Review the App!

1. Search "PSYCKES" in App Store
2. Select "P" PSYCKES logo
3. Scroll down on PSYCKES Page
4. Tap to Rate or Write a Review!



# Helpdesk Support

- [PSYCKES Help \(PSYCKES support\)](#)
  - 9:00AM – 5:00PM, Monday – Friday
  - [PSYCKES-Help@omh.ny.gov](mailto:PSYCKES-Help@omh.ny.gov)
- ITS Help Desk (Login & SMS support)
  - [OMH Employee ITS Helpdesk](#):
    - 1-844-891-1786; [fixit@its.ny.gov](mailto:fixit@its.ny.gov)
  - [Provider Partner ITS Helpdesk](#):
    - 1-800-435-7697; [healthhelp@its.ny.gov](mailto:healthhelp@its.ny.gov)